



## Moderating Role of Death Attitude in the Relationship between Existential Vacuum and Spiritual Wellbeing

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### Abstract

The primary goal of the present research was to examine the moderating role of death attitude between existential vacuum and spiritual wellbeing in a purposive sample of  $N = 300$  students of University of Sargodha. Existential vacuum subscale derived from Life Attitudes Profile (LAP; Reker & Peacock, 1981), Spiritual Wellbeing Scale (Darvyri et al., 2014), and Death Attitudes Profile (DAP; Wong, Reker, & Gesser, 1994) were used to measure existential vacuum, spiritual wellbeing, and death attitude, respectively. Moderation analyses were undertaken through PROCESS macro for SPSS (Hayes, 2013) and it suggested that death attitude weakened the negative relationship between existential vacuum and spiritual wellbeing. This suggested the buffering role of death attitude against the negative influence of existential vacuum on spiritual wellbeing. In other words, for individuals who have more positive attitude towards death, the negative effect of existential vacuum on spiritual wellbeing is weaker as compared to their counterparts who have less positive attitude towards death. Implications of the present study along with its limitations were discussed and recommendations for future research were suggested.

**Keywords:** Existential vacuum, spiritual wellbeing, attitude towards death

### 1. Introduction

Very little research had been conducted to operationalize and measure existential concepts. Little effort was made to objectify existential philosophy and to subject it to quantification, which complicates our ability to study these ideas. There has been minimal progress made in the literature so far in separating existential notions from other types of wellbeing, such as subjective well-being, psychological well-being, and spiritual well-being. This study looked at the conflicts related to existential concept of person such as existential vacuum, death attitude and spiritual well-being.

#### 1.1. Existential Psychology

Existential psychology developed during the last half of the twentieth century in response to the atrocities of World War II (Hartman & Zimberoff, 2003). Existential psychology combines the big questions of philosophy with the tenets of psychology, considers how these philosophical questions affect psyches and behaviors. Existential psychologists believe that it's not only important to identify and reduce the symptomatology of mental illnesses, addictions, relationship issues, and other psychological issues, but to go beyond the symptoms, addressing how a person defines meaning, purpose, and a life well lived (May 1971). May (1969) believe that psychology is too constricted by examining parts of the person rather than seeing the person in his/her entirety. When this approach was adopted, it seemed refreshing to psychologists compared to the prevailing theme in psychology at the time which was to address parts of the person (i.e., psychopathology) rather than the whole individual. Contrary to experimental psychology, phenomenologists contend that subjectivity is difficult to eradicate. Because it isn't something separate from objectivity at all. This inter-connectedness of subject and object is called intentionality. May (1969) also consider that the core tendency of personality is in achieving authentic being. This include accepting painful aspects of life and finding courage to persist in the face of ontological (state of being) anxiety. Moreover, he believes that the core characteristic of being in the world is the emphasis on unity of environment and person.

#### 1.2. Existential Vacuum

Meaninglessness is the human confrontation with an indifferent universe that compels individuals to construct their own meaning (Yalom 1980). Meaning refers to our sense of purpose. Meaninglessness is the chronic inability to believe in the truth, importance, usefulness, or interest value of any of the things one is engaged in or can imagine doing (Maddi 1970). Lack of meaning perpetuates anxiety, isolation, and despair. Manifestations of meaninglessness include suicidality, alcohol, or drug abuse or existential neurosis, depression, low self-esteem, identity crisis, boredom, emptiness, apathy, cynicism, and lack of direction. People who are mentally ill are frequently lured into a fierce argument about their life's meaning. They are handicapped in their attempts to engage in creative work and to take a stand toward their suffering. They are hampered in finding meaning in their experiences by the social stigma of their illness and need intensive support to overcome the toxic experiences of rejection they suffer in their families and society.

Frankl (1984) stated the term "existential vacuum" to explain the feeling of total meaninglessness in one's life. This feeling of meaninglessness is a void within the self, which does not go away. According to Frankl (1984), the existential vacuum manifests itself mainly in the state of boredom or apathy. He believes that the existential vacuum is responsible for 20% of all psychological issues. The existential vacuum is not a neurosis; rather, it is

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more of a frustration of the will to meaning (Frankl, 1988). Frankl (1977) writes that a lack of meaning creates the paramount existential stress, an existential sickness: "As to the feeling of meaninglessness, *per se*, it is an existential despair and a spiritual distress rather than an emotional disease or a mental illness" (p. 141).

Meaning in life is a significant psychological concept that has a profound impact on all of us to the point where it is literally a question of life and death... "The human being seems to require meaning. To live without meaning, goals, values, or ideals, seems to provoke considerable distress. In severe form it may lead to the decision to end one's life" (Yalom, 1980, p. 422). Bruce, Schreiber, Petrovskaya and Boston (2011), describe existential distress as a condition of morbid suffering in patients and may include concerns related to hopelessness, futility, meaninglessness, disappointment, remorse, death anxiety and a disruption of personal identity.

Yalom cites Frankl (1972), whose theory proposes that two stages exist in the syndrome of meaninglessness. The first stage is the existential vacuum, which is characterized by a subjective state of boredom, apathy, and emptiness. One feels cynical, lacking direction and questions the point of life. One may have free time but there is nothing one feels compelled to do. Frankl named the second stage, existential neurosis and says symptomatic manifestations such as alcoholism, depression, obsessions, delinquency, hyperinflation of sex, or dare-devilry for example, will "rush in to fill the vacuum" (1980, p. 450).

### 1.3. Death Attitude

Death is the most obvious ultimate concern. The core conflict is between the awareness of the inevitability of death and the desire to continue living (Spinoza, as cited in Elwes, 2008). Humans construct denial-based defences against their fear of dying. Human character is shaped by these defenses, which also have an impact on how people develop, struggle, and get sick. There are two modes of existence: one of forgetfulness of being (a limited awareness of the true nature of existential ultimate concerns including death) and one of mindfulness of being (full awareness of the immense of death and ultimate existential concerns) which is described as authentic (Heidegger, 1996). The desire to transcend death is so ultimate and profound that it has been described as the source of all culture and creativity (Becker, 1973). Humans attempt to achieve immortality in the following ways: 1) biologically through procreation, 2) theologically through spiritual evolution, 3) creatively through work and art, 4) experientially through intense life dramas, adventures, and experiences, and 5) by immersing oneself in the forces of nature (Lifton, 1973).

Rank (1945) believed a person was thrown back and forth in the process of individuation between the fear of life and the fear of death. That is, between two poles of possibility: the affirmation of one's autonomy, emergence and potential that leaves one feeling unprotected and lonely and 2) the fear of loss of individuality by being dissolved back into the whole and becoming invisible.

Yalom (1980) places death and dying at the forefront of the four ultimate concerns. He says an instinctive fear of death exists at every level of human awareness, from the most conscious and intellectualized, to the deepest depths of the unconscious, which manifests as death anxiety. When worry reaches extreme levels, a person's life force can sometimes be absorbed by their refusal to accept death. "The fear of death plays a major role in our internal experience; it haunts as nothing else does; it rumbles continuously under the surface; it is a dark, unsettling presence at the rim of consciousness" (Yalom, 1980, p. 27).

### 1.4. Spiritual Well-Being

Ellison (1983) suggested that spiritual well-being "arises from an underlying state of spiritual health and is an expression of it, much like the color of one's complexion and pulse rate are expressions of good [physical] health". Fehring, Miller, and Shaw (1997) supported this view by adding "spiritual well-being is an indication of individuals' quality of life in the spiritual dimension or simply an indication of their spiritual health". Although Ellison only used two facets of spiritual wellbeing in the SWBS, four main themes appear in the framework definition of spiritual well-being proposed by the National Interfaith Coalition on Aging (NICA, 1975), "the affirmation of life in a relationship with God, self, community and environment that nurtures and celebrates wholeness".

Spiritual well-being, high levels of spirituality were associated with healthy personality characteristics (Tloczynski, Knoll, & Fitch, 1997). Theorists noted "...that a spiritual approach to life fosters well-being" (Tloczynski, et. al., 1997, p. 212). Furthermore, "Moberg (1971) conceptualized spiritual well-being as two-faceted, with both vertical and horizontal components," (Ellison, 1983, p. 331). The two facets reflected wellbeing in relation to God and in sense of life purpose and satisfaction. In regard to environmental factors, religious and existential well-being was correlated with population density of one's surroundings (Ellison, 1983).

## 2. Review of Literature

Meaninglessness, if left untreated, has been shown to be a modern illness that can lead to symptoms of depression, hopelessness, anxiety, or ill health (Ruffin, 1984). Meaning of life has been positively associated with physical/psychological health/well-being and psychopathology and seems to serve as a mediator factor in psychological wellbeing (Chan, 2009; Fox & Leung, 2009; Halama & Dedova, 2007; Ho, Cheung & Cheung, 2010; Holahan, Holahan & Suzuki, 2008; Idrees & Malik, 2022; Kazim & Rafique, 2021; Senturk & Ali, 2021; Senturk & Ali, 2022) and death acceptance/fear of death (Routledge & Juhl, 2010; Thompson, Noone & Guarino, 2003). Considering the current COVID-19 pandemic situation, people's psychological and physical health related

attitudes and behaviors have been affected, along with death anxiety and depression (Asif et al., 2020; Asif et al., 2022; Idrees et al., 2022; Lee et al., 2020; Menzies & Menzies, 2020).

Frankl has coined the term “existential vacuum” to explain the feeling of total meaninglessness in one’s life (Frankl, 1984). This sense of meaninglessness is a gap within oneself that never fills. According to Frankl, the sense of boredom or apathy is the primary way the existential vacuum presents itself (Frankl, 1984). He asserts that the existential vacuum contributes to 20% of all psychological issues.

Existential isolation is a vale of loneliness with many approaches, and Yalom believes confrontation with the ultimate concerns of death and freedom inevitably lead the individual into the vale, as can a catastrophic event, where everything once considered safe and predictable, permanent, precious, and good, can suddenly vanish. He writes of “the nothing” that is at the core of being and that “in the face of nothing, nothing and no being, can help us; it is at that moment when we experience existential isolation in its fullest” (p. 360). Indeed, Josselson (2008) comments, “Many people are in touch with their dread of existential isolation when they recognize the terror of feeling that there may be moments when no one in the world may be thinking of them” (p. 56). According to him, individuals who are dying are the ones who experience the phenomena the most since that is when they are most aware of the fact that they were born alone and must leave the world alone. “We may want others to be with us at death, we may die for another, or for a cause but no one can, in the slightest degree, have one’s solitary death taken from him or her” (2000, p. 1).

### 3. Methodology

#### 3.1. Research Design

The study was co-relational research, and a cross-sectional survey research design was adapted. The research was conducted in two parts. The first part was pilot study and the other was the main study. Purposed hypotheses were tested in the second part, which was the main part of the study.

#### 3.2. Sample

Data was collected through convenient sampling technique. The sample of the data were undergraduate students belonging to University of Sargodha ( $N=300$ ) in which male and females represented equally. Their age range varies from 19-27 years and students were taken from three faculties which includes faculty of Science, Arts and Social Science.

#### 3.3. Instruments

Existential vacuum subscale was derived from Life Attitudes Profile (LAP; Reker & Peacock, 1981), Spiritual Wellbeing Scale (Darvyri et al., 2014), and Death Attitudes Profile (DAP; Wong, Reker, & Gesser, 1994) were used to measure existential vacuum, spiritual wellbeing, and death attitude, respectively.

#### 3.4. Hypotheses

- i. Existential vacuum will be negatively co-related with both spiritual wellbeing.
- ii. Death attitude will moderate the relationship between existential vacuum and spiritual wellbeing.

### 4. Results

**Table 1: Descriptive and Psychometric Properties of Scales of Present Study**

Variables	<i>N</i>	<i>M</i>	<i>SD</i>	$\alpha$	Range		
					Actual	Potential	<i>Sk</i>
SWB	300	84.29	14.01	.70	44-122	20-140	-.11
DAP	300	78.10	19.65	.85	23-168	21-147	-.10
EV	300	23.84	7.05	.69	10-43	8-56	.33

Note: SWB=Spiritual wellbeing; DAP = Death attitude profile; EV= Existential vacuum

Table 1 shows the psychometric properties of the present study. It also depicts the internal consistency index (alpha coefficient) for all scales used in this study.

Table 2 demonstrates the demographic characteristics of the sample of study. The male students ( $f = 142$ , 46.9%) were lesser in number as compared to the female students ( $f = 158$ , 52.1%). The sample included students with age ranging from 19-22 years of age, 41.9%, 44.6% of 23-26 years of age and 12.5% of 27-31 years of age. The sample belonging to nuclear family system ( $f = 165$ , 69.7%) were greater in number as compared to joint family system ( $f = 135$ , 30.3%). The sample belonging to in between birth order ( $f = 172$ , 56.8%) were higher in number as compared to other which includes first born ( $f = 98$ , 56.8%), last born ( $f = 29$ , 9.6%) and only child ( $f = 1$ , .3%). Table 3 describes the correlations among the study variables. It indicated that the spiritual well-being had a significant negative correlation with Death Attitude Profile; Existential Vacuum and spiritual well-being had a negative significant correlation.

The table 4 presents findings of moderation analysis through PROCESS macro for SPSS whereby model 1 was specified. Existential vacuum had significant negative influence on social wellbeing ( $B = -.52$ ,  $t = 4.37$ ,  $p < .001$ ); death attitude had not significant influence on social wellbeing ( $B = .02$ ,  $t = .59$ ,  $p > .05$ ); and the interactive effect

of existential vacuum and death attitude was significant ( $B = .02$ ,  $t = 3.87$ ,  $p < .001$ ). This suggested that death attitude as moderated the positive relationship between existential vacuum and spiritual wellbeing.

**Table 2: Demographic Characteristics of the Sample (N = 300)**

Sr. No.	Variables	Categories	F	%
1	Gender	Male	142	46.9
		Female	158	52.1
2	Age	19 -22	127	41.9
		23-26	135	44.6
		27-31	38	12.5
3	Family System	Joint	135	30.3
		Nuclear	165	69.7
4	Birth order	First Born	98	32.3
		Last Born	29	9.6
		In Between	172	56.8
		Only Child	1	.3

**Table 3: Pearson Correlations among Variables of the Present Study (N= 300)**

Variables	1	2	3
1. Spiritual well being	-	-.06	-.24**
2. Death Attitude Profile		-	.31***
3. Existential Vacuum			-

\* $p < .05$ . \*\* $p < .01$ . \*\*\* $p < .001$

**Table 4: Death Attitude as Moderator between Existential Vacuum and Spiritual Wellbeing (N= 300)**

Predictors	B	SE	R <sup>2</sup>
Existential Vacuum	-.52***	.11	
Death Attitude	.02	.04	.08***
EV× DA	.02***	.006	

Note: EV= Existential Vacuums; DA= Death Attitude, \* $p < .05$ . \*\* $p < .01$ . \*\*\* $p < .001$

#### 4. Discussion

The present study was conducted to check the relationship of existential vacuum on spiritual wellbeing of students. Moderating role of death attitude was also studied. This study was conducted in two stages. In the first stage instruments were selected and arranged according to the population and their psychometric properties were also tested. The proposed hypothesis was tested in the second stage of the study.

After assessing the reliability of all the using scales it was concluded that all scales are having significant reliability (see Table 1). To find the relation between all the constructs Pearson co-relation between all the variables was computed (see Table 3). Findings of the Pearson co-relation make way for further statistical analysis that was required to meet our objectives of the study. For further large assessment it was essential to do Pearson co-relation among all study variables to check the way in which they are relating to each other.

Spiritual wellbeing is a part of a healthy and stable personality because this adds other ingredients of spirituality which also enhances psychological wellbeing. Spiritual wellbeing is the affirmation of life in a relationship with God, self, community, and environment that nurtures and celebrates wholeness. If you are having a good relationship with God than your soul will be calm and satisfied, you will not be worried about daily routine work and you will not feel any type of gap in your lives but in existential vacuum, all type of these feelings develops in personality of person. By keeping in mind all these possibilities, it was hypothesized that spiritual wellbeing and existential vacuum will relate negatively. According to the results of the study both are having negative co-relation (See Table 3).

Overall spiritual Well-being contributes to happiness, but a person's attitude toward death also plays a role in filling the resulting existential vacuum and ensuring that happiness persists. A person is not successful and satisfied who is being afraid of death and had negative attitude towards death. Death Attitude is the phenomenon that weakens the negative relationship between existential vacuum and spiritual wellbeing. That's why it was hypothesized that death attitude will moderate the relationship between existential vacuum and spiritual wellbeing and results of the study clearly shows that hypothesis of the present study is supported (see Table 3). Yalom places *death and dying* at the forefront of the four ultimate concerns. According to him, there is an innate fear of dying that shows as death anxiety at all levels of human awareness, from the most intellectualized and conscious to the most subconscious. Sometimes the anxiety is of such enormous proportions that a considerable amount of a person's life energy is thus consumed in the denial of death. "The fear of death plays a major role in our internal experience; it haunts as nothing else does; it rumbles continuously under the surface; it is a dark, unsettling presence at the rim of consciousness" (Yalom, 1980, p. 27) and this fear can be changed into positivity by handling yourself to religion.

## 5. Conclusion

It is concluded that existential vacuum significantly affects a person's spiritual well-being and is a major factor in determining whether they are happy or dissatisfied. Our attitudes towards death whether it is positive or whether it is negative also defines that on which way our life will go because death is called to be the driving force of life. As existence is compulsory to live and if your existence is challenged or you itself considering yourself existentially alone, anxious and working hard to full fill the vacuum in your life than it becomes very difficult to balance the level of well beings and happiness. So, if we sum up, we can say that life is all about existence and if you are not existentially well then you can never become happy.

### 5.1. Strengths

The strengths of the study are:

- i. It focused on the existential issues for the students which had not studied too much in the past 20 years.
- ii. It can also be generalized to the other institutions of Pakistan.
- iii. It involved almost equal number of males and females considering the gender differences.
- iv. This study goes out of the box and focused on existential issues and attitude towards death as an ingredient of wellbeing and happiness

### 5.2. Limitations

- i. Population was taken from only a specific area.
- ii. All existential issues had not been studied. Focus was only on the major ones.
- iii. The study did not answer how these existential issues develop in persons.

### 5.3. Implications

- i. This study focuses on the existential conflicts, which have been rarely studied
- ii. In terms of research, this study provides an indigenous perspective on existential issues and their influences on spiritual wellbeing in a coherent theoretical model, which may pave the way for future research in this under-researched area.
- iii. This study provides ground for clinical psychologists to work and apply existential therapies.

## References

Asif, M., Ghazal, S., Kazim, M., Idrees, M., & Zaheer, U. A. (2020). Optimistic bias about COVID-19 infection susceptibility across demographics in Pakistan. *Journal of Research in Psychology*, 2(2), 19-23. <https://doi.org/10.31580/jrp.v2i2.1488>

Asif, M., Idrees, M., Ghazal, S., & Ishaq, G. (2022). Relationship of emotional intelligence and life satisfaction: Mediating role of affectivity in medical students. *ASEAN Journal of Psychiatry*, 23(2), 1-8. Doi: 10.54615/2231-7805.47319

Becker, E. (1994). *The Denial of Death*. New York: Free Press.

Bruce, A., Schreiber, R., Petrovskaya, O., & Boston, P. (2011). Longing for ground in a ground(less) world: a qualitative inquiry of existential suffering. *BMC Nursing*, 10 (2).doi:10.1186/1472-6955-10-2

Ellison, C. W. (1983). Spiritual well-being: Conceptualization and measurement. *Journal of Psychology and Theology*, 14, 330-340.

Fehring, R., Miller, J. & Shaw, C. (1997). Spiritual well-being, religiosity, hope, depression, and other mood states in elderly people coping with cancer. *Oncology Nursing Forum*, 24, 663-671.

Frankl, V. E. (1977). *The unconscious God – Psychotherapy and theology*.London, England: Hodder and Stoughton, p. 141.

Frankl, V. E. (1984). *Man's Search For Meaning* {rev. ed.}. New York: Washington Square Press.

Frankl, V. E. (1988). *The Will To Meaning: Foundations and Applications of Logotherapy*. (rev. ed.). New York: Penguin Group.

Hartman, D., & Zimberoff, D. (2003).The existential approach to heart-centered therapies.*Journal of Heart Centered Therapies*, Spring, 1-32.

Heidegger, M. (1962). *Being and Time*. New York: Harper and Row.

Idrees, M., & Malik, F. (2022). Attachment Styles and Interpersonal Problems in University Students Living in Hostels: Mediating Role of Emotional Reactivity and Cutoff. *European Journal of Educational Research*, 11(3), 1595-1605.

Idrees, M., Asif, M., & Ghazal, S. (2022). Effect of risk perceptions, fear and myths about covid-19 infection susceptibility on protective behaviors in Pakistan. *ASEAN Journal of Psychiatry*, 23(2). Doi: 10.54615/2231-7805.47324

Ismail, S., & Ali, A. (2021). Socioeconomic Determinants of Gender-Specific Life Expectancy in Turkey: A Time Series Analysis. *Sosyoekonomi*, 29(49), 85-111.

Josselson, R. (2008). *Irvin D. Yalom: On psychotherapy and the human condition*. New York, NY: Jorge Pinto.

Kazim, S. M., & Rafique, R. (2021). Predictors of marital satisfaction in individualistic and collectivist cultures: a mini review. *Journal of Research in Psychology*, 3(1), 55-67.

Lee, S. A., Jobe, M. C., Mathis, A. A., & Gibbons, J. A. (2020). Incremental validity of coronaphobia: Coronavirus anxiety explains depression, generalized anxiety, and death anxiety. *Journal of anxiety disorders*, 74, 102268.

Maddi, S. (1970). *The Search for Meaning in The Nebraska Symposium on Motivation*, (ed.), W. Arnold, & M. Page. Lincoln: University of Nebraska Press, 137-186.

May, R. (1969). *Existential Psychology: Second Edition*. New York: Random House.

Menzies, R. E., & Menzies, R. G. (2020). Death anxiety in the time of COVID-19: Theoretical explanations and clinical implications. *The Cognitive Behaviour Therapist*, 13.

Ruffin, J. E. (1984). The anxiety of meaninglessness. *Journal of Counseling and Development*, 63, 40-42.

Senturk, I., & Ali, A. (2022). The Relationship between Institutional Quality and Welfare: Panel-SUR Analysis on BRICS-T Countries. *Journal of Policy Research*, 8(1), 45-52.

Tloczynski, J., Knoll, C., & Fitch, A. (1997). The relationship among spirituality, religious ideology, and personality. *Journal of Psychology and Theology*, 25, 208-213.

Yalom, I. D. (1980). *Existential psychotherapy*. New York, NY: Basic Books, 422.