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ARTICLE REVIEW

Are Children Afraid of Death? A Developmental Analysis of Thanatophobia in Early Childhood

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ABSTRACT

Children can fear death long before they understand what death is. Thanatophobia, or fear of dying, is most frequently studied in adolescence or adulthood, yet strong emotional reactions to mortality can appear in early childhood, sometimes even before children have a cohesive or biologically correct understanding of death. Using a narrative integrative method, this review investigates early childhood fear of death using attachment theory, bioecological perspectives, and cognitive-developmental models. According to the literature, children's fear of death often arises before they have a coherent conceptual understanding of it and is influenced by fragmented acquisition of core death concepts, reliance on caregivers for emotional regulation, and sociocultural contexts surrounding loss and dying. Empirical evidence suggests that emotional involvement with death precedes cognitive mastery and is exacerbated by relational insecurity, loss exposure, large-scale crises, and anticipatory mourning. Children commonly hold both biological and supernatural ideas about death, demonstrating that death-related fear does not fade exclusively with cognitive development. Despite increased attention, many gaps exist, including a lack of longitudinal research, underrepresentation of non-Western cultures, and insufficient separation between thanatophobia and other childhood anxiety disorders.

Keywords: Thanatophobia, Death Anxiety, Attachment Theory, Bioecological Model, Cognitive-Developmental Theory, Childhood Bereavement, Mortality Awareness, Afterlife Beliefs, Prolonged Grief Disorder, Cognitive-Behavioral Therapy, Death Education

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INTRODUCTION

Rationale

Some children must understand the concept of death before they even learn how to tie their shoes, and for a portion of them, that experience is horrifying rather than merely curious. Intense fear of death or the dying process is referred to in this paper as thanatophobia, which is sometimes used interchangeably with death anxiety in modern literature[1]. In the current global context, this issue is especially pertinent because children are more exposed to death, loss, and visible grief due to ongoing armed conflicts and the widespread distribution of war-related content on social media, such as widely reported photos and videos of children grieving their parents in conflict areas. Evidence indicates that emotional responses to death can arise far earlier in development, even when children lack a fully developed mental understanding of what death involves[2].

Importantly, children's death-related fear is limited by their cognitive capacities to describe and understand. Because of this, it is impossible to study thanatophobia in early life without considering how children are coming to perceive death. Understanding death's universality, inevitability, irreversibility/finality, non-functionality, the cessation of bodily functions, and the biological causality underlying death are some of the fundamental elements of death understanding that developmental research has consistently identified as gradually emerging throughout childhood[3]. Due to the uneven and frequently inadequate acquisition of these elements during early life, children may feel extreme anxiety without the cognitive framework required to contextualize or control it. Although a large amount of research has been done on how children learn about death, fewer studies have critically examined the relationship between early childhood fear of death and this developing awareness. Therefore, examining this topic enables a targeted assessment of how well developmental theory is applied to conceptualize early thanatophobia manifestations surrounding children's emotional reactions to mortality.

Structure

This review is organized to give a precise and targeted assessment of thanatophobia in young children. First, it details the methodology, which includes the narrative approach and the tactics utilized to find and synthesize pertinent material. Second, it summarizes the theoretical frameworks that underpin it, such as attachment theory, ecological/bioecological theory, and cognitive-developmental theories of death understanding. These frameworks collectively explain how children's fear of death is shaped by their emotional regulation, relational dependence, and cognitive development. Third, the review discusses empirical research on children's fear of death and comprehension of death, paying special attention to how children learn about death, how cognitive and emotional representations form, and how these processes are impacted by caregiving contexts and individual experiences. A discussion of children's views about the afterlife and cross-cultural variations in how death is understood and emotionally processed follows parts that look at unique situations that exacerbate death-related dread, such as pandemics and parental terminal illness. The study then looks at intervention research, focusing on more general psychoeducational techniques to lessen anxiety associated with death as well as cognitive-behavioral approaches to Prolonged Grief Disorder (PGD). Fourth, the discussion brings these findings together from theoretical and empirical perspectives, critically assessing patterns, contradictions, and conceptual constraints in the existing literature. Fifth, the paper finishes with a summary of key findings, identification of major gaps (such as a lack of longitudinal and cross-cultural research), and recommendations for future research and practice.

METHODS

This paper offers a narrative integrative review that looks at how children's growing cognitive, emotional, and relational awareness of mortality relates to their early fear of death. Because the topic encompasses a variety of theoretical approaches (developmental, attachment-based, ecological, cultural, and clinical perspectives) and a diverse body of empirical, theoretical, and qualitative research that cannot be systematically synthesized quantitatively, a narrative approach was chosen.

Relevant literature was located by searching major academic databases utilized in psychology, health, and developmental research, such as PsycINFO, PubMed, Scopus, and Web of Science. To guarantee thorough coverage of fundamental models of death understanding and fear of death in children, manual screening of reference lists from important review articles and significant theoretical works was added to database searches.

Combinations of the phrases "fear of death," "death anxiety," "thanatophobia," "children," "early childhood," "death understanding," "grief," "bereavement," "attachment," "mortality," and "afterlife beliefs" were used for the literature search. To capture multidisciplinary and psychological studies relevant to early developmental stages, these phrases were modified across databases.

To reflect the growth of empirical research on children's comprehension of death, grieving, and death-related anxiety, the major time frame for included studies was 2000 to 2025. Nonetheless, prior pioneering works, such as traditional cognitive-developmental explanations of death comprehension and ecological and attachment-based frameworks, were purposefully included when they continue to be theoretically or conceptually fundamental to the subject. To place current findings within their original theoretical frameworks and track the developmental assumptions that continue to influence current research, it was vital to include these older sources.

Studies were considered if (a) they focused on children or adolescents, particularly in early and middle childhood, (b) addressed emotional, cognitive, developmental, or relational aspects of death, dying, fear of death, grief, or bereavement, and (c) were published in peer-reviewed journals.

Research that did not address psychological or emotional elements of mortality, only addressed death in a biological or end-of-life care context without developmental significance, or only focused on adult populations was eliminated.

Due to the narrative structure of the review, articles were synthesized thematically rather than systematically. The literature was organized into major conceptual domains that reflect the aims of the review, including: (1) theoretical frameworks relevant to early death-related fear; (2) sources of children's knowledge about death; (3) cognitive and emotional representations of mortality; (4) contextual and situational factors that intensify death-related anxiety; (5) beliefs about the afterlife and cultural influences; and (6) intervention approaches related to grief and death anxiety. This integrative technique enabled a developmentally informed synthesis of how fear of death might originate in early life, despite inadequate or fragmented conceptual understanding.

THEORETICAL FRAMEWORK

Attachment Theory

Attachment theory provides a useful framework for understanding how young infants experience and manage death anxiety. As caregivers serve as a child's primary source of safety and emotional regulation during early development, attachment theory, which was first developed by Bowlby, suggests that children are biologically predisposed to seek proximity to caregivers in response to threat, distress, or

uncertainty[4]. Children form internal working models of themselves and others through frequent interactions with attachment figures, which influence expectations for the availability, responsiveness, and dependability of emotional support. Since these internal models are crucial to how children react to loss and separation, this theory is especially important in identifying early signs of thanatophobia. Death entails the permanent loss of an attachment figure or the perceived possibility of losing one which poses an acute and possibly destabilizing threat to a child's sense of security and even identity. Children's fear of death may be more about the rupture of attachment relationships than it is about the abstract idea of nonexistence because their ability to regulate their emotions is mostly dependent on external assistance. Therefore, children are more likely to feel secure enough to handle distressing material, including discussions about death, without feeling overwhelmed when attachment figures are constantly accessible and receptive[4]. On the other hand, children may not have the regulatory support necessary to handle death-related anxiety when caregiving is inconsistent, emotionally unavailable, or dismissive, making them more susceptible to worry and emotional distress.

Empirical research reveals that attachment security is linked to more adaptive emotional and cognitive reactions to mortality. As securely attached children are more likely to get honest, developmentally appropriate explanations and emotional support from caregivers, secure attachment has been associated with lower levels of death anxiety and a more cohesive understanding of death[5]. Children are assisted in integrating their emotional responses with developing cognitive ideas about death, such as its universality and irreversibility, through these caregiving interactions. By encouraging open communication, attachment security may thereby lessen the emotional burden of death-related knowledge.

On the other hand, insecure attachment styles may make young children more susceptible to thanatophobia. When faced with death-related stimuli or memories of loss, children with anxious attachment may react more fearfully due to their increased sensitivity to separation and abandonment. Due to hyperactivation of the attachment system, these children may display increased discomfort, ongoing concerns about losing caregivers, and trouble controlling anxiety[4]. Children with avoidant attachment, on the other hand, may limit or repress their emotional reactions to death by avoiding conversations about death or by becoming emotionally detached. Although this tactic can temporarily lessen overt distress, it might also restrict emotional processing opportunities, which could eventually lead to unresolved anxiety or maladaptive coping[5].

Bronfenbrenner's Ecological (Bioecological) Theory

Bronfenbrenner's ecological systems theory supports understanding of how children's emotional and cognitive responses to mortality are influenced by a variety of interrelated environmental circumstances. According to the theory, a child's experiences and interpretations are influenced by several layered systems, including the microsystem, mesosystem, exosystem, macrosystem, and chronosystem[6]. Hence, children's ability to understand the concept death is shaped by interactions in their immediate surroundings, including family conversations and school settings, as well as by more general cultural beliefs, social norms, and historical events. Subsequent revisions of the theory, known as the Bioecological Model, highlight the significance of proximal processes, or long-lasting, reciprocal interactions between a child and their surroundings, as the main mechanisms guiding development across time[6].

When applied, it becomes clear that exposure to death-related information takes place at several ecological levels. According

to research, children actively create their conception of death through interactions with caregivers, participation in cultural customs/rituals, and media portrayals of death, all of which are ingrained in their ecological systems[7]. The microsystem is crucial because it gives children the first chance to ask questions and get answers about death through parent-child conversations and firsthand experiences with loss. At the macrosystem level, cultural and religious beliefs influence how death is explained, ritualized, and emotionally framed, resulting in cross-cultural disparities in children's perceptions of mortality. Crucially, Menendez et al. (2020) highlight how children frequently combine biological explanations of death with spiritual or cultural beliefs, showing that understanding death arises not only from biological reasoning but also from the interaction of cognitive development and sociocultural context. Therefore, Bronfenbrenner's bioecological theory provides a helpful framework for placing children's fear of death into the larger environmental systems that affect how death is experienced, discussed, and emotionally processed in early childhood.

Cognitive-Developmental Theory

Throughout early and middle childhood, children's perceptions of mortality alter significantly as their cognitive capacities become more structured and biologically based. Piaget's theory of cognitive development, which postulated that children's thinking about abstract and irreversible phenomena is limited by their stage of cognitive development, had a significant influence on early explanations of this developmental pattern[8]. According to Piaget, young children's preoperational thinking is typified by egocentrism and animistic reasoning, which causes them to believe that death is transient, reversible, or under external control. A more cohesive understanding of death as an irreversible biological event is made possible by children's growing ability to integrate logical concepts like permanence and causality as they move toward concrete operational thought[8,9].

Building on Piaget's fundamental theories, other scholars aimed to pinpoint the precise elements that make up a developed conception of death. According to Speece and Brent (1984), children's conceptualization of death can be examined in terms of several fundamental subcomponents, including irreversibility, non-functionality (cessation), and universality[10]. Non-functionality is the understanding that all biological and psychological activities stop at death; universality is the understanding that all living things eventually die; and irreversibility is the understanding that death is permanent and that living things cannot come back to life. Their analysis showed that although young children may exhibit some comprehension of these elements, full integration usually takes place later, and acquisition is frequently uneven.

By analyzing how these elements change over time and interact with more general cognitive changes, later studies improved this model even more. Slaughter (2005) examined data and noted other aspects of death understanding, such as biological causality, personal mortality, and inevitability, stressing that children do not learn these elements at the same time[9]. According to this explanation, children may exhibit a growing comprehension of universality and irreversibility while maintaining false beliefs about the underlying biological processes connected to death. Slaughter also pointed out that, especially in early childhood, children's explanations frequently combine biological reasoning with non-biological interpretations, highlighting the progressive and non-linear nature of death idea formation.

This cognitive-developmental explanation is supported by more recent empirical research, which challenges solely stage-based interpretations. Children as

young as four or five years old exhibit emerging understanding of certain aspects of death, according to Panagiotaki et al.'s (2018), including inevitability, universality, irreversibility, cessation, and causality. Nevertheless, their research also showed that children frequently support both biological and supernatural explanations, particularly when it comes to cessation and the maintenance of psychological emotions after death. This coexistence implies that children's views of death cannot be fully explained by cognitive development alone and that conceptual understanding may continue to be fragmented even as biological knowledge grows. When taken as a whole, these results demonstrate that children's comprehension of death develops through the slow integration of several cognitive elements rather than through a single developmental change[11].

EMPIRICAL EVEIDENCE

Sources of Children's Knowledge

Children learn about death through a combination of channels rather than through direct exposure alone. According to Longbottom and Slaughter's (2018) analysis of empirical research on these sources, children learn about death through three main channels: media representations of death, parental explanations, and direct experience with death (such as losing a pet or family member). Their study, which draws from individual-differences and interview-based research, emphasizes that parental communication has a more consistent effect throughout development, while direct experience predominantly predicts more sophisticated death understanding in younger children (under six years). This synthesis emphasizes that how adults frame and explain death-related experiences shapes children's conceptions of death more than exposure itself[12].

Studies looking at how family discussions and beliefs affect children's reasoning provide empirical support for the importance of parental communication. In a cross-sectional study with 43 adults and 93 British children ages 4 to 11, Panagiotaki et al. (2018) used a structured "death concept" interview to gauge participants' comprehension of important death subcomponents. Parents answered questions on their children's past experiences with illness and death, their beliefs about the afterlife, and their level of religiosity. The findings indicated that while direct experience with death had a very small impact, parental religious and spiritual beliefs were strongly linked to children's acceptance of supernatural explanations, especially regarding psychological continuity after death[11]. These results imply that infants create meanings about death primarily through the interpretative prism of their parents' belief systems and communication approaches.

Children's emotional awareness of death and grief is also greatly influenced by the caregiving environment. In their review of clinical and longitudinal research on bereaved children and adolescents, Alvis et al. (2023) focused on the roles that caregivers play in helping children manage their grief. The evaluated research consistently shows that caregiver availability, emotional responsiveness, and open communication were linked to more adaptive grief outcomes and a lower likelihood of prolonged grief disorder, even when studies were not experimental. This study emphasizes how caregivers offer crucial emotional scaffolding in addition to information about death, which influences how children integrate death-related knowledge. When taken as a whole, these findings show that children's comprehension of death develops in social contexts where caregivers play a crucial emotional and cognitive role[13].

Cognitive and Emotional Understanding

Children seem to have incomplete and occasionally contradictory understandings of death that change throughout early childhood

rather than developing a single, cohesive concept. In a study of children aged 5 to 6, Jingjing and Fuyan (2024) illustrated this pattern, finding that although most participants displayed an increasing awareness of death, comprehension of subcomponents differed significantly. The universality and irreversibility of death were more likely to be understood by children than biological causality, indicating that fundamental existential aspects of death may be understood before the underlying physiological mechanisms. Crucially, the researchers found that children's inquiries and emotional responses to death frequently surfaced even when conceptual knowledge was still lacking, suggesting that cognitive mastery is not a prerequisite for emotional involvement with mortality. These results support the idea that children's early beliefs about death are not developmentally homogeneous but rather fragmented[14].

Additionally, children's perceptions of death often include symbolic and emotional connotations in addition to biological reasoning. Koliouli et al. (2025) used a photovoice approach and found that while mentioning spiritual concepts like the soul or an afterlife, children frequently expressed death in terms of physical quiet and bodily cessation. Children's explanations frequently combined various viewpoints into a single story, implying that metaphysical and biological interpretations coexist rather than take the place of one another. The results demonstrate that children's awareness of death is not solely cognitive, but rather is ingrained in affective, cultural, and creative frameworks that influence how death is talked about and portrayed emotionally[15].

Experimental narrative studies also reveal the adaptability of children's reasoning about death. Children's assessments of what occurs after death are extremely susceptible to contextual framing, as demonstrated by Harris and Giménez (2005). Children were more likely to support the end of physical and mental processes when death was explained in secular-biological terms, but they were more likely to support psychological continuity when death was framed religiously. Interestingly, older children were better able to hold both explanations at the same time, indicating that cognitive development encourages the integration of seemingly incompatible concepts rather than pressuring them to choose one over the other. These findings cast doubt on stage-based presumptions that, as children get older, biological explanations merely take the place of supernatural ones[16].

Children's emotional engagement with death also becomes increasingly pronounced following personal loss. Joy et al. (2024) examined inquiries from grieving children and discovered that they were extremely preoccupied with the reasons behind death as well as the emotional fallout. A greater urge to make sense of mortality after grief was seen in the several children who asked in-depth inquiries about disease, dying, and what occurs after death. Importantly, children's questions revealed active meaning-making rather than uncertainty alone, showing that grief can boost cognitive and emotional involvement with death-related concepts even when knowledge remains developmentally limited[17].

Lastly, research on children who are constantly exposed to death shows how lived experience affects their understanding of death. According to McPoland et al. (2024), children receiving hospice care and their siblings showed understanding of the emotional impact and permanence of death in a variety of cultural situations. Children repeatedly demonstrated a knowledge of loss, separation, and the emotional consequences of death, even though abstract biological explanations were frequently lacking. These results imply that, even in cases where cognitive explanations are still fragmented, recurrent or close exposure to death may hasten emotional understanding of mortality. When taken as a whole, the reviewed research shows that children's

cognitive and emotional concepts of death are formed through a combination of lived experience, contextual framing, and developmental maturity rather than by the linear acquisition of factual knowledge[18].

Special Circumstances

When there is a general sense of danger and uncertainty, children may become more fearful of dying. Jones and Hughes (2023) used written narratives and drawings to study death anxiety in 13 children between the ages of 9 and 10 during the COVID-19 lockdown. According to their research, fear of dying was a common theme, especially anxiety related to parental illness and loss. Rather than biological explanations of death, children's depictions focused on emotional distress, loneliness, and worry, indicating that crisis situations may elicit significant emotional reactions to mortality even in the absence of cognitive understanding[19].

Children's anxiety and awareness of mortality are also shaped by anticipatory exposure to death. Among their synthesis of eighteen qualitative investigations, Fu et al. (2025) found consistent evidence of elevated anxiety, anticipatory grieving, and ongoing worry about parental death among children who lived with a terminally ill parent. Children reported a need for open, developmentally appropriate communication in all the investigations, and a lack of information was associated with increased anxiety. These results suggest that when emotional and communication support is inadequate, extended proximity to impending loss can intensify fear connected to death[20].

Beliefs about the Afterlife

Children exhibit a continuing inclination to believe that some aspects of the self-endure beyond physical death, even as they come to understand death as a biological conclusion. Bering and Bjorklund (2004) discovered that children consistently attributed ongoing psychological states, such as emotions, desires, and beliefs, to dead agents while simultaneously judging biological functions, such as eating, sensing, and bodily movement, to cease at death across several experimental studies. This trend emerged early in development and persisted even in older children and adults, suggesting that biological information cannot easily override intuitions regarding psychological continuity[21].

Extending these results, Bering, Hernández Blasi, and Bjorklund (2005) revealed that children between the ages of 4 and 12 exhibited a substantial distinction between biological and mental processes following death, with the most resistant states to cessation judgments being emotional and desire based. Although children in religious school contexts were less likely to express full mental stoppage than their secularly schooled classmates, the overall order of persistence, emotions and desires persisting more than perceptual or physiological states, was consistent across groups. All these findings point to a stable cognitive bias toward psychological continuity rather than a simple ignorance of biological death in children's beliefs about the afterlife. This has significant implications for how death is emotionally understood and feared throughout development[22].

Cultural Influences

Culture is particularly important to consider when studying children's understanding of death because cultures differ in the idioms, explanatory systems, and meaning-making activities used to explain death. These deeply ingrained cultural frameworks influence not only the discourse surrounding death but also the qualities of personhood that are thought to endure after death. Astuti and Harris (2008) showed that both adults and children in rural Madagascar supported both a religious belief that ancestors go on and have an impact on the living and a biological knowledge of death. When ancestral narratives were prominent, participants consistently accepted bodily

cessation even with prolonged exposure to death while assigning persistent mental states, especially knowledge and intentions, to the departed[23]. This coexistence implies that cultural explanations arrange the mental integration of death in daily life rather than superseding biological reasoning.

Further evidence that cultural context affects how continuity after death is conceived and represented comes from experimental cross-cultural investigations. According to Watson-Jones et al. (2017), when exposed to theistic explanations, participants in Tanna, Vanuatu, were more likely to support biological continuity after death, while those in the United States were more likely to support psychological continuity[24]. In a similar vein, Lane et al. (2016) found that narrative framing influenced children's beliefs about the afterlife in different ways depending on the culture: Chinese children demonstrated fewer continuity judgments overall despite an increase in references to ritual and supernatural concepts with age, whereas religious narratives increased persistence judgments in American children, especially for psychological processes[25]. Collectively, these results suggest that although some death-related intuitions may be common, cultural idioms and explanatory frameworks are crucial in shaping children's perceptions of what, if anything, survives after death.

Interventions and Prolonged Grief Disorder

Prolonged grief disorder (PGD) is defined by long-term strong grief reactions that interfere with functioning and extend beyond culturally anticipated mourning periods. Separation distress, yearning, obsession with the departed, emotional numbness, avoidance of reminders of the loss, and trouble participating in daily activities are all common symptoms of PGD in children. These symptoms are different from those of depression and posttraumatic stress disorder, and they are linked to serious functional impairment, such as social development disruptions and academic challenges[26]. Crucially, a persistent activation of the attachment system is reflected in childhood PGD, when children find it difficult to incorporate the loss's permanence into their evolving conception of relationships and the self.

The most promising empirical evidence for lowering PGD symptoms in children has come from CBT. To address maladaptive grief-related cognitions, avoidance behaviors, and challenges integrating the reality of the loss, Spuij et al. (2013) created a manualized CBT intervention tailored for children with PGD. Participation in the intervention was linked to significant decreases in PGD symptoms as well as improvements in emotional and behavioral functioning as assessed by both children and parents in a multiple-baseline study including six bereaved children and adolescents. Interestingly, improvements persisted over time, indicating that CBT strategies including behavioral activation, cognitive restructuring, and exposure to loss-related memories may help children manage grief in an appropriate way[27].

Broader psychoeducational and meaning-focused approaches may help prevent maladaptive mourning trajectories and buffer death-related anxiety in addition to disorder-specific interventions. It has been demonstrated that death education programs increase acceptance of mortality and emotional awareness while decreasing anxiety and avoidance of death[28]. From a theoretical standpoint, these results are consistent with Terror Management Theory (TMT), which holds that meaning-making, cultural worldviews, and self-esteem processes can control the major anxiety that is elicited by death awareness[29]. TMT's central tenet, that unintegrated death awareness can cause distress, offers a helpful framework through which to view why therapies that encourage candid conversation, symbolic meaning, and

emotional processing may lessen children's concerns related to death, even though TMT research has mostly concentrated on adults. When taken as a whole, these strategies imply that helping children create logical, developmentally appropriate interpretations of death could help prevent long-term grief and existential discomfort.

DISCUSSION

The review provides a developmentally grounded explanation of early childhood fear of death that is in line with recent studies on children's developing conception of mortality. Its emphasis on important aspects of death understanding, such as universality and irreversibility, is consistent with empirical research demonstrating that these ideas develop unevenly and do not form a cohesive picture in early life. Instead of following a straight conceptual path, the paper could have more thoroughly addressed data showing that children frequently hold various, coexisting interpretations of death. Greater emphasis on this complexity would have improved its explanation of why fear can endure even as cognitive comprehension grows.

Additionally, the review tries to differentiate fear of death from more general types of anxiety in children, which is a significant yet unfulfilled contribution. The text does not adequately distinguish thanatophobia from attachment-related phobias or general anxiety reactions, even while it acknowledges that early fear may not involve abstract awareness of nonexistence. It is unclear whether thanatophobia is a unique phenomenon or a context-specific expression of other fears because the larger body of research indicates that fear of death in young children is often entwined with worries about emotional security, caregiver availability, and separation. Its conceptual clarity might have been improved by a more detailed explanation of how fear of death differs from other children's phobias in terms of its causes, developmental trajectory, or emotional content.

The review clearly indicates a commitment to developmental explanation in terms of theoretical integration, especially using cognitive-developmental views. The theoretical foundation offers a logical justification for connecting early childhood representational constraints and emotional regulation abilities to fear of death. Other theoretically significant frameworks, such as ecological methods and attachment theory, are used more implicitly than methodically. The article's explanatory breadth might have been strengthened by a more explicit integration of relational and contextual elements, given the strong evidence that these aspects influence children's fear of death. Although the theoretical framework is sound as it is now presented, a more thorough and balanced implementation would be beneficial.

Its main merit compared to the larger body of literature is its emphasis on early childhood, a developmental stage that has gotten very little attention in studies on death anxiety. It challenges the notion that young children are mainly unaffected by mortality worry and highlights the early emotional underpinnings of death-related anxiety by moving the focus away from adolescence and adulthood. Its usefulness as an initial contribution to the subject is further enhanced by its argument's clarity and its approachable integration of developmental notions. The review is especially salient to researchers as well as practitioners who are interested in early emotional development because of these characteristics.

The conclusions that may be made on early childhood fear of death are limited by several limitations, despite the contributions of the current literature. The use of experimental designs with young children is restricted by ethical issues, leading to a dependence on cross-sectional, qualitative, or quasi-experimental procedures that limit causal inference. Furthermore, a large portion

of the literature is based on Western cultural contexts; fewer studies look at how children's fear of death is influenced by culturally unique idioms, beliefs, and behaviors. Lastly, there is a dearth of longitudinal studies that monitor the evolution of early death-related dread over time and the circumstances in which it either resolves or remains. To create more thorough and culturally sensitive models of early thanatophobia, these gaps must be filled.

Overall, by highlighting the developmental underpinnings of fear of death in early childhood, the reviewed article makes a significant contribution, although it does so within a somewhat limited conceptual framework. Its weaknesses show a lack of attention to relational, cultural, and practical views that are becoming increasingly important in the research, but its strength is in explaining why young children can feel extreme fear without developing cognitive comprehension. When considered in this context, the review serves more as a theoretically sound introduction to the subject than as a comprehensive description of childhood thanatophobia.

CONCLUSION AND FUTURE RESEARCH DIRECTIONS

In conclusion, this review emphasizes that early childhood fear of death is a developmentally significant reaction influenced by children's emotional sensitivity, relational reliance, and developing comprehension of mortality rather than being uncommon or intrinsically abnormal. Early thanatophobia seems to result from emotionally charged experiences with loss, separation, and uncertainty that surpass children's representational abilities rather than reflecting abstract contemplation of nonexistence. This review emphasizes the significance of addressing children's fear of death with sensitivity, openness, and theoretical subtlety by incorporating developmental, relational, cultural, and clinical perspectives. A basis for more compassionate research, communication, and therapeutic strategies is provided by acknowledging early death-related dread as a normative but contextually impacted phenomenon.

Future research could benefit from longitudinal designs that track how fear of death evolves over time and under diverse relationship and environmental situations, allowing for a better distinction between transient, normative anxiety and persistent maladaptive trajectories. Additionally, there must be more focus on cross-cultural research, especially studies that look at culturally distinctive idioms, explanatory frameworks, and death-related rituals that could influence children's emotional reactions. In terms of methodology, creative and ethically conscious experimental paradigms could shed light on how children's perceptions of death are influenced by contextual framing and communication. Lastly, prophylactic strategies that promote emotional comprehension of death before distress becomes clinically significant should be included in intervention studies, which should go beyond treating prolonged grief disorder. Developing models of childhood thanatophobia that are culturally sensitive and developmentally informed will require further study along these lines.

From a practical standpoint, the reviewed evidence indicates that through open, developmentally appropriate communication and emotional scaffolding, educators, caregivers, and clinicians may play a crucial role in influencing children's knowledge of death. The need of early, educated interaction with children's death-related fears is highlighted by the integration of developmental theory insights into educational and clinical practice, which may help prevent normative fear of death from escalating into prolonged grief disorder.

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