

2024年度

大学院文学研究科博士課程前期2年の課程入学試験

(夏期・一般選抜) 問題

専門科目 死生学・実践宗教学 専攻分野

試験開始の合図があるまで、この問題冊子を開いてはいけない。

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問 1. 次に掲げる 6 の語句から 4 つを選び、それぞれ 5 行以内で説明しなさい。なお【 】には選択した語句の番号を記入すること。

1. EOL ケア 2. 間引き絵馬 3. カレン裁判
4. 服忌令 5. 淀川キリスト教病院 6. Geoffrey Gorer

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受験記号番号	
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問 1. (つづき)

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問 2. 次の二つのテーマから一つを選び、死生学の観点からどのような研究が可能か、考察しなさい。

その際に、これまでにどのような研究が行われてきたかにも言及すること。

1. 老い

2. 災害

【 】 (選んだテーマの番号を記入すること)

問 3. 次の英文を和訳しなさい。(解答欄は次頁)

Is grief a disease? The answer depends largely on who you ask. Over the past several decades there has been a growing movement in the fields of psychology and psychiatry to define grief as a pathological condition that can be treated with therapy and medications. These “pathologies” have a number of names, and include complicated grief (Shear and Frank, 2006; Shear et al., 2011), prolonged grief (Prigerson et al., 2009), traumatic grief (Prigerson and Jacobs, 2001), and so on. This movement to pathologize grief has gained so much traction that, when the *Diagnostic and Statistical Manual of Mental Disorders* (DSM-5: American Psychiatric Association, 2013) was in revision for a new edition a few years ago, “complicated grief disorder” was a condition proposed as a new diagnosis. In this chapter I reflect on how we came to think of grief as something in need of treatment in the modern era. I argue that psychology, psychiatry, and other mental health professions (named the “psy-disciplines” by Nikolas Rose, 1990) are rooted in an individualistic approach to the problems of human suffering, and, as such, tend to individualize, pathologize, and privatize what used to be considered a normal and accepted human reaction to the death of a loved one. I follow by reflecting on a growing counterculture of alternative public grieving rituals, which have taken the form of spontaneous shrines and electronic grieving sites, as evidence of growing dissatisfaction with the privatization and pathologization of grief and the need for public and communal grieving rituals.

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