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A Sociolinguistic View of Taboo Language in the Algerian Society

Attitudes and Beliefs in Mecheria Speech Community

Dissertation submitted in partial fulfillment of the requirements for the Degree of Master in Linguistics

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Dedications

I dedicate this work to my **Father**, my **Mother**, my Sister **KAHLA**, and my lovely Brother **RAMI**.

Also, to all my teachers, my colleagues, and close friends for their support during this period.

Iblissam

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Abstract

The three components; human beings, society, and language are closely related to each other. When talking about the relationship between language and society or about what language does in many functions in society, one should try to know both of these terms; a society is a group of people that are connected for a particular purpose and language is what members of a particular society speak. Although these definitions reflect a comprehensive portrayal of both terms, this universality offers great benefit, especially when it is found that there are many types of societies and that speech in society can manifest in very different forms. One of these forms is 'Taboo'language. This current work is to investigate a sample of Mecheria speakers' attitudes and beliefs toward taboo topics especially disease and death, and to explain such a phenomenon and the reasons behind its use or avoidance in the society. The study was based on a written questionnaire as well as a semi-structured interview for those who are unable to read and write. Finally, this research proved that there are some diseases that are socially forbidden and cannot be discussed or even talked about, the same for the subject of death but in a limited way, especially in mixed groups or public places.

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General Introduction

General Introduction

Language as a social phenomenon and a component of culture has been given some kind of independence and has become a recognized science studying its relationship with society. The function of social linguistics is the research of the competences in which language interacts with society, it is perceived the changes in the structure of the language in response to different social functions with the statement and identification of these functions. The fact that language is a phenomenon of social life has become one of the most closely related to the lives of individuals and subject to the community standards, customs, traditions, and culture. It is the way to reveal social, cognitive, and cultural levels of societies.

The history of the language was and will remain a wide area through which the history of human civilizations can be seen. If many researchers have emphasized the role of context in determining meaning, they have also been interested in the actual use of the word within a particular society or specific cultural, religious, scientific or professional group.

Language as one of the most important elements of society has its own principles and laws, especially if used between individuals or in public places, and since language reflects to which extent individuals are intellectual and civilized, they must respect these rules in their dealings. In this vein, many words, meanings, and expressions are not allowed to be used by people either for its prohibition or its holiness. These words and expressions are called ‘Taboos’.

In fact, taboos differ according to the beliefs, religions and values of each society, and to the social, psychological, and physical standards of individuals, so what is considered taboo in a society may be permissible in the other, and what is sacred in a religion may be worthless in the other, and what is avoided by some people may be insisted by others. Thus, there are universal taboos which are agreed to prevent socially in the whole world, and culture-specific taboos belonging to each community.

Attempting to apply the preceding methods into an Algerian setting in general and Mecheria setting in particular, the current work points essentially at exploring the Algerian cultural standards, values and convictions through investigating the attitudes of Mecheria speakers towards taboos. It also portrays the main factors behind the use of taboos, especially disease and death. Consequently, this review advances some clarifications on the social and psychological variables that influence profoundly the individuals' use of taboo language.

In this side, this study aims to clarify taboo language as a phenomenon in relation to culture and society by studying Mecheria speakers' attitudes and beliefs in relation to the social norms and values. To get to this point, there are some questions to answer:

1. What are the attitudes and beliefs of Mecheria speakers towards taboos?

2. What are the reasons that push speakers to use taboos?

3. What is the difference in using taboos between the past and present?

In order to find suitable answers to these questions, there are three hypotheses discussed in this study:

1. First, we may hypothesize that individual attitudes and beliefs differ from one person to another, according to different psychological and physical factors such as age, gender, educational background.
2. Secondly, different social and moral reasons push people to use taboos, sometimes to express their emotions and feelings like anger or happiness.
3. Thirdly, there is a difference in terms of the amount of taboos which has been used between the past and the current generations, perhaps due to lack of religious, cultural openness, or globalization.

Thus, this research shows an outline of two chapters: Literature Review of Taboos and its Socio-Cultural Circumstance in Mecheria and then research Methodology and Data Interpretation.

The first chapter is a theoretical part, it includes an introduction and a theoretical background to the topic discussed, also it sheds light on language, culture, and their relationship with society, as well as the phenomenon of taboos, the reasons behind its spread, the motives behind its use, and some theories that support it. Then, it gives a brief look to the attitudes, beliefs, and values of Algerian context in general, and Mecheria speech community in specific and the reaction of its speakers towards the subjects of taboos especially diseases and death. Lastly, it discusses some neutral words and the Islamic view towards this phenomenon. Finally, it concludes this part with a brief conclusion.

The second chapter is the practical part, it includes a summary of the different research tools and methods which have been employed, including: a questionnaire, a semi structured interview, in order to get spontaneous speech. In addition to the collection of information requires quantitative and qualitative data, then the organization and interpretation of the data collected in details to get the speakers impressions towards the use of taboos.

Last but not least, the study has provided a new addition to the investigation of the relationship of language to culture and society, as it touched on the speakers in Mecheria speech community and their different interests about the themes of disease and death. And how to deal with them, in addition to their readiness to discuss them in public, and their attitudes and views towards them.

Chapter One

Chapter One

Literature review

1.1. Introduction

1.2. Historical Background

1.3. Taboos in Relation to Language and Culture

1.4. Taboos as a Sociolinguistic Fact

1 .4.1. Taboo Topics

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1.10. Taboos between the Past and the Present

1.11. Taboo and Islamic View

1.12. Conclusion

1.1. Introduction

Language is a system of communication consisting of spoken, manual, or written symbols which used to express human feelings, emotions and ideas as members of social group and participants in its culture. Therefore, language is the mirror that reflects society's civilization and culture. However, people may use in their daily life some of the words and references which are forbidden in their societies, ignoring by that all the values and laws that regulate the way of dialogue between them. These words are called Taboos.

Thus, this chapter gives a general clarification of an important sociolinguistic marvel to be specific Taboos. It focuses on the connection amongst culture and language, the reasons and conditions behind the utilization of taboos expressions through exploring the studies led by past specialists. It aims also to study Mecheria from a socio-cultural and religious view and to give different procedures to evade forbidden expressions.

1.2. Historical Background

Many linguists from different backgrounds have been concerned about the nature of the relationship between language and culture and how one can influence the other or, in many cases, have a significant correlation. Chaika (1994) says that language and society are so intertwined that it is impossible to understand one without another. It has been shown that culture and language are complementary elements, so that culture is the sum total of ideas, beliefs, morals and traditions which is expressed and transmitted through the language used as a means of communication and from this platform, we notice that language simultaneously reflects culture, and is influenced and shaped by it. Brown (1994:165) describes the two as follows: 'a language is a part of a culture and a culture is a part of a language; the two are intricately interwoven so that one cannot separate the two without losing the significance of either language or culture.'

1.3. Taboos in Relation to Language and Culture

Every nation has its own distinct culture. This culture is reflected in the language of this people. Language in any society is the mirror of its culture. It is the means used by peoples to express the different elements of culture: their customs, concepts, traditions and laws. There is an integration between language and culture, both of which are acquired through community involvement. The integration of language and culture is of great importance. In this context, Wardhaugh consider that this relation attracted many researchers from different foundations. So as to clarify more this thought, he (2010:229) contends that:

> **The exact nature of the relationship between language and culture has fascinated, and continues to fascinate, people from a wide variety of backgrounds. That there should be some kind of relationship between the sounds, words, and syntax of a language and the ways in which speakers of that language experience the world and behave in it.**

Additionally, the study of the relationship between culture and language has intrigued scholars from different fields. Hymes (1964:21) believes that "speech is so fundamental an activity of man, language so integral a part of his culture". Witherspoon (1980:2) advocates that language and culture are highly interrelated and proposed that"culture cannot be studied without attention to the native languages spoken within them…languages cannot be studied in isolation from the cultures in which they are spoken".

People around the world have their own intellectual and cultural heritage that is one of the main factors that characterize all nations. Culture, on the one hand, has many definitions, and it influences everything individuals do in their societies in relation to their ideas, attitudes, values and standardizing or expected patterns of behaviour. Culture is not hereditarily acquired, and can’t exist all alone, yet is

constantly shared by members of society. In connection with this, Kroeber and Kluckhohn (1952:181) observe that:

> **Culture consists of patterns, explicit and implicit, of and for behaviour acquired and transmitted by symbols, constituting the distinctive achievements of human groups, including their embodiment in artifacts; the essential core of culture consists of traditional (i.e. historically derived and selected) ideas and especially their attached values; culture systems may, on the one hand, be considered as products of action, on the other, as conditional elements of future action.**

As the quotation clearly demonstrates, culture is the coordinated model of human skills, attitudes, values and behaviour that relies on the limit with regards to learning and transmitting knowledge, it is the characteristic feathers of everyday existence shared by people in place or time. Culture according to Hudson (1996:71) is the "know how" and "know what ". In other words, a person must possess cultural elements to deal with people in his community and to interact with them.

Language on the other hand is a pattern of symbols and signs that ultimately form one of the tools of knowledge. Language is one of the most important means of friction, understanding and communication in various fields of life between individuals in society, without which the cognitive activity of individuals is not possible. Block and Trager (1942:5) define:"a language is a system of arbitrary vocal systems by means of which a social group co-operates". Whereas Hall (1968:158) states that:"the institution whereby human communicate and interact with each other by means of habitually used oral-auditory arbitrary symbols". This means that the language is a part of culture and it helps the others to find our place of living, our roots and even which kind of persons we are. In relation to this, language can be better defined by Henslin (2004:14) as follows:

> **Language allows culture to exist and to develop. Only through the use of language, people are able to move beyond their immediate experiences that mean to speak of past and future events which would be impossible without the structure of language. With the help of language, events can be codified, they are attached to words so that they can then later be recalled and discussed in the present.**
>
> **(Quoted by Greenberg, 1963: 5).**

Greenberg based on previous assumptions of Sapir and his student Whorf support the idea that language is the basic interface of culture and that the way language is used influences the people's thought, behavior, attitude and cultural norms…concluding that it is not possible to understand one without the other.

1.4. Taboo as a sociolinguistic fact

In spite of the fact that taboos are frequently associated with the Polynesian cultures of the South Pacific, they have proved to be widespread throughout societies over time. The term 'Tabu' or 'Tapu' meaning prohibited, forbidden or disallowed, was first noted by Captain James Cook amid his visit to Tonga in 1771; whereas its first English use dates to 1777; and thus becomes 'Taboo'.in this regard, Radcliffe-Brown (1939:5f) states that:

> **In the language of Polynesia, the word means simply 'to forbid', 'forbidden', and can be applied to any sort of prohibition. A rule of etiquette, an order issued by a chief, an injunction to children not to meddle with the possessions of**

their elders, may all be expressed by the use of the word tapu.

(Quoted by Keith Allan and Kate Burridge, 2006:02).

In addition to this, Trudgill also supports the idea that taboo is all prohibited and banned words or actions in society. In this regard, he (1995:17) describes them as follows:

Taboo can be characterized as being concerned with behaviour which is believed to be supernaturally forbidden or regarded as immoral or improper; it deals with behaviour which is prohibited or inhibited in an apparently irrational manner. In language, taboo is associated with things which are not said, and in particular with words and expressions which are not used. In practice, of course, this simply means that there are inhibitions about the normal use of items of this kind.

According to Wardhaugh (2000:234), taboo is the prohibition or avoidance in any society of behavior believed to be harmful to its members in that it would cause them anxiety, embarrassment, or shame. In the same time taboos can convey various feelings such as anger, disappointment and satisfaction. The use of taboos is spontaneous as a result of external factors, or intentional to achieve several objectives that may be either positive or negative, or to convey a message. In this context, Jay (2009:155) states that:

Taboo words can be used to achieve a variety of personal and interpersonal outcomes that may be positive, negative, or inconsequential in terms of their impact on others, although some might argue all uses of taboo words are harmful to some degree.

Jay (2009) argues that the use of taboos depends mostly on the people's relations and closeness, and their impact on the others.

Moreover, taboo subjects are many and different according to the values, customs and traditions of societies including: sex and marital relations, private parts of the body, diseases, death and the other world, the world of Jinn and witchcraft, alcohol and drugs, love, etc. In fact, these terms have taken the lion's share of taboo language in many societies. However, our main purpose is to address taboos in both disease and death.

1.4.1. Taboo Topics

Taboo topics are a set of subjects that are forbidden to talk about and discussed in society. However, many researchers claim that sanctity of these subjects due to the place and time of discussion.

Since ancient times, sexual themes have been at the top of the list of taboo subjects in society, but they have lost their place in the face of the themes of diseases and death, which have become one of the most important topics that people avoid discussing or even remembering,

Disease as a taboo topic has been addressed by Allan and Burridge when they note:

> **In most societies, past and present, references to diseases are censored: they are spoken of euphemistically. It might be because they are thought to result from the actions of a malevolent spirit or person, or in consequence of their connection with death, or just because of their intrinsic unpleasantness.**

Furthermore, death today is in the same degree of sanctity with diseases and maybe more. In this line, Allan and Burridge (2006:223) see that "**death has become the great taboo subject, smothered in prudery**".

1.4.2. Taboo words

Taboo words are words that are forbidden to be spoken or circulated within the community. These words differ according to each community and according to the topics in which they are mentioned, that what is forbidden in some regions may be permitted in others.

In fact, there are many types of taboo words, the most important of which we discussed in this research are the words that are related to disease and death. In this respect, Blake and Moorhead (1993:81) mention that "death" today is more of a taboo topic than sex, although the opposite was true fifty years ago.

It should be noted that each community has a set of forbidden actions and statements that must be avoided. According to Anderson and Trudgill (1990:55), it is better to name taboo words as linguistic taboos, means a linguistic taboo for each taboo act.

1.4.3. Taboo categories

The taboos vary from one society to another and from one environment to another. According to Godard and Patterson (2000:38), the different categories of taboo language are reflections of what society thinks it is taboo. They (ibid:67) also add that the attitudes of people towards the different categories differ from one culture to another.

There are many types of taboo language such as profanity which is a socially offensive language. In this respect, Jay (idem) claims that **"To be profane means to be secular or behaving outside the customs of religious belief. To be profane means to be ignorant or tolerant of the guidelines of a particular religious order".** Cursing which is an appeal or prayer for evil or misfortune, in this line, Jay (1992:03) confirms that:

The intent of cursing is to invoke harm on another person through the use of certain words or phrases. These words are imbued with power granted to them mainly through religious or social demarcation.

Blasphemy which is the act of insulting or showing contempt or lack of reverence to a deity, it can be a word, an expression or a gesture which is socially considered rude or vulgar. According to Jay, **"A blasphemy is an attack on religion or religious doctrine"**, obscenity which is any utterance or act that strongly offends the prevalent morality of the time, according to Montagu (1967:105), obscenity is **"a form of swearing that make use for indecent words and phrases"**. Besides, insults and swearwords are counted as taboos.

1.5. Taboo theories

Many scientific fields have been concerned with the study of taboos, most importantly sociology, psychology and finally linguistics, where the latter tried to study taboos by linking the language to the culture and civilization of societies, and all this through the application of the previous researchers' theories as it is explained in the following.

1.5.1. Pragmatic theory

Many scholars from different fields such as anthropology, pragmatism and social linguistics were concerned with the study of language and its relation to human behavior. The most known one of them was Hymes, who is influenced by many linguists such as, Sapir, Boas, Jacobson, and others. After he becomes best known for his founding to 'the ethnography of speaking' which becomes later 'the ethnography of communication', as a way to understand the language in use.

According to Hymes (1989), persons cannot master a language just by knowing its rules and grammar, but also the context where it was used. In addition to this, some factors that affect the communication are:

S: the situation which includes both the scene and the setting

P: the participants which refers to the persons or the people who are talking and the relations between them.

E: the ends or the outcomes of this communication.

A: the acts of speech which includes both form and content.

K: the key which means the tone of speech or how was delivered.

I: the instrumentality which is the channels used to complete the speech, it includes the methods, the forms and styles.

N: the norms or the rules that govern the speech, the events and the participants, the actions and reactions.

G: the genre of speech for example: prayers, proverbs, apologies, small talk, problem...etc

In this approach Hymes confirm that speakers should follow these rules in addition to the language grammar and vocabulary, in order to make the speech succeed.

In the other hand, Austin (1962:14) has pointed out that the Speech Act Theory shows the relationship between language and the context of use through providing a systematic classification of communicative intentions. She goes on to state that people do not use language in communication as a set of correct utterances but also build them in a particular action. In other words, expressions have the capacity to perform certain kinds of communicative acts such as giving instructions and asking questions…etc. Austin (ibid: 17) calls such utterances “performatives” which means

“utterances which are neither true nor false but which bring about a particular social effect by being uttered.”

Furthermore, Austin mentions that there are three kinds of speech acts, the first locutionary, the second illocutionary, and the third perlocutionary.

In short, according to Austin this theory was the way to investigate whether the speakers are using these unwanted acts, words, and expressions to hurt people or not.

1.5.2. Sociolinguistic theory

In contrast to the previous pragmatic theories, social linguistics addressed the study of language based on social factors such as age, gender, social level of speakers..., in short, the study of the effect of culture on language, in addition to some factors.

Since ancient times, social linguists have focused on the study of social differences between men and women and have emphasized that the method of female dialogue, choice of vocabulary and sentence structure are completely different from men. Whereas, modern linguists stressed that there are many factors that influenced the discourse. The most important of which are sex and gender. The first is the biological characteristics that distinguish men from women. The second is the social differences applied by society on each sex. In this respect, Trudgill and Chambers (1998:84) affirm that:

> **Linguistic sex differentiation is a reflection of a much wider tendency for men to be regarded than women if they act tough, rough and break rules. Women, on the other hand, are encouraged to a much greater extent to be correct, discreet, quiet and polite in their behavior.**

Furthermore, many scholars confirm that women are collaborative, polite, and unobtrusive in using taboo language, whereas men are competitive, impolite, and

totally free in using taboo language, as a result of many social factors. In this line, Coates (2003:126) states that: **"Women are more polite, indirect and collaborative in conversation, while men are more impolite, direct and competitive…"**

On the other hand, Huang and Tian (1990) states that there are social and situational factors, or what they call 'macro and micro-context', and we should study it in order to understand taboo language, in their view some words become taboo when it gains a bad reputation in society. In this line, they (ibid:66) states:

> **A social setting or environment in which a semantic word gains a socially engendered connotation, either sacred or despicable and filthy. This additional meaning is usually accepted and regarded as a convention to be observed by almost all the speakers in one speech community or even at a national level.**

In this context, our primary work will proceed the Hymes theory 'ethnography of speaking'[1] to clarify the reasons that push speakers to utilize taboos. Moreover, this exploration will take after Huang and Tian model concerning the impact of social and situational factors on the speakers to utilize taboos.

1.6. Socio-Cultural and Linguistic Circumstance in Algeria

Algerian culture is a piece of the Arabic culture and mirrors the social standards and customs of the Maghreb people group all in all and Islamic esteems specifically. In this line, Sadiqi (2003:17) in her book Women, Gender, and Language in Morocco, announces the following explanation:

> **Culture may be broadly defined as a system of practices, rituals, beliefs, values, and ways of meaning of a community.**

[1]-The ethnography of communication (EOC), formerly called the ethnography of speaking, is the analysis of communication within the wider context of the social and cultural practices and beliefs of the members of a particular culture or speech community. It is a method of discourse analysis in linguistics that draws on the anthropological field of ethnography.

> **All cultures control their members, but they differ in the degree of the control they impose on the individuals and social behaviors of their members, as well as the parameters within the members exercise control over their destiny and their environment.**

The above statement gives a diagram of culture just like an arrangement of convictions, qualities, ethics, and standards that are put by the society in order to confine the conduct of its individuals and, from this time forward, their dialect.

Since our principle work is restricted to handle taboos as parts of the Algerian culture and dialect, we shouldn't burrow further on the Algerian phonetic profiles. Truth be told, Algerian culture constitutes a mosaic picture because of the progressive comings of various civilisations beginning with the Romans, at that point the Islamic triumphs in the 7th and 11th centuries, the Ottoman Empire which left an incredible effect on the people's customs. The French occupation which went on for 130 years and profoundly established in the Algerian culture also. Kaye and Zoubir (1990:69) have outlined the most imperative stages in the Algerian history as takes after:

> **Before the Arab conquest in the seventh century and the Islamization of the Berbers, Algeria was a Romance province. And before it was annexed by the French in the nineteenth century, who subjugated the Berbers and the Arabs in the sixteenth century, turned Algeria into a pirate state open to a multiplicity of cultural models during two centuries of Ottoman presence.**

As per this, Edelstein (2011:342) includes that the Algerian etymological profile is rich as its way of life. It incorporates Standard Arabic as the national dialect notwithstanding Berber and other Algerian Arabic vernaculars. French dialect is likewise a piece of this profile since its words have since quite a while ago slipped into Algerian vernaculars and being utilized as a part of day by day communication. In this sense, she watches that:

> **[…] the official language of Algeria is Arabic; Berber dialects are also spoken throughout the nation. In fact, Berber is known as the national language and Arabic the official language. French is also commonly spoken among Algerians as a second language because Algeria was under French rule between 1830 and 1962, the influence of French culture and language is significant. It is not uncommon to hear French words interwoven into Arabic conversation. Bi- and trilingualism are not uncommon in Algeria.**

Moreover, this cultural and linguistic diversity mentioned in this statement has greatly stimulated the emergence of taboo words in Algerian society in general and in the Mecheria community in particular. This is what we have tried to study and explain in this work.

1.7. Historical Background of Mecheria Speech Community

Mecheria, is the ruins of an old ruined palace that had an abundant running eye at the foot of the Antar mountain at the corner of the directional junction of the mountains (Antar and Anaitar), It was named according to the historians when a sheikh wanted to tell his thirst by striking the side of the mountain with his pride, and the eye of pure and fresh water exploded. It's a town in the south-west of Algeria, bounded on the south by the wilaya of Bechar, on the west by the kingdom of Morocco, on the east by the wilaya of El Bayadh and on the north by the wilayas of Saida, Tlemcen and Sidi Belabbes. The town is founded in 1881 at the arrival of the French columns. The nomads of the region (Hmayans) known by their vocation of sheep breeding, called by the military authority, came to settle. It becomes an important market for the inhabitants of the Hmayan region.

At the beginning of the 20th century there were 965 inhabitants, including 429 Europeans. At independence Mecheria constitutes a pole of attraction for the neighboring communes. Trade in livestock products is the main activity.

'Hmayan' culture is an important part of Algerian history in general. But culture was not the only element. Language played an important role in providing and promoting this culture. The language of Hmayan was characterized by the simplicity and the predominance of the Bedouins. It was highly conservative. Most of their dialogues were proverbs and popular sayings, we are not supposed to dig deeper in language issues since we are dealing with taboos.

What can be observed is that the Hmayan community sanctified the man while the role of women is limited. The strict words, actions, values and principles are the basis of the relations between the population. Moreover, the daily contact of the population with each other and with the surrounding areas contributed to enriching the language and the emergence of many dialects.

1.8. Types of Taboos in Mecheria Speech Community

In most Arab and international cultures, taboos are words, actions or behaviors that a group of people or a society has agreed to ban. It is referred to as[ʕajb][2]: "taboo". In this regard, Sadiqi (2003:78) claims that the general meaning of taboo in Western culture: **'... correlates with the Arabic term for taboo 'ħaram'. A behavior (linguistic or otherwise) is considered taboo when societal opinion either inhibits or prohibits it in a rational or irrational manner'.**

Following this, we can classify Mecheria taboos into two main types, the first one including **non-taboo topics and words** which can become taboo when they are employed in specific contexts, or when they are employed as swearwords such as names of some animals: pig, dog, a donkey and a Jew…etc. People have developed some euphemistic expressions to use including [ħaʃa:k][3] before uttering these words

[2]-[ʕajb]: vice, immoral behaviour, immoral quality in somebody's character.
[3]-[ħaʃa:k]: God bless you.

since they are associated with dirt and uncleanness, or as calling their wives' names in the street or in front of a stranger. In this side, Sadiqi explains:

> **Both women and sacred places 'are forbidden to outsiders' gaze and both are believed to need strong male protection, albeit in different places are a symbol of collective and public identity, women are more of private property and are associated with men‟s social identity.**

The second type called unmentionable topics and words**,** Hayakawa (1982) agreed that every culture has its own unspeakable language which is absolutely forbidden in polite discourse and explains that the most tabooed topics are limited to what he calls the triangle of taboo including sex, religion and politics, but in this work, we are limiting our study to deal with sex and death. In this vein, Trudgill (2000:29) declares the following:

> **The tabooed items vary from one society to another. The strongest taboo words in the English-speaking world are still associated with sex, followed with excretion. In Norway, they are mostly expressions connected with the devil, and in Roman Catholic, they are words essentially associated with religion.**

Hence, the prohibition of these words and actions from society to another is the result of many different reasons and effective factors.

1.9. Factors Affecting the Use of Taboos

There are many factors influencing the use of taboo words in Algerian society in general and in Mecheria community in particular, they are divided into personal factors such as age, sex, educational level, social background…, and social factors, such as culture, religion, attitudes, beliefs, and standards.

In addition to these socio-linguistic factors, there is another important factor which has a significant impact on the spread of this phenomenon. This factor is the modernity and the openess to the world, what made some values and principles of the society fused and disappeared under the name of freedom. And in order to keep up with the developed countries, people and society have different views to some taboo words and their use, which has become normal to use, since their prohebition has been lost or overlooked.

1.10. Taboos between the Past and the Present

All through history it has been a consistent that the older members of the community think about youth to have a disturbing phonetic neediness, since they utilize similar words again and again without reasonable exactness and utilize stylish new coinages, catch phrases, swear words, and phatic connectors (in spite of the fact that in the later phases of youth, these signs have a tendency to disappear). Older people additionally blame the young for losing a significant number of the phonetic formulas of obligingness that are a piece of set up great behavior, while young persons have a tendency to consider the old, in spite of their authority of the dialect, to utilize words and manners of expression that are outdated, that belong to another age, and that they don't relate to. It is this pressure, little by little, drives taboos to occur in society.

1.11. Taboo and Islamic View

First of all, the Islamic religion as it is customary has set boundaries and controls for our daily dealings with each other, especially our verbal dealings which reflects deeply the root and spread of our religious beliefs and attitudes, and the most important topics which are addressed and controlled by are themes of disease and death.

Islam enjoins Muslims when the disease happen to cure, and orders them to be patient, however, and consider what affects the Muslim from worry or scourge as an atonement for sins and evil, as ordered them to cover their diseases and infections since there are a lot of which cannot be disclosed only to the doctor, either for their sensitivity of being in sensitive areas that Islam forbids to be named in public (male

and female genitals) such as Syphilis, and Gonorrhea, or for their seriousness such as AIDS, and cancer. It is the rights of the patient to keep his secrets in his illness, Islam orders the confidentiality of the secret and non-disclosure, and the patient's own conditions in his words and actions, the doctor and the relative of the patient and others are legally mandated to keep the secrets of the patient, Islam is the disclosure of the patient's secret violation of legitimacy sinned by the owner, and there are a number of legal texts put a number of The qualities in the list of noble and honorable ethics, such as truthfulness, honesty and non-disclosure of the secret.

Islam views death as a transition from the earthly world to the eternal world. In his book, Perspectives on Islamic Law, Justice, and Society, Khare (1987: 10) writes that:

> **[…] death to Muslims is a passage to another life rather than cessation of life. In death, one faces God, without any intermediaries, but with a distinct idea of the "weighing deeds" on the Day of Judgment. But death cannot be considered in isolation in Islam, its conception and meaning must be read alongside. What life, illness, medicine, wellness, and health mean in the same system.**

Hence, it can be noted that Islam has given the subject of death a great importance and has been prevented and forbidden to deal with subjects of death and the other world among the people in respect of the sanctity of the Judgement Day and respect for the privacy of the dead. Death is not prohibited or forbidden for asexual reason such as some illnesses, but because people fear to meet the God and their thinking about punishment and reward, entering hell or paradise, the dispersion between this and that is what prevents them from discussing death.

1.12. Conclusion

From a linguistic point of view, in this chapter, the researcher has tried to shed light on a part of the Algerian culture and language in general and Mecheria culture

and dialect in particular, it includes a sociolinguistic study of Mecheria speech community and the taboo words in it. It also hinted at the attitude of Islam and its view towards these taboo words and their circulation in our daily dealings, and its emphasis on avoiding them as part of our Muslim faith and religion which play a key role in evaluating the behavior of individuals within society.

Further, in this chapter, the investigator tried to highlight the most important factors affecting the use and spread of these words, in addition to the most used category. The next chapter therefore is devoted for research methodology and data analysis.

Chapter Two

Chapter Two

Research Methodology and Data Analyses

2.1. Introduction

2.2. Methods of Data Collection

2.2.1. Quantitative Data

2.2.2. Qualitative Data

2. 2.3. Questionnaire

2.2.4. Interview

2.3. Population and Sampling

2.4. Analyses and Interpretation

2.4.1. The Questionnaire

2.4.2. The Interview Results

2.5. Conclusion

2.1. Introduction

In the previous chapter, the researcher dealt with the sociolinguistic context of Algeria in general and Mecheria speech community in particular, in addition to Mecheria historical background, the different taboo words in it, and the Islamic view towards them. The researcher also dealt with the most interesting topics which are the basis of our research namely disease and death.

In this section, the study procedures and data investigation used to accomplish the arrangement of points and destinations of this investigation was portrayed. In addition to the population, information accumulation, legitimacy, unwavering, quality, and the moral thought are likewise depicted. Every one of these means are parts of the exploration procedure and are associated with each other and additionally to the hypothetical base of the examination, the research will look profoundly on the mentalities of some speakers in Mecheria towards the utilization of certain taboo words. In other words, attempting to see the peoples' impression of these articulations and themes. In this manner, an exploration strategy was composed keeping in mind the end goal to gather quantitative and qualitative information that demonstrate the demeanors of Mecheria speakers towards the utilization of taboos.

2.2. Methods of Data Collection

Although many scholars and researchers agree that the data collection and analysis is a fundamental step to conduct any research, and that the completion of the research depends on it, they differ in the choice of the appropriate method for each research and since this process is an important step, any bad or inappropriate selection may affect the research and its final result. O' Leary (2004:150) declares that:

> **Collecting credible data is a tough task, and it is worth remembering that one method of data collection is not inherently better than another. Therefore, which data collection method to use would depend upon the research goals and the advantages and disadvantages of each method.**

First, the researcher relied on quantitative information collection through a structured questionnaire to reach a large number of people from both categories, and then analyzing and categorising them. Second, the investigator conducted semi-structured oral interviews for the elderly people for their inability to write in order to collect more data and to complete the results of the questionnaire, as well as to be able to obtain qualitative information that contributes to our research.

2.2.1. Quantitative Data

Quantitative information is a sort of measurable and correlational strategy utilized for getting particular, replicable and generalizable discoveries. Cresswell (2003:174) defends that quantitative techniques are exceptionally fundamental in any research since they furnish the researcher with **"a quantitative or numeric description of trends, attitudes, or opinions of population by studying a sample of that population".** He adds that from test comes about, **"the researcher generalizes or makes claims about the population".** This instrument of examination empowers the researcher to give plain and understanding of the information gathered on the grounds that the findings are spoken to factually as diagrams. Seliger and Shohamy (1989:80-81) declares in this respect: **"In quantitative research one classifies results, counts them, and even constructs more complex statistical models in an attempt to explain what is observed".**

2.2.2. Qualitative Data

Qualitative data is extremely varied in nature. It includes virtually any information that can be captured that is not numerical in nature. It appears as clarifications, stories, and occasions. Basically, the investigation of the outcomes is hard to control and to sort out. In addition, it isn't grouped into limited numbers. Objectivity is required at this level with a specific end goal to make the information got subjectively more test and logical. In his point of view, Patton (2002:22) observes that qualitative methods give specific portrayals of: **"situations, events, people, interactions, observed behaviors...".** He adds that these methods supply the researcher with **"direct quotations from people about their experiences, attitudes,**

beliefs and thoughts and excerpts or entire passages from documents, correspondence, records, and case histories". In this regard the researcher must be objective and honest in the processing and organization of data and must follow a clear method in addressing the phenomenon under consideration especially if it touches a sensitive side of society.

2. 2.3. Questionnaire

A questionnaire is a research instrument consisting of a series of written questions for the purpose of gathering information from respondents.[8]Its questions are created according to the topic studied and the population level. Questionnaires have advantages over some other types of surveys. Wikinson and Birmingham (2003:8) notify that:

> **Questionnaires can be designed and used to collect vast quantities of data from a variety of respondents. They have a number of benefits over other forms of data collection […] An effective questionnaire, is one that enables the transmission of useful and accurate information or data from the respondent and unambiguous ways that the respondent may interpret them.**

In this study, a structured questionnaire that contains short and closed questions on the population so that the answers are either "yes" or "no", and this leaves them far from the confusion and anxiety. The questionnaire also contains semi-closed questions in order to give them some suggestions and the participants have to choose the closest to their point of view and suitable for their daily dealings. Then, to provide some freedom to the population, some free questions are included they were free to answer and express their views without restriction**.**

It must also be taken into account that the length and simplicity of questions have an important role in leading the research and delivery the information to the

population. As for the language, the questionnaire has been written carefully with the MSA; whereas the suggestions and expressions are taken from Mecheria dialect.

2.2.4. Interview

Interview is a conversation where questions are asked and answers are given. Usually, it involves a transfer of information from the researcher to the respondent, which is usually the primary purpose of our research. In this vein, we were careful to use semi-structured interview because of the different ages of the population and because we were unable to anticipate their responses and their way of thinking in a formal way especially the elderly. As for the questions, the participants refuse to respond because the subject is sensitive and they avoid engaging in talking about it, it's in their point of view embarrassing and harmful. Therefore, 9 interviews were recorded in a secret manner. The method of asking questions was informal to avoid embarrassment. In fact, we have included the interview to know more about the attitudes and views ofsome of Mecheria informants towards taboos, as well as their opinions towards the talk about disease and death. Therefore, in the first question the participants are asked if they can discuss the two main subjects of disease and death in public. The second request went to know the main factors which prevent them from discussing or talking about them in their daily interaction, whereas the third is designed for investigating the frequency of use between old and young Mecheria speakers.

2.3. Population and Sampling

In this investigation, our objective population includes sources from various occupations, instructive foundations, ages and sexual orientations since these sociolinguistic factors assume an indispensable part in knowing the social and etymological levels of the respondents and, subsequently, the level of taboos usag. Actually, most scholars emphasize that taboos happen because of specific factors, and that it can be found in different places such as cafés, markets, schools, universities, work places and homes…etc. Thus, our questionnaire is delivered to participants from

different categories including students, house wives, nurses, jobless, policemen, doctors, teachers and bus drivers…etc.

In addition, a sample was chosen randomly for this research to ensure equal opportunities for all the population to express their opinions, and because it is easy to accomplish. Yet, Tagliamonte (2006 :18-19): introduces the term 'representativeness' as a good outcome of random selection. She says:

> **Originally, sociolinguists based their methodology on sociological methods, attempting to achieve 'representativeness' in their data collection practices by constructing a random sample of their targeted group.**

Thus, in order to get a true and valid data, the questionnaire was asked to strange participants, so as not to have any effect on their answers and thus on the credibility of the research. We have classified our sample into four sub-categories. 90 informants were given a questionnaire, but 20 individuals refused answering the questions. So, only 70 participants are included.

Age	Females	Males	Total
18 – 33	17	15	32
34 – 49	5	6	11
50 – 65	6	3	9
Above 66	12	6	18
Total	40	30	70

Table 2.1 : Categories of The Participants

As it is appeared in the previous table, the participants were selected randomly with the identification of the sample to be studied in advance, and this gave the participants equal opportunities to express their views and allowed us to cover different part and different age groups in Mecheria speech community. The first category included 32 participants representing 45.71% of the whole sample, with a

convergence in male and female participation rates . The most of the participants are university students, teachers, doctors, nurses, secretaries, administrators, accountants, lawyers, builders, painters, policemen, housewives, jobless, retired. The following table is an illustration of our division to the participants depending on their functions and their level of knowledge:

Functions	Females	Males	Total
University students	12	9	21
Teachers	5	3	8
Doctors	2	/	2
Nurses	3	/	3
Secretaries	1	/	1
Administrators	3	2	5
Accountants	/	1	1
Lawyers	1	3	4
Builders	/	2	2
Paiters	/	1	1
Policemen	/	2	2
Housewives	5	/	5
Jobless	3	2	5
Retired	5	5	10

Table 2.2: Functions and Educational Level of the Respondents

As shown in this table, the informants are coming from different social, educational and cultural backgrounds as well as their different ages and occupations and this has helped to enrich the research with important data.

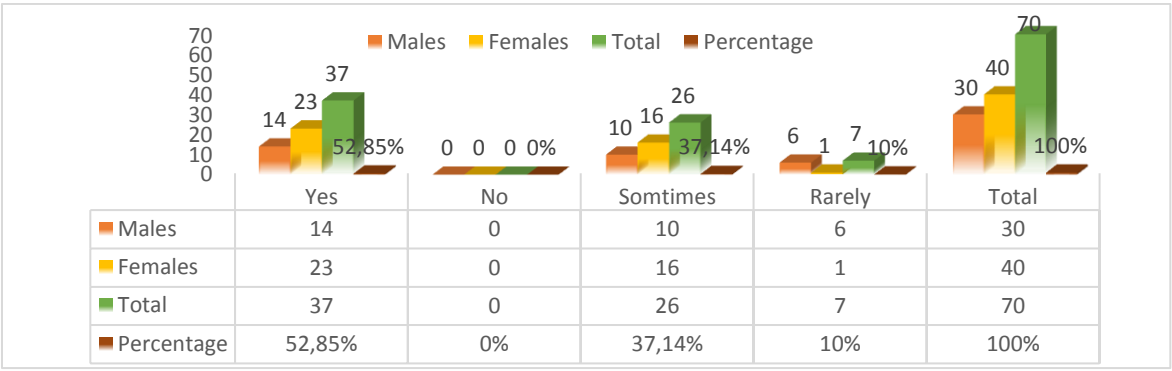
2.4. Analyses and Interpretation

The following analysis of questionnaire and interview will show the impressions of a large segment of Mecheria speakers towards taboos, means disease and death:

2.4.1. The Questionnaire

This questionnaire consists of four parts. Each part focuses on an important aspect. The first part aims at collecting an appropriate amount of personal information about informants such as age, gender and occupation., in order to identify the concerns of each segment. While the second part focused on determining the attitudes of the informants and their views towards death and disease as a means of collecting a number of lexicon items in the society. The third part aims to determine the extent of their involvement in the use of the words death and disease and how to deal with them. While the last part achieved in the positions of informants on the direction of these subjects and their sensitivity to them in a comparison between two different generations.

In fact, despite the sensitivity of the subject, the informants have answered the questionnaire expressing their different views. So, questions from 1 to 3 are to identify the informants as a presentation of the sample studied. In question 4, the informants were asked if they coincide with the words disease and death in their daily dealings.

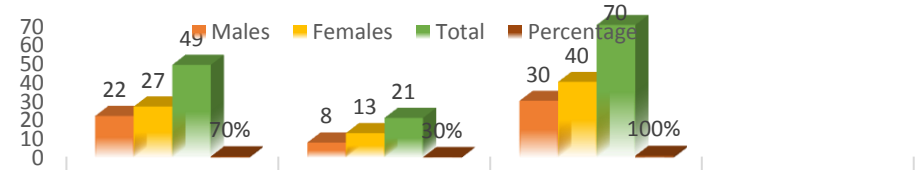


	Yes	No	Somtimes	Rarely	Total
Males	14	0	10	6	30
Females	23	0	16	1	40
Total	37	0	26	7	70
Percentage	52,85%	0%	37,14%	10%	100%

Table 2.3: The Informants Attitudes towards Disease and Death

As shown in the above table and chart, all informants, whether male or female, are confronted with the words "sickness and death" in their daily lives, while the incidence of this event varies between daily 52.85% and sometimes by 37.14% and rarely by 10%.

It is important at this point to clarify that the result of this question was positive because the nature of these words in the lives of people is normal by virtue of: in the first, Islamic religion, which emphasizes that the human creation is weak and that he is exposed to disease and death in his life as an order of God to maintain the balance of the world. In addition to this, the science that emphasizes and explains that man is a living being and that the human body is a complex structure of several limbs and performs different functions and he is exposed to disease and death every day in his life, if there is damage to one of these limbs or dysfunctions. Hence, we conclude that both males and females, from different ages, social and scientific backgrounds, believe in the word sickness and death as a reality. While in question 5, the informants were asked if they ever or a close family member had a serious illness.

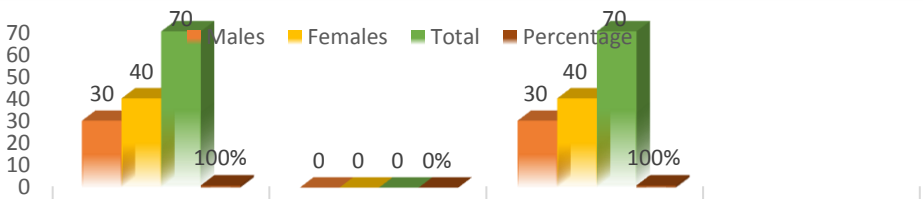


	Yes	No	Total	
Males	22	8	30	
Females	27	13	40	
Total	49	21	70	
Percentage	70%	30%	100%	

Table 2.4: The Informants Reaction Towards Experiencing Disease

The results of this question were to find out the extent to which informants are absorbed into the word disease, by experiencing it or living with a tried person. The majority of the answers were positive by 70%, while the rest denied the experience of the matter by 30%.

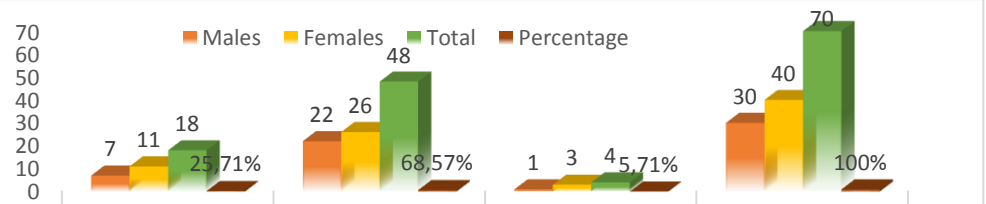
From this point of view, it is noted that most of the informants had an experience with serious diseases, especially young people, those between the ages of 18 and 55. This makes us sure that the subject of the disease has imposed itself within the community, especially in recent times compared to the past This may be due to technology, lifestyle and dependence on unhealthy artificial eating. So, the informants were asked about their feelings towards experiencing death.



	Yes	No	Total	
Males	30	0	30	
Females	40	0	40	
Total	70	0	70	
Percentage	100%	0%	100%	

Table 2.5: The Informants Reaction towards Experiencing Death

As exposed in the above table and chart, all the informants experienced the death of a close person, and despite the severity of the question, but all have responded positively. Therefore, the issue of death is widespread in the society almost completely, although the rate has increased at the present time compared to the past, perhaps because of the large number of diseases or signs of the end of the world, as noted by some informants. In this question number 7 the participants were asked about their ability to discuss disease and death subjects.

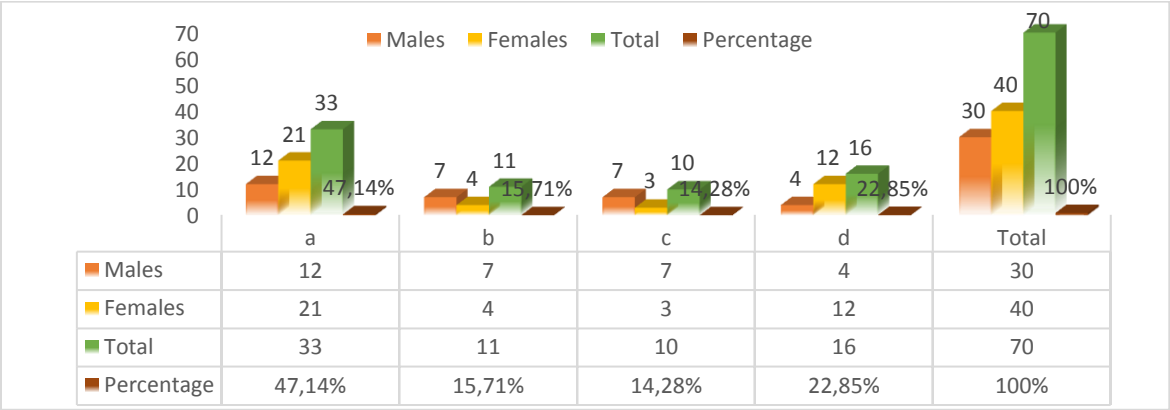


	Yes	No	Sometimes	Total
Males	7	22	1	30
Females	11	26	3	40
Total	18	48	4	70
Percentage	25,71%	68,57%	5,71%	100%

Table 2.6: The Informants Ability to Discuss Disease and Death Subjects

According to the previous table and shart, the majority of the informants have rejected the idea of engaging or participating in a discussion on the subjects of disease and death by 68,57%, most of the rejecters were the elderly, non- educated, and males. While a small percentage responded favorably, and most of them were educated and young persons by 25,71%. From here, it is noted that the discussion of these two topics

is a taboo, although that the sensitivity towards it has been reduced in the recent times, unlike the past and has become normal topics that can be traded, especially after the rise of the intellectual level and openness to the world. In this question number 8 the informants were asked about the meaning of the word ‘sickness’.

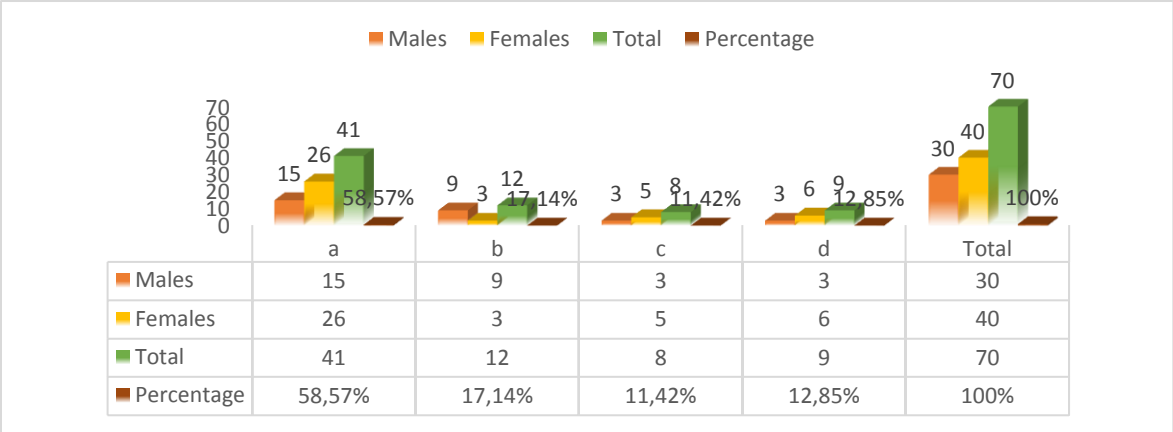


	a	b	c	d	Total
Males	12	7	7	4	30
Females	21	4	3	12	40
Total	33	11	10	16	70
Percentage	47,14%	15,71%	14,28%	22,85%	100%

Table 2.7: The Informants’ Definition of the Word ‘Sickness’

As shown in the results of the previous table and graph, most informants have answered on the meaning of the term "sickness" by the scientific definition, i.e., the answer ‘a’ by 47.14%, and most of the respondents are from the educated class, while the answers of the remaining informants have converged and ranged from 14.28% to 22.85% for the answers ‘b’, ‘c’, and ‘d’ and most of the respondents were older and illiterate.

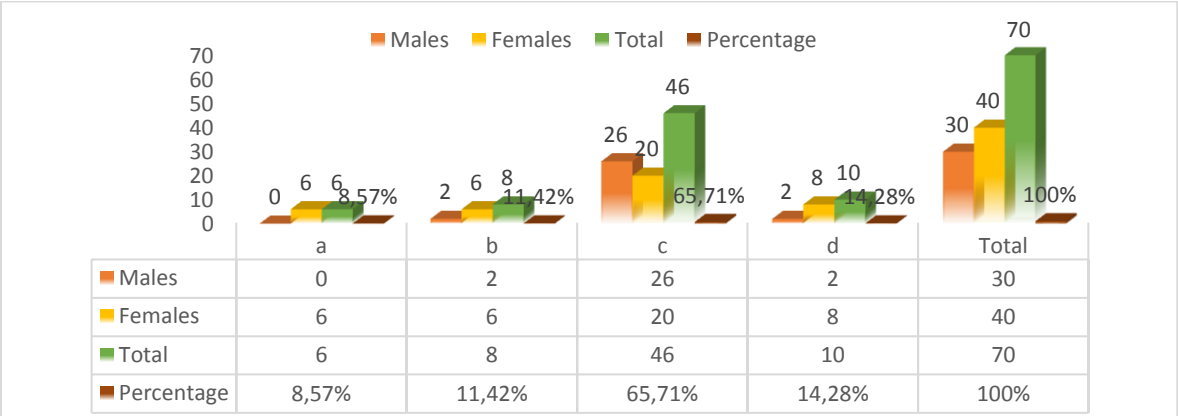
This shows us that the difference between the opinions of the informants between those who prefer the scientific definition and others prefer the religious one, is due to the scientific level of each layer and the way they deal with this word in society, in addition to the difference between the past and present times. Hence, in the question 9 the informants were asked about the meaning of the word ‘death’



	a	b	c	d	Total
Males	15	9	3	3	30
Females	26	3	5	6	40
Total	41	12	8	9	70
Percentage	58,57%	17,14%	11,42%	12,85%	100%

Table 2.8: The Informants' Definition of the Word 'Death'

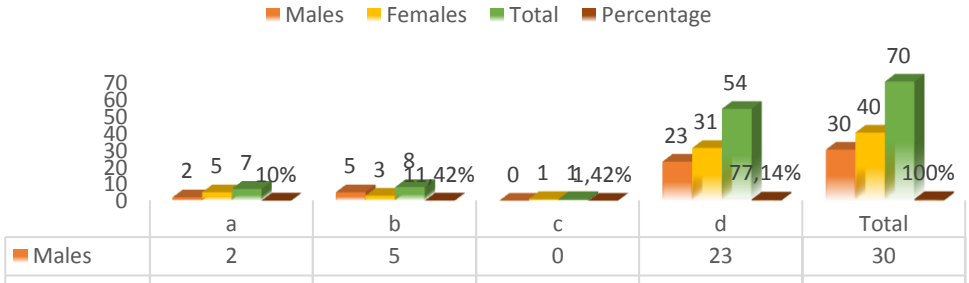
As noted in the table and graph above, the result of this question is not very different from the previous question. The answers of the informants differed between supporters of the scientific definition of the concept of 'death', i.e., the answer 'a' by 58.57%, and the religious or customary one, i.e., the answers 'b', 'c', and 'd' by 11.42%, 12.85%, and 17.14%.It is noted at this point that the educated class and young people tend to the scientific definitions of concepts while the elderly and non-intellectuals connect these concepts with the religion and custom in a comparison of between two different generations and the which is due to the level of their respective comprehension of these words and their view to it as an ordinary or taboo. In question 10 the informants were asked about how they deal with the case of having an infectious disease or in a sensitive area.



	a	b	c	d	Total
Males	0	2	26	2	30
Females	6	6	20	8	40
Total	6	8	46	10	70
Percentage	8,57%	11,42%	65,71%	14,28%	100%

Table 2.9: The Informants Reaction towards telling their Infectious Diseases

As for the results of this question, which are shown in the table and chart above, lion's share was for the third answer, i.e., ‘c’ where most of the informants refused to declare their infectious or sensitive diseases by 65.71%, which was issued by males and older persons, while some young people of the educated class tended to resort to the doctor or treat them personally by 11.42% and 14.28%. The first option was favored by some females by resorting to the close by 8.57%. Hence, we note that young people, especially women of the educated class, are more open in terms of diseases and treatment on males, especially the elderly, because of scientific progress and openness to the world and the emancipation of youth in general and females in specific from some of the past limitations. In the next question number 11 the informants were asked about the most common diseases that they avoid to talk about or even discuss in public.



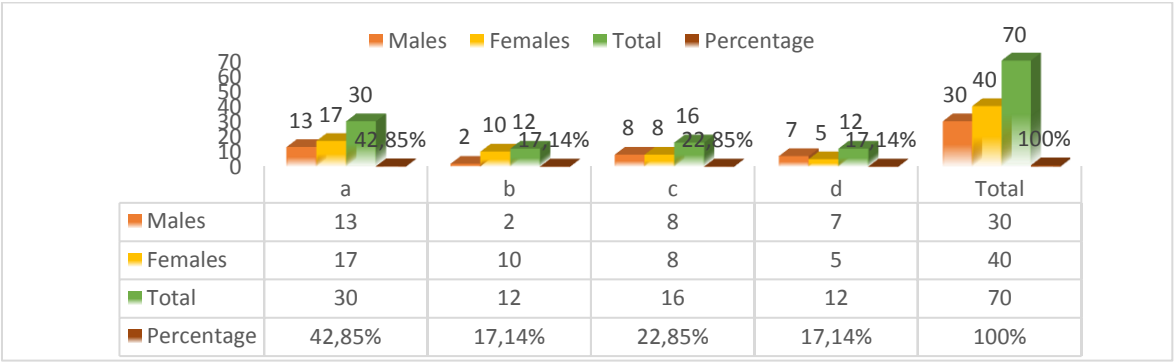
	a	b	c	d	Total
Males	2	5	0	23	30
Females	5	3	1	31	40
Total	7	8	1	54	70
Percentage	10%	11,42%	1,42%	77,14%	100%

Table 2.10: The Informants’ View of Some Most Common Diseases

As shown in the graph and table above, 77.14% of informants avoid talking about the disease and do not care about the name of the disease as much as their degree of seriousness or rather their idea of its seriousness, where their answers are summarized in the last preposition ‘d’. While a small percentage of the educated and especially females have appeared to be averse to the disease of AIDS and cancer by 10% and 11.42%.

In this sense, we conclude that most informants are afraid to talk about the subject of the disease even if some of them do not know the name of some serious

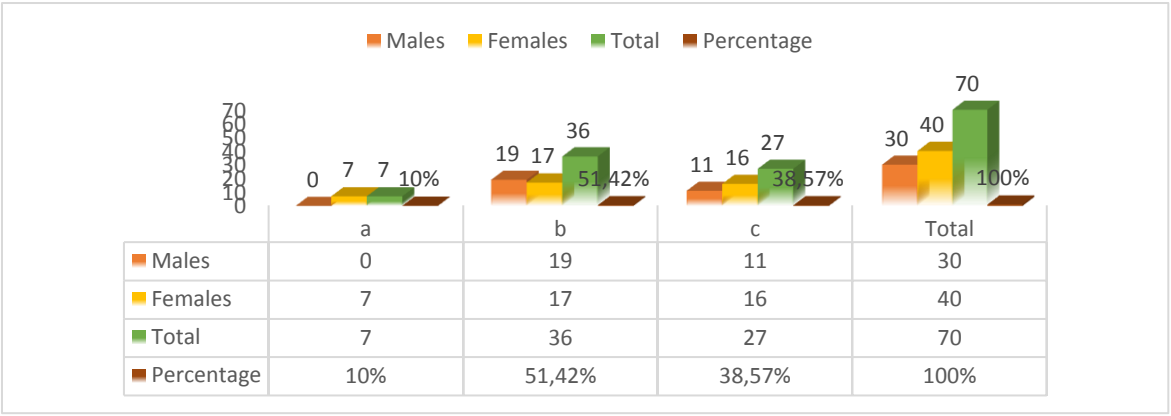
diseases, but they fear. This is due to the idea that these diseases are taboos and should not be discussed or contradicted, perhaps because of fear or because they are in a sensitive area of the body or because they are a result of sexual relations and many other reasons. In the question number 12 the participants were asked about the most appropriate expression they use to describe a ‘dead person’.



	a	b	c	d	Total
Males	13	2	8	7	30
Females	17	10	8	5	40
Total	30	12	16	12	70
Percentage	42,85%	17,14%	22,85%	17,14%	100%

Table 2.11: The Informants’ Referring to a ‘Dead Person’

The results of this question showed that a group of informants used the direct concept of the word “dead” or “died” when they spoke about a person who died, by 42.85%, most of them were workers and intellectuals of both males and females. While the rest of the informants and with a proportion of more than half chose the answers ‘b’, ‘c’, and ‘d’ by 17.94% and 22.85% to express the term with other definitions and avoid the use of the word directly. This confirms the results of the above questions about the treatment of informants with the word ‘death’ as a taboo and this is due to several reasons, including religious reasons respect for the deceased, psychological reasons as this word has a great impact on their psyche, as thinking of punishment, hell...etc, or social reasons as something special for no one to mention. In this last question number 13 the informants were asked about their ability to discuss the subjects of ‘disease’ and ‘death’ with family.



	a	b	c	Total
Males	0	19	11	30
Females	7	17	16	40
Total	7	36	27	70
Percentage	10%	51,42%	38,57%	100%

Table.2.12: The Informants' Reaction towards Discussing 'Disease' and 'Death' Subjects

In this table and chart, the analysis of the results of the last question shows that the informants avoid the subjects of disease and death in their daily lives and do not talk about them. The highest percentage of responses was 51.42% for the second choice 'b', while the last choice 'c' was 38.57%. A few informants have shown their satisfaction with the subjects of disease and death, and that they have not found any complications in discussing one of them in public through their choice 'a' by 10%. To show us that even with the scientific, cultural and technological development and openness to the world is still a group of Mecheria speakers beware of some topics in their dialogues and avoid them in their daily lives and classify them as taboos such as disease and death.

2.4.2. The Interview Results

The study of taboos in a society is the basis of its understanding, as this study provides us with sufficient information to understand and deal with some of Mecheria speakers through the knowledge of their reaction to taboos, especially the subject of disease and death. From here we can distinguish the reasons for making it taboo and prevent it, as it gives us an overview of the values and norms of this speech community, its customs and religious, social, and cultural traditions in addition to, its prohibitions of words and actions. In this part of the study, we focused on knowing the

reaction of informants about the subjects of disease and death and to what extent they can be discussed in public.

1.Can you discuss the subject of disease and death in public?

9 informants were interviewed and asked this question. Their answers were different. Most of them means 7 informants with 77.77%, said no, we can't. And they explained that they are sensitive topics in the first place and should not be addressed to them. Second, because they are a defect and morally inappropriate, means taboos. Whereas 2 informants, i.e. 22.22%, answered yes, but only in cases.

It is noted at this stage that most informants refuse to address the topics of disease and death or even discuss them in public.

2.What factors prevent you from addressing these topics?

The informants said that many of the reasons prevent them. The first, is the fear and the disgust, that when they mention the diseases they imagine how to be the case of the infected and in their opinion that thinking about disease push them to be obsessive, which may lead them to injury, with regard to death, the mention of it leads them to think about the other world, punishment and hell, which they refrain from talking about.

Second, the disease and death are related to the human body and some of the sensitive parties in it and because they are Muslims, this is a defect and it is haram to be talked about.

3.What do you think is the difference between the past and present in dealing with the subjects of disease and death?

6 informants by 66.66%, most of them males, said that dealing with the themes of illness and death has become easier due to changes in the personalities of people who lost a large part of their constituents. There is no longer a difference between men and women, and the move away from religion and the norms of society gave freedom

to people to talk in all subjects even taboos. Whereas 3 informants by 33,33%. While the rest have insisted that despite the social development, economic and technological and the high proportion of learners and openness to the world, but the themes of disease and death did not lose their immunity in different times and still considered taboo.

As a result of this answer we conclude that the themes of death and disease are still considered taboos in Mecheria speech community.

2.6 Conclusion

In this chapter, the research methodology used in this study is presented, which enabled the researcher to collect quantitative and qualitative information which was categorized and analyzed objectively. As a first step, a questionnaire consists of 13 questions that varied from closed and semi-closed questions, and a semi-structured interview to validate the research hypotheses on the topic under study. Therefore, the three hypotheses under study have been proved by analyzing the results and the reactions of the informants.

General Conclusion

General Conclusion

Taboos are one of the complex topics that have turned to academic attention recently in an attempt to study and deepen it in many respects, this is what many Western and Arab researchers have done through their works. However, the method of presenting and dealing with these taboos differs from one scholar to another due to the countless topics that are related to them. And among these topics, which differ from the speakers' points of view is it taboo or not, themes of disease and death.

Algeria in general and Mecheria in specific is characterized by a unique, complex and rich linguistic and cultural mixture which made it a focus of study. Actually, this research paper provides an overview of the social and cultural complex, religious norms, customs and beliefs of Mecheria speech community. In addition to studying the attitudes and reactions of the speakers towards the themes of disease and death, which differed from one to the other depending on their gender, age, social backgrounds and level of education, as well as the reasons and factors that made them tabooed subjects in comparison between past and present. Thus, the researcher has utilised a questionnaire and a semi-structured interview for some of the Mecheria speakers to reach the objectives of the current study.

It is interesting to note that addressing the subject of taboos in research needs boldness and courage especially in this geographical area, which is seen as an embarrassing and inappropriate subject for scientific and academic research.

In this context, the study proved that the two themes of disease and death are among the most frightening and controversial taboos in society, as it is clear that the speakers in Mecheria speech community avoid talking about them or even refer to them in direct terms, where they tend to use words parallel or explanations instead of saying the word 'disease' or 'death'. It is also clear that this avoidance and fear of these two subjects is not new and is the result of strong ideas and deeply rooted beliefs in society, which has an important role in influencing the attitudes and views of its inhabitants.

The gender and the age play an important role in determining the views of the speakers and their attitudes towards taboos. As a matter of fact, the females were more receptive to discuss the topics of illness and death in public with reservations about some cases while the males were more intolerant of the subject and most refused to talk about it or even discuss it in their point of view it is a defect and a personal matter. In addition, the researcher found that the elder ones were more conservative to talk and discuss the themes of disease and death, as for young people, they were more open about talking about the themes of disease and death but in specific way especially in public. Consequently, it becomes clear that the first hypothesis has been proved after analysing the results, individual's attitudes and beliefs differ from one person to another according to different psychological and physical factors such as age, gender, educational background.

In their beliefs, and in proving the second hypothesis that different social and moral reasons push people to use taboos, sometimes to express their emotions and feelings, the informants refused to talk about disease and death due to their strong religious affiliations as well as their customs and traditions. The subject of illness and death is a matter of God and by talking about it, the researcher object to the will of God as it is a defect because it is linked to the human body, which is a sensitive part and cannot be talked about in public. Further, they refused to talk about them in detail or in depth because of the fear of them and their association with words and expressions that are socially inappropriate, and to respect the feelings of people avoid talking about them is better.

In comparison of the two generations, the third hypothesis has been confirmed in terms of the quantity of taboos that are used from the elders and the youngers in their daily dealings. The investigator proved that the amount of words used by young people is much lower than that of the elders and what was considered taboo and socially inappropriate in the past becomes normal and can be traded in the present due to openness to the world, globalization and the loss of some words and expressions for their social and religious value.

Hence, it has been concluded that the three hypotheses have been proved in this study so that the subjects of disease and death are considered taboos and are not discussed in public, and what is considered as a constant criterion in Mecheria is not necessarily applied in other societies.

It should be pointed out that this study was conducted with a specific group of the population and a certain number of speakers whose age, occupation and gender are different. The results are not limited and terminated but may be motivated to conduct broader research on the subject. Further, it should be noted that the results of this research are not disseminated to the entire society, since what most people consider to be taboo and cannot be talked about may be considered by a few as an interesting subject for discussion.

Finally, it should be clear that what has been achieved through this study is not final and is not complete and needs to be supplemented by other researches to provide a more comprehensive view of the Mecheria community and the most tabooed topics in it.

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Appendices

Appendix A:

Questionnaire

1. Age……..
2. Male ☐ Female ☐
3. Occupation…….

4. Do you coincide with the words disease and death in your daily dealings?

   a- Yes ☐ c- Sometimes ☐
   b- No ☐ d- Rarely ☐

5. Have you ever or a close family member had a serious illness?

   a. Yes ☐ b- No ☐

6. Have you encountered the death of a close person?

   a- Yes ☐ b- No ☐

7. Can you enter into a discussion about death or diseases such as AIDS or Cancer?

   a- Yes ☐ b- No ☐
   c-Sometimes ☐

8. What does the word ‘sickness’ mean to you?

   a- Disruption of body functions ☐ c- God punishment ☐
   b- Patience exam ☐ d- Atonement for sins ☐

9. What does the word ‘death’ mean to you?

   a- Stops of body functions ☐ c- Move to the other world ☐
   b- Time of calculation and punishment ☐ d- End of life ☐

10. If you happen to have an infectious disease or in a sensitive area, do you?

a- Tell it to a close associate ☐
b- Tell it to the doctor only ☐
c- Do not tell anyone and try to hide it ☐
d- You try to treat it alone and in a secret way ☐

11.. How do you say a ‘’person died’’?

a- Aids (Sida) ☐ c- Congenital malformations ☐
b- Cancer ☐ d- All of them ☐

12. How do you say a ‘’person died’’?

a- He died ☐ c- God took His trust ☐
b- He went to his creater ☐ d- His days are over ☐

13.. If you find your family members talking about a sick or dead person, do you?

a- Enter into the dialogue with them ☐
b- Tell them to stop/change the subject ☐
c- Ignore it ☐

Thank You

Appendix B:

استبيان

1. السن.....
2. ذكر ☐ أنثى ☐
3. المهنة .....

4. هل تتصادف مع كلمتي المرض والموت في تعاملاتك اليومية؟
نعم ☐ لا ☐ أحيانا ☐ نادرا ☐

5. هل صادف أن مرضت (ي) او أحد أفراد عائلتك المقربين بمرض خطير؟
نعم ☐ لا ☐

6. هل واجهت موت أحد المقربين؟
نعم ☐ لا ☐

7. هل تستطيع أن تدخل في نقاش حول موضوعي الموت أو أمراض العصر مثل الايدز أو السرطان بأنواعه؟
نعم ☐ لا ☐ أحيانا ☐

8. ماذا تعني لك كلمة مرض؟
   - ❖ اختلال في وظائف الجسم ☐
   - ❖ امتحان للصبر ☐
   - ❖ عقاب من الله ☐
   - ❖ تكفير عن الذنوب ☐

9. ماذا تعني لك كلمة موت؟
   - ❖ توقف وظائف الجسم ☐
   - ❖ الإنتقال إلى العالم الآخر ☐
   - ❖ وقت الحساب والعقاب ☐
   - ❖ نهاية الحياة ☐

10. إذا حدث وأن اصبت بمرض معدي أو في منطقة حساسة لا قدر الله هل؟
   - ❖ تصرح به لأحد المقربين ☐
   - ❖ تصرح به للطبيب فقط ☐
   - ❖ لا تصرح به لأحد وتحاول أن تكتم الأمر ☐
   - ❖ تحاول أن تعالجه في البيت بطريقة سرية ☐

اقتراحات.....

.....

11. ما هي أكثر الأمراض التي تتجنب الحديث عنها أو مناقشتها في العلن؟

- ❖ السيدا ☐
- ❖ السرطان ☐
- ❖ التشوهات الخلقية ☐
- ❖ كلها ☐

اقتراحات.....

.....

12. كيف تقول إنسان مات؟

- ❖ فلان مات ☐
- ❖ فلان مشا عند خالقه ☐
- ❖ ربي دا أمانته ☐
- ❖ فلان كملو أيامه ☐

اقتراحات.....

.....

13. إذا وجدت أفراد عائلتك يتكلمون حول شخص مريض أو ميت هل؟

- ❖ تدخل معهم في الحوار ☐
- ❖ تأمرهم بالتوقف أو تغيير الموضوع ☐
- ❖ تتجاهل الأمر ☐

اقتراحات.....

.....

وشكرا

Appendix C:

Interview

1. Can you discuss the subject of disease and death in public?
2. What factors prevent you from addressing these topics?
3. What do you think is the difference between the past and present in dealing with the subjects of disease and death?

Appendix D :

المقابلة

1. هل يمكنك مناقشة موضوعي المرض والموت في الأماكن العامة؟
2. ما هي العوامل التي تمنعك من التعامل مع هذه المواضيع؟
3. ما هو الفرق بين الماضي والحاضر في تعاملنا مع موضوعي المرض والموت؟