Investigating the Influence of Dimensions of Martin's Humor Styles on Bereavement Outcomes, with Coping Humor Being Examined as a Potential Moderating Variable

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Abstract :   Humor and bereavement are universal phenomena, and are significant characteristics of human society. Despite the established role of humor as a significant coping variable, and it's rise in usage in modern day society, there is limited / potentially no research that assesses their correlation. The present study attempts to address this literature gap by assessing the role of Martin's Humor Styles in predicting bereavement outcomes, with coping humor being studied as a potential moderating variable. It had been hypothesized that the humor styles would significantly influence domains of bereavement among the target population, and that coping humor would be a significant moderating variable. The study is explorative and quantitative in design, and employed Martin's Humor Styles Questionnaire (HSQ), Coping Humor Questionnaire (CHQ), and Bereavement Experience Questionnaire - 24 (BEQ-24) for the same. Using a quota sampling approach, data was collected from one hundred twenty-two participants (N = 122), with an equal gender ration (M = 61, F = 61). A Google Form was created for the purpose of data collection, with items concerning demographic details and exact copies of the three questionnaires. To complete the survey, participants had to be Indian nationals, fall within the age range of 18-35 years, and have lost a loved one in the past two years. Stepwise multiple linear regression had been conducted on all humor styles with each of the bereavement domains as well as the total bereavement score so as to assess predictive value of each humor style on the dependent variables. A moderator analysis had been run to test significance of coping humor as a significant moderating variable between each humor style and each domain of bereavement as well as total bereavement experience. Findings demonstrate that only affiliative humor is a significant predictor of pre-occupation with the deceased, and that affiliative humor independently as well as a model combining affiliative and self-defeating humours are significant predictors of Existential Loss/Emotional Needs; Guilt, Anger, And Blame, And The Total Bereavement Outcome. However, moderator analysis demonstrated that coping humor was not a significant moderating variable in the present study, thereby leading to the rejection of its hypotheses. The present study is the first of its kind, and suggests that future studies incorporate larger and more diverse sample, cultural diversity, and cross-cultural comparisons for future studies.

Index Terms - **Humor, humor styles, bereavement, coping**

Chapter I : Introduction

Defining Humor

Humor is a broad and multifaceted concept (Cooper, 2005) that typically refers to any event or behavior that creates amusement or produces a quality that adds amusement to the situation (Bardon, 2005). Romero and Cruthirds (2006) define humor as consisting of "amusing communications that produce positive emotions and cognitions" in the audience. A core component of the experience of humor is that it is perceived as "funny" (Ruch & Ruskin, 2008). Humor is often accompanied by smiling or laughter. Numerous cognitive processes also underlie humor that are important for the processes of reception, perception, integration and interpretation (Ruch & Ruskin, 2008).

Humor is also an "expert cultural performance" (Francis, 1994) as it relies on an understanding of cultural norms, expectations, and implicit scripts (Fang, 2018). According to Francis (1994), humor creates amusement and positive sentiments while reducing the presence of any external threat and simultaneously restoring the "feeling norms" of the situation-i.e., it regulates the emotional tone of the situation. However, humor is done at the expensive of someone else, usually an excluded person or group
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According to Giles et al. (1976), people engage in humor for primarily four reasons: to create in-group solidarity, to create a power dynamic and establish superiority, to gain approval of others, and to reduce attention. Francis (1994) also highlighted that humor serves the purpose of emotional management: that in situations that produce intense and distressing emotions, humor helps in diffuse and regulate the emotional overwhelm.

Laughter

Hobbes defined laughter as "the passion of laughter is nothing else but a sudden glory arising from sudden conception of some eminency in ourselves, by comparison with the infirmities of others, or with our own formerly" (Hobbes, 1845).

Laughter is a form of expression of the emotion of the mirth that accompanies humor (Martin, 2007). This laughter can range from a small smile, to chuckles, to full blown laughter that is accompanied by flushing of the face, changes in bodily movement (such as throwing one's head back or slapping one's thigh). Laughter serves a biosocial function of indicating playfulness, such as in cases of playful teasing, it indicates that one is not actually insulting the audience (van Hooff, 1972) as well as inviting others to join in on the playfulness (Owren and Bachorowski, 2003; Russell, Bachorowski, and Fernandez-Dols, 2003). It also serves the purpose of interpersonal integration (Keltner & Bonanno, 1997). Thus, humor is also socially embedded and relies upon the cognitive appraisal of the incongruity by the audience as well This is also demonstrated by the fact that our own laughter is primed by others' laughter (Provine et al., 2004) and that a real or virtual presence of laughter can prime outs (Provine et al., 2006; Provine et al., 2004). Laughter has these been found to restore equilibrium after any state of tension (Long & Graesser, 1988) It also serves the purpose of de-escalating tension by down regulating negative emotions (Bloch et al., 2015). Keltner and Bonanno (1997) found that Duchenne smiling is linked with a decrease in negative emotions during bereavement and an increase in positive emotions Duchenne smiling, possibly due to the physiological relaxation that accompanies Duchenne smiling. Laughter is also associated with an improved immune functioning, and significantly reduces depression and uplifts mood (Zand et al., 1999)

Associated with laughter is the concept of sense of humour, with refers to an enduring trait (Ruth, 1998b) of "habitual individual differences in all sort of behaviors, experiences, affects, attitudes, and abilities relating to amusement, laughter, jocularity, and so on." (Martin, 1998). It is multifaceted in nature, and can be understood as a personality trait with individual differences, an emotional response to a stimulus, or a mental process (Martin, 2001). It is also a coping strategy that allows one to brave adversity with a humorous approach (Martin, 2003). It is more gradual in its emergence, rather than a sudden manifestation, and is not a 'flash' or immediate behavior but more slower and more refined. A person with a high sense of humor is viewed more favorably, and believed to be more pleasant and creative, and less cold (Cann & Calhoun, 2001). Sense of humor can also be understood as a worldview a person holds wherein there is a non-serious outlook that is held, and a positive attitude (Martin, 2007). It can also be conceptualised as an aesthetic response wherein a person enjoys and appreciated jokes.

Theories of Humor

Superiority / disparagement theory of humor

It was only in the eighteenth century that the term 'humor' came to be associated with laughter and funniness; Henri Bergson's book Laughter, published in 1900, is considered to be the first book written on humor by an eminent philosopher (Morreall, 2012), and until recently, humor and laughter were seen in a negative light and as something that one must not engage in. Plato is associated as with being on the forefront of the criticism of humor, seeing it as malicious and a vice, and something that overpowers and supersedes rational thinking. Humor was associated with mockery of others and a plummet in self-control, a perspective that was also backed by the Stoics; thus, he emphasised on the importance of exercising self-control over humor and laughter. Following Plato was Aristotle, a Greek thinker, who agreed with him on the subject of humor and equated it to jesting (Aristotle, 1941), and stated that because humor is the mockery of others, it must be avoided at all costs. He brought in the component of law, stating that it forbids most kinds of mockery and that the jesting nature of humor must also be prohibited.

This contempt towards laughter and humor was also carried forth by the Christian thinkers as the Bible mentions laughter with the intention of conveying lust and hostility and anger. The also carried forth the early belief that links humor with poor self-control and employing this belief to also advocate for a more sober lifestyle (Morreall, 2012). The contemporaries of this time, Thomas Hobbes and Renè Descartes, were also advocating against laughter and humor.

The Superiority Theory, the oldest theory and the first known attempt of understanding humor, thus arose out of the general argument against laughter was based on the belief that it is a social vice that arises at the expense of ridiculing others. This leads the associated belief that humor established one as superior to the other and jesting on the other's weakness (Dadlez, 2011). Keith-Speigal state that the principle of superiority establishes ridicule and dynamics of inferiority-superiority as the central components (1972). However, this theory doesn't define humor and certainly doesn't cater to all forms of humor, but is more specific in its approach and the forms of humor it is directed towards, with also raising questions around etiquettes of humor (Linlott, 2016). The theory has plenty of counter-examples that point out its limited subject matter, such as laughing at puns, witty remarks, laughing out of nervousness, etc (Linlott, 2016), thus fails to draw a distinguishing line between laughing at and laughing with others. Therefore, the theory has been criticised for its highly specific and reductionist, as well as an overly negative approach towards humor. This, along with the rise of other theories of humor and laughter, led to a gradual decline of the Superiority Theory in the 18th century.

The relief theory or the tension relief theory of humor

This theory, which is linked to the works of Spencer (1860) employs the metaphor of a hydraulic pressure-relieving valve, stating that as the valve helps release the pent up heat in a steam boiler and restores homeostasis, laughter also helps release pent-up physiological energy within us, and restore the homeostasis of the nervous system by bringing the arousal levels back to its typical range (Morreall, 2012). Laughter is seen as a "successful outcome" and a sign of relief (Martin, 2007).

However, this theory has been rebuffed by Berlyne (1972), who used Hebb's (1955) concept of an inverted-U that indicates the relationship between physiological arousal and subjective pleasure to explain laughter: that any deviance from the typical range of arousal is detrimental to subjective pleasure. Based on this, he gave two inter-related mechanisms of arousal: arousal boost and arousal lag. The former comes into force during the process of either telling a joke or perceiving in it, wherein arousal is elevated, and an optimal level of subjective pleasure is experienced; the latter is activated when the arousal exceeds the optimal range and its aversive impact kicks in. This is further countered by the punch-line of the joke, which leads to a rapid reduction in arousal from the aversive numbers to the optimal level, thereby leading to the subjective experience of enjoying the joke. Instead of viewing laughter is a mechanism of releasing the higher levels of arousal, Berlyne (1972) considered it as a form of expression of pleasure that is resultant of moderation of arousal to an optimal level.

The incongruity theory of humor

This theory postulates that laughter arises from a perception of incongruence. Linked to the works of Aristotle's *Rhetoric*, it states that the speaker must create an expectation of an outcome, and then violate the set-up, thus causing incongruence; as a result of the disappointment in expectation, laughter is elicited. Although the theory is linked to Aristotle's work, the use of the term 'incongruence' is associated with the works of Beattie (1979) and his notion that: *"two or more inconsistent, unsuitable, or incongruous parts or circumstances, considered as united in one complex object or assemblage, as acquiring a sort of mutual relation from the peculiar manner in which the mind takes notice of them"* (Beattie, 1979). This theory focuses more specifically on the cognitive components, as observed from a heavy emphasis on the perception of incongruence. However, theorists suggest that incongruence is not a sufficient condition, and must be supplemented by other factors as well, such as a sudden incongruence (Suls, 1983), a context that is playing (Rothbart, 1976), and a resolution of the incongruence so as to be able to perceive the joke as 'funny,' as stated by the incongruity-resolution theory (Schultz, 1972). According to the incongruity-resolution theory, the listener must engage in the mental activity of re-tracing the joke from the beginning and connecting the dots to the punchline so as to reduce the ambiguity and 'get the joke.'

Freud's theory on humor

In his book, The *Interpretation of Dreams* (1900), Freud postulated connections between psychic production of dreams and of humor, which he further elaborated in his book focusing specifically on this, *Jokes and their Relation to the Unconscious* (1905), and later a paper titled *Humor* (1928). He stated that dreams and jokes are quite similar in their indirect forms of representation, and are sleeping/waking counterparts of each other, terming both of them as 'dream-work' and 'sleep-work,' Just as the unacceptable id is disguised and finds an outlet symbolically via our dreams while we are unconscious, jokes, too, function on the same work, but during the conscious parts of our day. Jokes tend to arise from unconscious processes, and emerge to us from a period of blankness in a bottom-up fashion (Christoff & Dauphin, 2017). Freud also classifies humor as a defence mechanism (Freud, 1905), but a rather different kind as it acknowledges the presence of a threatening stimuli; it engages in the act of transforming the threat into one that is more manageable, thereby reducing the perceived impact, and adapt better.

Bergson's theory of humor

Bergson, a French philosopher, connects humor and laughter to concepts of materialist and absurdity of life. According to him, every comic situation arises as a reminder of the rigidity and inflexibility of the body (Martin, 2021), Often, we get too consumed in the gracefulness of the body, which leads to us disregarding the materiality and mechanism of the body; laughter thus emerges as an intellectual acidity that is not linked to emotion, but when attention is paid to this nature of rigidity of the body.

Bergson also insisted on putting laughter in a social context and understand it's utility from a social lens (Bergson, 2012). It is a "social instrument" (Teslaar, 1913) that helps re-focus our attention to the inelasticity of human life.

Despite all their differences in perspectives, each theory can be individually used to explain certain situations: for example, relief theory can be applied to explain humor in tense and difficult situations, incongruity theory can be applied in situations where the participants/audience has contrasting viewpoints, and superiority theory can be used in situations where power dynamics are an importance component of the humor.

Benign-violation theory (Mcgraw 2012)

The Benign Violation Theory (McGraw & Warren, 2010) states that humor takes place when a stimulus is perceived as a violation of social norms, but is also benign/non-threatening in nature. It also states that increased psychological distance (the perceived closeness or distance to the stimulus that can be of the following types: spatial or geographical, socially and with regard to social relations, temporal, and hypothetical) (Liberman & Trope, 2008) also contributes to the perception of the event as benign.

The construal-level theory states that the there is a proportionate relationship between distance and the degree of abstraction in the perception of an event, meaning that as the psychological distance, we are less likely to perceive an event in concrete manner, and more in abstract terms, which further reduces the degree to which we feel personally affected by an event. With evolution, our perception of what is considered a threat has also expanded to include threats to our identity as well as social and linguistic norms (McGraw & Warren, 2010). This leads to them proposing that when a treat is perceived as acceptable, then the humor related to this is considered as acceptable.

Another influencing factor is that threat must be perceived as benign; this further communicates the following conditions: a threat must be perceived, said threat must not be so low in its degree that it is not perceived as a 'threat,' and that it must also not be an extreme form of violation. Another component is of distance: too much or too minimal distance can sway the impact of humor.

McGraw et al. (2012) established that in cases of severe violations, increased psychological distance increases the degree of which a situation is perceived as humorous, indicating that the more distant we are from a grave situation, the more likely we are to perceive it as humorous. In cases of benign or milder forms of violations, closeness to the event increases the degree of humor attached. It was also found that psychological closeness leads to more concrete construals, whereas psychological distance allows for more abstract construals, which allow for one to interpret a situation from different perspectives, thereby increasing the degree of humor that can be found in the situation.

This theory also closes the gap that previously existed in explaining why tickling produces laughter. As per the findings associated with the benign-violation theory (McGraw et al., 2012), tickling from someone who is deemed to be trustworthy is perceived as a benign threat, and the event is thus perceived as humorous, thereby leading to laughter. However, if the tickling was done by someone who is not trusted, then the psychological distance closes and the situation is also perceived as highly threatening instead of benign, thereby leading to an absence of laughter. In most cases, if one tickles themselves, then no humor will be perceived because there is no threatening stimulus.

Martin's Humor Styles

In his book, Martin et al. (2003) gave four types of humor, based on which he developed the Humor Styles Questionnaire. These four dimensions are : affiliative, self-enhancing, aggressive, and self-defeating. These can also be categorised into two broad type : adaptive or healthy (affiliative and self-enhancing) and unhealthy and possibly even detrimental (aggressive and self-defeating). These are further elaborated.

Affiliative humor is a type of humor that is non-hostile in nature, and seeks to enhance interpersonal relationships and cohesion. Telling jokes to amuse others and making them laugh is a form of affiliative humor. Self-enhancing humor refers to engaging in humor even in the absence of a social audience. This type of humor arises from amusement in the incongruities of life, and allows one to remain humorous even in challenging times. Both styles and are characterised by a high level of humor production (Ruch, 2013), and are benign in nature (Besser & Zeigler-Hill, 2011), making them non-threatening and uplifting in nature.

Aggressive humor is characterised by the use of humor that is at the cost of someone else, and is condescending or manipulative towards them. Cracking sexist or casteist jokes, teasing someone for their mistakes, make fun of a person's insecurities, etc, are reflect the aggressive style of humor. There is an underlying lack of respect for the person in that moment. Self-defeating humor refers to when a person amuses the audience at their own cost or when they are the 'butt of a joke.' Cracking jokes on one's shortcomings or laughing at jokes made by others on one's flaws reflects this style of humor. There two are maladaptive and injurious in nature (Ruch, 2013) as they can create intrapersonal as well as interpersonal conflict for the people involved.

Components of Humor

Affective component

Humor is associated with positive emotions (Musiichuk et al., 2017), that helps alleviate negative emotions, and facilities regulation of emotions, though research has been inconclusive due to mixed results across different studies. This could be attributed to humor being heterogenous : there are different types of humor, and their 'success' and consequences depends upon various contextual factors (Samson & Gross, 2012). Martin's (2007) theory of humor categorises different types into what are relatively positive and negative with respect to their indication of psychological well-being.

Positive and negative forms of humor tend to serve different purposes: positive humor allows one to reappraise the situation in a more constructive manner whereas negative humor allow us to distance from the threatening stimulus although without engaging in reappraisal (Samson & Gross, 2012). Vaillant (2000) defined humor "sensible" for permitting emotional expression without the creation of discomfort on others. According to him, it allows people to look directly at the threatening or uncomfortable stimulus without an emotional overwhelm, thereby making it a mature defence (as aligned with Freud, 1928). Such defences allow us to reduce conflict without compromising on functioning. In fact, humor acts as a 'transformative' defence (Vaillant, 2000) that doesn't distort reality but allows mobilising of resources to continue, or even enhance, functioning.

Because humor arises mirth, it helps counteract the effects of negative emotions like sadness and anger (Lefcourt et al., 2011). The mirth accompanying humor helps regulate the negative emotions (Strick et al., 2009). Humour doesn't shield us from negative emotions, helps us in engaging in "perspective-taking" that buffers us from the full force of negative emotions (Lefcourt et al., 2011). Mentally distracting ourselves from the stimulus helps with emotional regulation of the event.

The affective component also manifests in behavioral responses, such as bursting out with giggling, chuckling, laughter and its contexts (such as nervous laughter or tentative laughter) (Samermit & Gibbs Jr, 2016).

Cognitive component and humor perception

The cognitive component of humor is derived from the incongruity theory, wherein the audience is able to perceive humor as such as a result of being able to perceive the concepts or ideas as incongruent (Ziv, 1984). Due to the heterogeneous nature of humor, the cognitive processes underlying it as well as influencing them are also not uniform across its types. McGhee (1979) notes that the awareness of the incongruity between various components such as events, objects, ideas, and social expectations, resolution of which leads to humor.

Various cognitive processes have been found to underlie creation as well as perception of humor. Reduced response time (Goldstein, 1970), a sudden 'a-ha' moment of insight (Gick and Lockhart), and the ability to define a problem and engage in problem-solving (Kozbvelt & Nishioka, 2010). It has also been found that Gestalt processes of filling in the gaps of information and zooming-out to focus on both the implicit and explicit picture also underlies humor (Audissino, 2022). One important influencing aspect is of Theory of Mind, which refers to a person's ability to frame the mental and emotional states as well as intentions of others. Happe (1995; 1996) has found that Theory of Mind influences a person's ability to detect irony, sarcasm, and jokes alongside social communication and perception of verbal humor, thereby being strongly correlated with humor perception.

Neural basis of humor

It has been hypothesized that the right hemisphere and the frontal lobes play a significant role in humor. The tasks of non-verbal communication and comprehension of implicit content fall under the Right Hemisphere. It also is responsible for unifying data to understand it more globally, which is important to understand and integrate a joke (Frith, 1989; Happe, 1997; Jolliffe & Baron-Cohen, 2000). The ventromedial Pre-Frontal Cortex plays a significant role in this (Baron-Cohen et al., 1999), alongside the medial pre-frontal cortex (Gallagher et al., 2000) as the Pre-Frontal Cortex is responsible for higher-order cognition, social cognition, and affective regulation. The ventromedial Pre-Frontal Cortex is also linked to the amygdala and

limbic system, which is responsible for emotional-based learning (Rolls et al., 1990). Hearing a funny joke activates the autonomic nervous system, which shoots up the heart rate and skin conduction. This arousal is what creates the experience of a positive affective response, which is the 'humor response' (Goldstein et al., 1975; Katz, 1993; McGhee, 1983).

Linguistic component of humor

Humor, being a form of communication, naturally involves the use of language. Language plays a particularly significant role when humor involves wordplay through puns, wit, sarcasm, irony, hyperbole, etc. Linguistic ambiguity is a key component of incongruity resolution of humor (Suls, 1972). Often, humor is conveyed in a more implicit manner, particularly when it revolves around taboo topic (Allen, 1998).

Humor is limited by the "parameters of language" (Raskin & Attardo, 1994), and language is played with to create humor, such as in cases of puns or double entredes. Such jokes are known as 'phonological jokes' (Lew, 1996; 1997) wherein the play of language is what creates humor at a conceptual and semantic level. Because this incongruity relies on semantic knowledge, the humor may often get lost when translated (Adrjan & Muñoz-Basols, 2003).

A General Theory of Verbal Humor (Attardo & Raskin, 1991) was given to create a hierarchy of resources using which the resolution of incongruity takes place : (i) language, including it's phonetic, semantic, lexical, pragmatic, etc components; (ii) narrative strategy or the genre of the joke; (iii) target of the humor; (iv) situation referred to / embedded in, which often extends beyond just the target or object, logical mechanism through which incongruity resolution happens; (vi) and the incongruity. However, this theory is only applicable to verbal humor and cannot be applied to situations which rely on the non-verbal components.

Forms of Humor

Humor in our daily lives is more spontaneous, rather than deliberately planned in nature (Martin & Kuiper, 1999), and is typically associated with mirth. Because this humour creates a sense of enjoyment and merriment, we tend to develop a positive impression towards people who have a good sense of humor and make us laugh often (Martin, 2009). In his book, Martin (2007) categorises the humor in our day-to-day lives into jokes, spontaneous conversational humor, and accidental or unintentional humor.

Jokes compromise of a short story that creates a set-up which is then followed by a punchline (Martin, 2009). This punchline adds in a sudden element of incongruity, which creates the humorous component in the jokes. The entire joke is playful in nature, and is preceded by a situation on which the joke is based on the conversation begins with the intention of performing a joke; either way, these indicate to the audience than humor is to follow, that it must be taken in a playful and a non-serious manner, and that they are expected to laugh. Attardo and Pickering (2011) demonstrated that timing of the performance of a joke is also a vital contributor of the 'success' of a joke; however, it was found that timing of the delivery is nuanced in nature and depends on joke characteristics as well as situational. However, these "canned jokes" are part of only a small percentage of our daily interactions.

The second category of everyday humor is spontaneous conversational humor, and it comprises of a large proportion of our daily humor, and these include humorous responses to another's content. Long and Graesser (1988) compared jokes and wit, and remarked that jokes are relatively context-free as they create their own context with the punchline, and thus can be replicated with its humorous nature maintained in other contexts as well. Jokes are more structured and follow a baseline format. Wit, on the other hand, arises within a context, typically as a humorous remark to something that has already been stated or a behavior. In its replication outside its context, a witty remark may not be perceived as humorous; it rests on a "you had to be there" principle (Long & Graesser, 1988). Wit also considers broader social aspects, such as social dynamics, shared knowledge between speaker and the audience, etc.

The third category is of unintentional humor, wherein certain behaviors or verbal content produces laughter without the intention of it. This type of humor can be physical (such as from someone falling, bumping, tripping, etc) or verbal (mispronouncing a word, Freudian slips, spoonerisms, etc) (Nilson & Nilson, 2000). The humor in these situations is based on the element of surprise (Ibraheem & Abbas, 2016).

Dark Humor

Dark humor can be understood as a type of humor wherein at least one of the frames of the humorous content revolves around a typically taboo or morbid topic / a topic that is not usually considered humorous, such as of sadness, horror, grief, etc (Godioli, 2024). It also keeps us cognitively active by disrupting the typical cognitive processes and expectations by creating s shift in the expectation of the script. Dark humor can be best understood through the script opposition theory (Raskin, 1985) where the setup and the punchline are incongruous with each other, along with the incongruity that arose from the deviation of norms of humor (typically that taboo topics are not usually discussed) and creates a shift in how we would automatically frame a script. Thus, it creates a sort of defamiliarisation of the standards through sarcasm and irony (Tsur, 1989).

Godiolo (2024) gave three components of dark humor : (i) an element of the content is what is typically not typically associated with humor; (ii) the victim(s) of the event, and (iii) the associated perpetrators, bystanders, and the enablers of the morbid event. It has been found that dark humor is typically used to cope with events that have been traumatic for the person, and that humor allows a different approach to the event, thereby enhancing the coping (Meyer, 2015). It has also been found to not follow a mainstream approach, and question the customary standards and definitions of humor, growth, and resilience (Tzouvna, 2022) and openly discuss what is considered "unspeakable" (Kuipers, 2005).

Functions of Humor

The main theories of humor place it as a sub-component or type of communication, thereby explaining it from a social angle with relation to its impact on its audience. Meyer (2000) studied humor by categorising it as serving two functions : unification as well as division, both with two subcomponents each, thereby forming the four rhetorical functions. He first separates humor from the major theories, on the basis that each theory can explain a single event by its own principles. He theorised that humor serves four rhetoric purposes. The first purpose, identification, refers to using humor to build a social support, wherein humor is used as a tool to identify audience, deepen social relations and cohesion, and building upon overall credibility (Meyer, 2000). Here, the speaker may even employ self-deprecating humor (Chapel, 1978) as a form of communication to relieve the tension, even if it comes at the cost of being the butt of all jokes. The second purpose is clarification, wherein the speaker uses humor to subtly bring to the surface certain social norms without overtly correcting anyone involved. This form of humor seeks not to bring any violation of norm to the forefront, but re-iterate the norm in general and unifiers it audience while simultaneously creating a light and enjoyable situation (Meyer, 2000). The third purpose is of enforcement, wherein the focus is on the violation of norms. Humor is used to specifically bring to the forefront the violating party/parties while diffusing the tension. This allows for the speaker to create a fine balance between maintaining identification with the audience while also point out the incongruity (Graham et al., 1992)**.** Finally, the fourth, and the harshest purpose (Meyer, 2000) is of differentiation, wherein the function is of creating very clear divisions based on differences in opinions among people. Differentiation is not limited to just between two/more groups, but can take place within a group as well. Linking this theory with the three primary models, each of the three models correspond with their rhetorical functions : relief theory can be said to be serving the rhetorical function of identification, incongruity theory of clarification and differentiation, and superiority theory serves the functions of identification, enforcement, and differentiation.

Meyer (2000) also places humor as something that is "situationally dependent" and that perception of the meaning of humor as well as its social appropriateness and success/failure is not objective or ensued upon any theory, rather depends on the perception of its audience. Being part of social communication, the social message of the humor also comprises of social symbols, expectations, social scripts, and normative patterns of interactions. Humor also exists on a continuum of purpose as well wherein identification and clarification, the unifying types, are on one side, and the divisive types of enforcement and differentiation lie on the other. However, this division is also not as dichotomous as it seem and may often overlap with each other; for example, in certain situations, the divisive types can also act as a unifying agent for some groups. Despite their paradoxical functions, they are relatively clearer than the three main theories given over it. Thus, it can be said that humor has a dual and paradoxical function (Meyer, 2000). It is also vital that the audience chooses to appreciate the humorous content, rather than be vexed or irritated (Raskin, 1992). Similarly, Martineau (1972) gave a model that saw humor as capable of serving dual and contradictory purposes of being both a social "lubricant" as well as an "abrasive" as it is equally capable of uniting a group as it is of causing friction within. Thus, the speaker must practice discretion while using humour as it holds potential to backfire.

In her paper, Graham (1992) aimed towards understanding the various purposes of humor, which led to the development of an 11-item scale, Uses of Humor Index. From various researches, she drew up an extensive list of functions of humor, and across various forms of social settings (informal settings, political, organisational, etc), and discusses them in great detail. Humor has been found to be a means of communicating verbal aggression, even more often when it is used to reduce the tension of hostility (Zillman & Canton, 1976; Byrne, 1956). In a broader context, it has been found to be a means to reduce awkwardness and social distance by bridging the gap between strangers (Derks & Berkowitz, 1989; Mettee et al., 1971). Studies have also found humor to function as a coping mechanisms as well, thereby improving a person's adaptability to tense situations and managing overwhelming emotions (Smith et al., 1971 ; Obrdlik, 1942), thereby aiding in regulation of one's internal states. It also serves a regulatory function in social situations by reducing aggressive behaviours and reducing conflict (Whitacker, 1975) in group settings, and increase group solidarity (Kaplan & Boyd, 1965). Pogrebin and Poole (1988) further showed that this takes place by three functions humor serves : it allows people to share common experiences and gain an understanding of each other's attitudes and opinions, it encourages humor within the group that is based on friendly teasing of each other, and it helps cope with adversity and events that are beyond one's control.

Within an organisation, humor serves four primary functions (Linstead, 1985) : it allows exploring and gaining an understanding of each other's opinions and attitudes which acts as a medium to form interpersonal relations and friendships, it helps form in-group v/s out-group boundaries based on humor directed towards people who are outside the group, it helps manage the distress that comes with stress and frustration at workplace, and it acts as a symbolic activity which further reinforces the structure and culture of a group. It also helps in reducing the anxiety that employees may experience related to workplace aspects, especially with the tension that may arise from the presence of new information (such as a new task, changes in management systems, etc). It also allows employees to interact with each other, form relations among themselves, and establishing social norms and status relationships among themselves (Graham, 1992).

Grief and bereavement

Derived from the Latin word '*rumpere*,' which means to break, thus bereavement refers to a state of being that results from loss. This loss is not limited to loss just from death, but from multiple sources, such as loss of a relationship, a job, etc. Bereavement is a more objective situation referring to loss over death, grief on the other hand refers to the subjective emotional experience over that loss, and involves the complex physiological and psychological responses that are particularly influenced by the nature of attachment to the deceased.

Grief, a term commonly used in conjunction with bereavement, is an inevitable and a universal experience that results from a constellation of emotions, thoughts, behaviors and sensations experienced by a person (Abi-Hashem, 1999). It originates from the Latin word '*gravare*,' which translates into 'to burden,' and is understood as a phenomenological experience.

In a similar vein is the term 'mourning,' derived from the Latin word '*memor*,' which refers to being mindful, and is the social expression of grief (Parkes, 1985), Mourning refers to an overt and public expression of a person's internal experiences, and is the public sharing of the experience of bereavement. It involves social and cultural 'rites of passages' and rituals grief, such as wearing only whites or blacks, bringing about changes in one's lifestyle, etc (Stroebe et al., 2015).

The phenomenology of grief

Grief is a typical response associated with loss, and is multi-dimensional in nature. It comprises of several components that have been categorised into five groups based on various longitudinal studies , and together they for the phenomenology of grief (Osterweis et al., 1984). These include : affective, cognitive, behavioral, physiological-somatic, immunological and endocrine changes (Stroebe et al., 2007). Affective responses include significantly drops in mood, dread, and increased fear and anxiousness. Along with this, the person may experience guilt or self-blame, as well as anger and hostility resulting from loss and the shattering of assumptions. It is also common for the bereaved to experience shock and numbness, and a sense of profound yearning. Cognitive responses to the loss are characterised by a pre-occupation with the deceased wherein the bereaved thinks about them, imagines them, and ruminates around them. They may sometimes even sense their presence. They are likely to engage in defences so as to cope with the helplessness and hopelessness. An

impairment in cognitive functioning may take place, leading to difficulty in memory and concentration, with an overall decline. Behavioral responses are often multifaceted: there may be episodes of agitation and restless, and periods of fatigue and inertia. Searching behaviors around the deceased, which include dreaming of them, "seeing" them around, illusions of them, even hallucination, may be present. The bereaved may tend to withdraw socially, and exhibit overt displays of emotion in the form of crying, outbursts, shouting, etc. The bereaved may experience a marked reduction in appetite and resultant fluctuations in weight, as well as sleep disturbances as part of physiological changes. Similarly, there are somatic complaints of muscle tension and rigidity, headaches, body aches, etc. Related to this, immunological and endocrinological changes also take place, making the bereaved more susceptible to illnesses and diseases, and in some cases, even mortality.

Apart from the direct responses to bereavement, there are associated disruptions that often take place (Stroebe et al., 2015), which include a changed social landscape, living arrangements and lifestyle, changes in financials and economic support, etc. A sense of loss develops from an absence of an object of attachment (which does not necessarily have to be a person, nor does loss restrict itself to just death). Loss can be of a person, a material, or even something intangible. It can be sudden or gradual, unexpected or anticipated, real or imagined. The severity of grief experience is determined by the following factors : nature of loss, pre-existing factors, the timing and the magnitude of loss, the nature of the relationship with the deceased, perceived social support, SES, conditions after the loss, and the cultural and religious norms, beliefs, and factors (Abi-Hashem, 1999). Grief accompanies this loss, and the person is required to engage in the circular process re-negotiating, re-organising and re-adapting their worldview to accommodate the experience of loss. Hence, the period of grief can be said to be associated with a lot of pain and duress experience by a person.

Forms of Bereavement

Grief was systematically studied first by Lindemann (1944), who studied its associations with guilt, hostility, a preoccupation with the deceased, and loss of functioning (based on his research on people with traumatic losses). Since then, Parkes (1985), based on the temporal nature of grief, categorised it into acute and chronic.

Acute grief is characterised by denial of loss, spells of intense crying, numbness, dissociation, and somatic symptoms (Casarett et al., 2001), and is often takes place as the initial response to loss. There is profound emotional pain that is experienced during this stage as the individual struggles to face the sudden and drastic shift in their lives that takes place.Worden (1982) gave two typical responses to grief : 'pangs of grief' that are acute and episodic in nature, and chronic background disturbance. The pangs of grief are associated with episodes where the person experiences anger, crying spells, and autonomic occurrences of anxiety, usually as a response to reminders that the loss has occurs. During this period, the bereaved engages in 'searching' behaviors for the bereaved and oscillate it with avoidance and suppression and other defences. Grief presents itself as a 'chronic background disturbance' as well wherein it is more lasting in its sense of dejection and decrease in functioning. There is a sense of meaninglessness, difficulty in concentrating, changes in sleep, appetite and weight, memory disturbances, social withdrawal, and numbness.

Complicated Grief (CG) is a form of persistent and intense form of grief that is characterised by profound yearning for the deceased. The term 'complicated' grief was introduced by Rando (1992) as preferred over other prevailing terms associated with complex grief such as 'neurotic' or 'dysfunctional' so as to de-pathologised grief and do away with the assumption that there is something deficit within the mourner. It also counteracts the lack of objective criteria of which grief is "normal" and what makes it "pathological." In Complicated Grief, the mourner experiences emotional numbness, guilt, anger, a sense of emptiness, reduced reactivity, and intrusive thoughts and images (Stroebe et al., 2015). There is a profound loss, and the bereaved undergoes difficulty in re-joining the social scenario and forming fulfilling relationships, and finding joy in other activities. The person struggles with returning to pre-loss level of functioning, and there is a significant drop in well-being that persists beyond what is considered part of the typical period of grief. CG can be difficult to identify and work through, especially if its associated with a violent and emotional taxing nature of death. Even after a significant time has elapsed, the bereaved finds themselves preoccupied with the loss, and is unable to fully experience joy in daily activities (Casarett et al., 2001). For Rando (1992), there are 6 hypothetical 'R' processes of mourning : recognition that the loss has taken place, reacting to it, recollection and re-exoerience of the deceased as well as the relationship with them, relinquishing the old attachments with the deceased and with the world, re-adjusting to the new lifestyle to be more adaptive all while maintaining

inner and enduring ties to the deceased, and reinvesting. Disruption in any of these six can lead to any of the seven complicated mourning syndromes - absent, delayed, inhibited, distorted, chronic, inflicted, and unanticipated (Rando, 1992). As per the established timeline of normal bereavement, recovery from the loss begins to take place gradually. This does not mean that the bereaved no longer misses the deceased; it simply means that the grief goes down in its intensity and frequency, the searching behaviors gradually diminish, and new assumptions about the world are then formed (Parkes, 1985).

Ambivalent grief (Parkes, 1985) takes place as a result of an ambivalent relationship with the deceased i.e. the relationship was the deceased was characterised by conflicted emotion Initially, the bereaved may claim to be experiencing minimal grief. However, the sense of loss spikes after a while has passed. At a deeper level, this grief revolves more around the ambivalent nature of the relationship than with the loss. Thee is a sense of resentment, unfinished business, and resentment towards the deceased (Parkes, 1985). Such grief is more prolonger and self-punitive, and may struggle with completing grief

Absent or inhibited grief (Osterweis et al., 1984) takes place when a person puts on a mask of 'doing just fine' and shows no visible signs of impaired functioning, and may even seem ti be coping efficiently. However, there are subtle cues indicating the presence of a grief that they themselves may be in denial of. For example, there is a strong avoidance of any conversation centring death, may exhibit short temper or restlessness, may insist on keeping busy, avoiding any reminder or mention of the deceased. Because of the intensity of the grief, psychological defences come into play so as to protect the person from experiences a sudden blow of intense pain. Grief, in this case, tends to manifest in physical/somatic symptoms such as headaches, anxiety, etc.

Traumatic grief occurs when the loss results from a traumatic event, such as murder, suicide, witnessing a sudden and violent death, etc. (Abi-Hashem, 1999). The violent nature of the death makes the grief even more devastating and emotionally impactful. The person not only has to cope with the loss, but also work through the emotional upheaval and shock associated with the cause of loss. The grief here will have some elements of psychopathological conditions and become more vulnerable to developing full-blown pathology because of nature of events surrounding the loss. In such cases, working through grief becomes more complicated and puts the bereaved at a higher risk of difficulties. There will also be separation anxiety resulting from the episodic pangs of grief coupled with the searching behaviors (Jacobs, 1999).

Theories of Grief Resolution and Mourning

Griefwork

In his essay 'Mourning and Melancholia' (1917). Freud differentiates between melancholy and grief. Both entail the following : a dejection that is profound and painful, a loss of interest in the external world, a reduction in the capacity to love, and a pause on all activity. However, these may emerge as reactions to any form of loss of a loved object and is not limited to loss through death only,

Aligned with Freud's other works, he explained the concept of griefwork through various needs and defences. According to him, individuals 'cathect' libido onto an object; death leads to loss of that object, and now that energy must be 'decathected' and channelised onto another object (Shapiro, 1996). However, after the loss, the bereaved would goes into denial of the loss, thus making the process of decathecting require 'work.' The ego therefore must sever the ties with the lost object so as to cope with the reality. His rationale was that maintaining an attachment with the deceased fulfils none of our needs, thus there is no reason why we would want to continue it. Every memory with the lost object must be retrieved to the conscious and then deliberately be first hypercathected (libido is channelise to another object) and then decathected (completely severed) (Clewell, 2004). This leads to a "spontaneous end" (Freud, 1917) of the attachment. This is the trajectory of normal grief; in pathological grief, the person holds onto the loved object even when they cannot fulfil the bereaved's needs. The ego finds it difficult to decathect, and ends up identifying with the object which endures the attachment.

However, "Freud's economy" (Clewell, 2004) has been criticised for its individualistic approach. One can understand that Freud's theory is not focused on working through the loss per se, but on the loss of an object that fulfils the bereaved's needs, and it aims towards finding an alternative to the deceased. It has also ben criticised for taking a solely cognitive approach towards grief, thereby ignoring all other aspects of it (Stroebe

et al., 2015). It underestimates the social nature of human relationships and the complexity of social interactions. Hence, there has been a growing disenchantment with this work, although it has, as Freud's other contributions, set the base for other theories to develop. Freud's theory of identification is often used to resolve and work through the ambivalent attachment (Shapiro, 1996).

Bowlby's Phases of Mourning

Bowlby (1980), in is book *Loss: Sadness and Depression*, gave four phases of grief. These include numbness and shock, yearning and searching, disorganisation and despair, and finally reorganisation and recovery. The first stage is the immediate response, and is characterised by disbelief and emotional numbness around the event actually happening. Here, the bereaved tends to experience dissociation and functions on 'autopilot,' Although they may not overtly express their emotions, these suppressed emotions tend to manifest as physical/somatic symptoms such as nausea, dizziness, headaches, fainting, etc. The bereaved may even go on as though the deceased is still there, and continue engaging in behaviors of laying out clothes for them, setting their plate on the dinner table, etc. The second phase is characterised by searching behaviors. The bereaved yearns for the deceased, and experiences pangs of intense emotional pain. There is a preoccupation with the deceased, and it manifests as longing for them, seeking items that serve as reminders, even experiencing altered perceptions surrounding the deceased such as illusions or hallucinations of them. This phase tends to be the most emotionally intense and distressing for the bereaved. It is during the third phase that the deceased begins to realise that the deceased is actually no more and will not be returning. This is accompanied by a sense of helplessness, loss of meaning and motivation, and a deep sense of loneliness. They tend to experience fears around adjusting to a life without them, a sense of loss of self, and loss of interest in activities and social interactions. In the fourth phase, the bereaved begins to adapt to the new life. They begin o accept the reality that the deceased is actually gone, and begin to return to their pre-loss level of functioning. They return to the social spheres, pick up deserted activities, and go back to their life. Here, they re-define their sense of self all while finding ways to maintain a sense of connection with the deceased.

Bowlby's model is typically based on his work on attachment styles, however he has received criticisms for his over-emphasis on attachment (Klass, 1988) and that it ignores other contributing factors such as individual differences and life experiences. Linked to this, Klass (1988) also criticised Bowbly for his theory that the bereaved "lets go" of the individual, and ignores various mechanisms through which they try to continue the bonds with the deceased.

Stages of Grief / Grief Cycle by Kubler-Ross

. Kubler-Ross (1969) first introduced the concept of conceptualising grief into discrete stages, and this categorisation was further expanded by Bowlby and Parkes **(XXX).** As per these theories, grief moves forward categorically through stages that are linear, mutually exclusive, and follow a sequential order. In her book "On Death and Mourning" (1969), she gave a model of five stages of grief a person goes through during the journey of a terminal illness, the model has been applied to various other areas, even outside of grief. The stages are : denial, anger, bargaining, depression, and acceptance. These are further elaborated.

Denial. The first stage of grief begins with denial of the reality, wherein the person is in a state of shock and finds it difficult to believe the reality, typically holding the thought that 'this couldn't be happening to me.' They may seek re-examinations or second opinions, state that the results are faulty, that the doctor has made an error, or simply refuse treatment stating 'there is nothing to treat.' (Tyrrell et al., 2023). In cases of bereavement, the bereaved continues as though the deceased is still there. Denial is considered as a temporary defence (Ross, 1969) to numb the emotions so as to make them more manageable, and is later replaced by anger as it is not used extensively often, but only to cope with the initial shock.

Anger. Once the person begins to reduce their defence, anger sets in, and it is often characterised by the statement 'why me?' The person at this stage may seem irritable and short-tempered, ask for attention, make demands, and complain (Ross, 1969). They may blame healthcare or doctors for not treating them properly or accuse loved ones; there may also be anger directed towards any faith held. The bereaved may experience guilt or regret, and may attribute the loss to themselves (Wang & Wang, 2021), or be angry at the loved one for 'leaving' them. This anger is not actually directed at the people around but towards the fact that loss is about to occur (or has occurred).

Bargaining. After anger comes the stage of bargaining, where the person tries to negotiate with their fate to reach an agreement that can postpone the event from happening. A common underlying belief is that good behavior will be rewarded; if they engage in 'good' behaviors, the inevitable event might just not happen. Here, negotiations may be made with God or with one's fate, depending on one's faith, also indicating a form of magical thinking (Tyrrell et al., 2024). These bargains are seldom disclosed to others (Ross, 1969), and are between one's faith and oneself. Mourners may use scenarios of "if only" or "what if" where the loved one was still present, so as to experience some relief from the grief, even if its temporary (Wang & Wang, 2021). Gradually, the person realises that bargaining will not change the event, and depression kicks in.

Depression. This is the fourth stage in the cycle, and results one realising that bargaining over their fate is futile. Herein, the person experiences a sense of loss : loss of the functions of their body, loss of a life they wanted, a loss of freedom, etc (Ross, 1969). There are symptoms of fatigue and loss of interest. There is also a loss that arises from impending losses, such as the sadness of the people around us over the anticipated death or increased financial strain. This depression acts as a 'tool' that helps prepare for the final loss (Ross, 1969).

Acceptance. In this final stage, the person (and the people around) accept the inevitability of the loss. Here, the person is able to express the entire range of their emotions felt presently and during the previous stages, and have mourned the impending losses. The person would also prefer to be left alone or to sit in silence. The bereaved may soon accept that the death has occurred, or may make peace with the limited time of humans on Earth and the inevitability of death

This framework set stone for understanding grief by creating a framework that identifies a progression of emotions Yet, as ground-breaking in its approach, it has been criticised for lack of significant empirical basis, and for the use of rigid stages (Tyrrell et al., 2023). This model initially gained popularity due to their simplicity, predictability, and that acceptance and resolution of grief is promised (Hall, 2014). However the stages, being mutually exclusive, linear, and rigid, do not leave room to capture the wide and complex range a person may experience, particularly in the case of such sensitive events.. Kubler-Ross's model has ben criticised for the sample comprising only of people with terminal illness, and no sample of bereaved individuals, thus reducing empirical backing for applying this theory in cases of bereavement (Avis et al., 2021). Kubler-Ross herself later criticised the linear and compartmentalised approach of grief (Kubler-Ross & Kessler, 2005). It also expects that every individual copes with grief in the same manner, thereby ignoring the role of individual differences (Wortman & Silver, 1989).

Sander's universal phases of grief

Sander's (1985) has done extensive work to base her inventory, The Grief Experience Inventory, which is extensive in its situations of loss and related grief covered. She also gave the Integrative Theory of Grief (Sanders, 1989). This model characterises five sequential stages of grieving post a loss: shock, awareness of loss, conservation-withdrawal, healing-the turning point, and renewal. In the first stage of shock, the loss begins to sink-in for the person, and they exhibit responses at various levels : physiological (trembling, crying, reduced appetite, difficulty sleeping, etc), psychological (preoccupation with thoughts around the deceased, numbness, etc), cognitive (disbelief, sense of reality and helplessness). In the second phase, the person experiences the loss in an extreme phase. This typically occurs once all rituals are conducted, and gradually people reduce active support in grieving; the person thus no longer has buffers and distractions. This period is characterised by intense emotional arousal, experiences of a myriad of emotions of guilt, frustration, and shame, and may even dream of the deceased. They may still be in denial and disbelief. In this case, there is a heightened sensitivity to any comment from others, and the bereaved may soon withdraw as a result, thereby leading to the third phase of conservation-withdrawal. In this phase, the person withdraws from the social world, as a result of worn-out resources from balancing both grieving and functioning. This stage is typically perceived as more chronic and never-ending, with reduced overall functioning. The person may report feeling physically weak from trying to adapt to the loss. It is in the fourth stage, healing, that the person begins to gradually adapt their lives to the loss. The shift from the third phase to the fourth can sometimes even be pin-pointed. The bereaved reports increased energy and motivation, and soon makes their way into the fifth phase of renewal. In this stage, the person begins to increase functioning, integrates themselves back into society, and is personally revitalised. This is not to say that there are no grief-heavy days, rather the person learn to adapt their lives around the loss. They begin to remember the deceased fondly, and without overwhelming

emotions, and find a way to develop an internal presence of the deceased. However, like Kubler-Ross' model, Sander's model has also been criticised for its rigid conceptualisation of   bereavement. Grief hardly ever follows a linear path, and rigid boxes overlook the role played by unique experiences, personality, as well as cultural influences and patterns.

Worden's task phases of mourning

Worden (1991) gave four tasks of mourning that allows the bereaved to adapt to the loss. He was dissatisfied with the previous theories of phases (Sanders, 1989; 1999), Freud's work, Parkes et al. (1985). He found viewing grief in 'phases' as too be passive; he agreed with Freud's theory on tasks but found the framework as based only on Freud's theory. Thus, he gave his own model of four tasks of mourning. These tasks give a sense of agency and active participation of the bereaved, rather than viewing them as passive in their own life processes, and are relatively more flexible in their ordering. These are further elaborated.

The first task is of accepting the reality that the loss has occurred. Here, the bereaved must accept that the loss has taken place, it is irreversible, and that they have to move forward without the deceased. If a person struggles to accept this loss and is in denial of it, then they may find themselves stuck in this phase, unable to move forward. This denial also exists on a continuum ranging from mild avoidance of reality, to "selective focusing," to the extent of 'mummifying' the corpse and refusing to move forward. The person must overcome this denial and accept, both cognitively and emotionally, that the loss has occurred. The second task is of processing the pain that comes with grief as it sets the base for working on the resolution of grief and restoration of the person. Herein, the bereaved must experience that full range of emotions that follow the loss, such as abandonment, pain, guilt, anger, etc. This task is often impended by social constraints that may prescribe "ideal" ways of coping with loss; any deviation from it may be accompanied by stigma which further complicates this tasks (Gorer, 1965). The bereaved must allow themselves to fully experience the emotions and not circumvent around them to move to the third phase. The third task is of adjusting to the world where the deceased is not there. This task has two sub-components : making external adjustments and making internal adjustments. In the area of external adjustments, the person has to adjust to the external environment, such as managing the chores and tasks that were previously undertaken by the deceased. The bereaved now has to develop the skills required to complete those tasks, and begin to additionally manage them as well. Internally, there may be changes in identity, self-efficacy, and self-esteem. They may feel inadequate or helpless without them, and will also have to fill in the psychological gaps of the deceased. There may also be spiritual adjustments to be made; loss can shake a person's worldview and they may find themselves losing faith in the world or seeing it as unpredictable. Not being able to make these adjustments may render a person as feeling even more helpless and withdrawn. Finally, the fourth task is to continue with a new life while maintaining an enduring connection with the deceased. Herein, the task is to pull back from the emotional energy that had been dedicated to the loss, re-direct it, all while developing continued bonds with the deceased in a manner that allows the bereaved to feel connected to them but is not leading to any significant disruption in their life. Thus, the relationship with the deceased is re-organised in a more adaptive and functional manner.

The model has been criticised for holding an inflexible view on the tasks that must be completed. Yousuf-Abramson (2020) critiqued the article for its restricted application. A social lens on grief and mourning sees it as a lifelong process, and that the prescriptive nature of assigning tasks undermines the unique nature of bereavement. It also doesn't take into account the cultural influences and practices that form bereavement experiences (Groot-Alberts, 2012), thereby over-generalising bereavement

Dual Process Model of Coping with Bereavement

The Dual Process Model, given by is a model tat describes the process of coping and coming to terms with the loss. Coping has been defined as various processes, strategies, or styles employed by the bereaved so as to manage the bereavement (Stroebe & Schut, 2010). Rather than seeing coping as an outcome, it sees it as a process, one that is not static and linear, but dynamic and circular/cyclical. It sees coping not as a separate activity, but as embedded in one's daily life and day-to-day tasks, and also emphasises on psychosocial adjustment, rather than being individual-centred.

It identifies two different but inter-related categories of stressors that come with loss. The first category of loss-orientation revolves around the emotions related directly to the deceased, such as all the circumstances and events related to it, yearning for them, imagining them in situations (such as what the deceased would

have done or said). Here, the bereaved directly confronts the emotional loss and pain, and engaged in reminiscing, crying, socially withdrawing, and longing for them. The second category is of restoration-orientation. This category is more process-oriented than outcome, and considers the secondary aspects of grief wherein one has to adapt their life to the absence of the loss. This included managing household tasks, coping with social loneliness, reintegrating and rebuilding social relationships, and engaging in other activities and hobbies. When the bereaved is gradually restoring, thee is also a sense of achievement and pride around being able to do so. The bereaved typically oscillates (Strobe & Schut, 1999) between the two, wherein at one point they may be actively coping and confronting the loss, and at another may choose to disengage and distance.

This category can also be understood with the 'task model,' as given by Worden (1991). Rather than understanding it in terms of phases, this process is more flexible and dynamic, with negative and positive affects in different capacities. It also conceptualises bereavement not in discrete actions as an ongoing process, and holistically considering both emotional aspect as well as behavioral and social adjustment, and how bereavement does not take place in discrete boundaries but oscillates and merges these domains.

Perspectives to Bereavement

Bonanno and Kaltman (1999) have proposed four perspectives of psychology to understand bereavement : cognitive stress perspective, attachment, social-functioning, and trauma perspective. Each of these frameworks propose a distinct outlook on how we experience and cope with loss. These are explored in detail below.

Cognitive-stress perspective

This perspective is a systematic approach towards stressful life events, and is contradictory with Freud's griefwork, wherein the conceptualisation of death was uniform; cognitive stress perspective considers the individual's subjective evaluations or 'cognitive appraisals' of the loss and the factors surrounding it, instead of taking a one-dimensional approach (Bonanno & Kaltman, 1999). Whether the event is 'appraised' as 'stressful' or not also depends on whether the individual perceives it as exceeding their resources for coping (Lazarus & Folkman, 1984). This appraisal takes place at two levels : primary, wherein you estimate the degree of harm that could be sustained from the event, and secondary, where you assess the available coping resources to mitigate that harm. Coping refers to strategies employed to manage a situation where a stress sis experienced. Coping is of various forms : moving away or distancing from the source, changing the meaning of the situation (such as self-blaming, positively re-appraising, etc), engaging in behaviors that alter the situation. Coping can also be categorised as emotion-focused or problem-focused (Lazarus & Folkman, 1984). In emotion-focused coping, efforts centre around directly targeting and managing the emotional impact through seeking social support, engaging in regulating activities, re-appraising the stressor, etc. In problem-focused coping, the individual directly confronts the stressor and tries to solve, change, or modify it.

Appraisals at both these levels determines whether the situation will be perceived as stressful or not. Thus, it is also likely that the situation may be determined as stressful at the first level but not at the second, and vice-versa. It is based on these appraisals that the individual adopts coping strategies. Positive appraisals of the loss was demonstrated to be linked with higher morale and reduced depression (Stein et al., 1997). During the course of bereavement, the individual frequently assesses whether, and how, the loss threatens their well-being, and whether they possess the resources to cope with it. This appraisal plays a significant role in one's adjustment after the loss.

Attachment perspective

As per this theory, grief is a natural response to losing a loved one, and is a result of behavioral responses that result from evolution foster proximity and deep relations with a loved one, and this grief is a result of disruption in this evolutionary need and behavior (Bonnano, 1999). Bowlby (1969, 1980), the pioneer of attachment theory, emphasised on continuing the bond with the deceased, and that grief requires us to modify the internal representation of them so as to allow the continued presence. This reorganised continued bond thus serves an adaptive value that provides comfortable solace, and allows one to 'feel the presence of the deceased' while moving forward with their life (Klas et al., 1996). Ambivalent attachment, wherein the relationship with the deceased was not clear-cut, often interferes in the grief resolution, which leads to the

bereaved oscillating between extreme desire for and extreme rejection of the bereaved. This prolongs the process of resolving separation, thereby resulting in complicated grief (Bowlby, 1980).

Social-functional approach to emotions

The social-functional perspective of emotions places grief and the associated emotions in a social context. First, it distinguishes grief from emotions: grief is more long-term, multi-dimension, and emerges in a more slow-paced manner as a response to a specific event, whereas emotions are more prompt, and emerge as a response to situational occurrences (Bonanno & Kaltman, 1999). Emotions also influence intra-personal and inter-personal functioning, such as influencing our autonomic nervous system to activate our flight/fright/freeze responses, to communicate ourselves to others, form and maintain social relationships, etc.

Typically, anger and sadness are associated with bereavement. Though emotions are functional in nature, when they are present for a prolonged period of time, they do more damage than good. This goes hand-in-hand with theories stating that verbal expressions of grief aids in its resolution as it allows emotional catharsis that clears up the mind to engage in other tasks (Shuchter & Zisook, 1993; Stroebe & Stroebe, 1987). For instance, expressing anger as part of the grieving process facilitates working through, however repeatedly engaging in its expression can lead to social withdrawal or strain relationships, leading to a (perception of) diminished social support. Furthermore, due to the shame attached to these emotions, we are often reluctant to acknowledge them, and end up disguising them. Consequently, they manifest as irritation, somatic complaints, frustration, etc. (Kubler-Ross, 1969).

Positive emotions also serve an adaptive role, beyond just indicating denial or avoidance. Lazarus et al. (1980) demonstrated that positive emotions allow temporary relief from stress, and serve as *breathers*. They act as *sustainers* to allow us to continue our coping efforts, and replenish our resources by acting as *restorers*. They help continue our social relations, thus allowing better adjustment.

Trauma perspective

The trauma approach considers the factors around the loss, and takes on the perspective that these factors influence the nature of grief, consequently influencing the journey of resolution. For example, in cases of traumatic losses, such as in murder, grief will be more complicated and can result in pathology as well (Nakajima, 2012; Kersting et al., 2007). It also takes into account the subjective meaning that one attaches to the loss. Thus, verbal expression may even be attempts to try to find meaning or an explanation for the loss (Lehman et al., 1987). This verbal expression also promotes cognitive restructuring. Lepore et al. (1996) found that the extent to which a person talks about death is inversely proportional to the perceived social constraints against its disclosure, and that the less a person talks about the loss, the more likely it is that they have intrusive thoughts surround the loss.

The trauma perspective also takes into account the importance of meaning-making as part of one's journey through bereavement. Loss shatters one's core assumptions about themselves and the world (Calhoun, 2016; Janoff-Bulman, 1992). Bonanno and Kaltman (1999) identify that the bereaved must make sense of why the loss occurred and how it fits into the broader context. Engaging in meaning-making after the loss has been found to be associated with reduced distress over the loss (Davis et al., 1998). Verbal disclosure also serves the purpose of re-structuring one's beliefs not just about the loss itself but also in how it impacted one's life, and regulating one's emotions around it better.

Integrative Perspective of Bereavement

In their paper, Bonanno and Kaltman (1999) gave the Integrative Perspective of Bereavement, wherein they identified four factors of that influence the process of grieving, namely : (i) the context in which the loss has occurred, (ii) the continuum of the subjective meanings that are associated with the loss, (iii) how the representation of the lost relationship changes for the bereave, and finally, (iv) the role of coping and emotional-regulation processes. All these factors interact and integrate to influence the trajectory of grieving;

The component of 'Context of the Loss' considers contextual factors of both the bereaved and the deceased. While each component has counter-studies claiming otherwise as well, the model lists the following: violent deaths, reproductive value of the deceased (whether the deceased was capable of having children, typically

referring to people falling between the range of 15-25 years), age of the deceased (i.e. was the deceased in middle adulthood or in the later stages o f life), whether the loss was sudden or premeditated, gender (widows are more likely to experience stress in financial areas whereas widowers are more likely to experience strain in household chores), perceived social support and the bereaved's appraisal of how supportive their environment is, and culture.

Second is the component of 'Continuum of Subjective Meanings.' This component is based on the Cognitive Stress Perspective and cognitive appraisals (Lazarus & Folkman, 1984), stating that how people appraise the situations and what meanings they make of it influences their course of bereaving. This meanies are placed on a continuum of categories, ranging from daily activities to more profound existential concerns. Because appraisal-making and meaning-making are subjective, this component lies on a person's personality and individual differences, and on the situations the person is in during the course. It also sees these processes are more cyclical, ongoing and fluid rather than static, linear and structured, as opposed to the processes given by various theories of grieving/mourning (Worden, 1991; Sanders, 1989; Kubler-Ross, 1989; Bowlby, 1980). However, Bonnano (1997) found that retrospective appraisals, such as *"I am stronger now because of the loss," or "Compared to others, I have not had it so bad"* of the loss allows for better adapting, than meaning-making of the loss. Here, the person appraises the situation from a distance, rather than in temporal proximity, thereby taking the lens of 'looking back.' These cognitive appraisals contribute to one's adjustment and recovery.

The third component is of 'Changing Representations of the Lost Relationship,' and is linked to the concept of griefwork that was given by Freud (1917) and in attachment theories (Bowlby, 1980). Freud proposed that the person must cut-off all attachment to the deceased, however this was countered by attachment theory that propagated for re-definement and reorganisation of the relationship with the deceased. This gradual process makes grief more manageable, thereby allowing. However, it was found that this approach is only suitable where the initial responses to grief are manageable and within a tolerable range; in cases of severe grief, sudden severance of all ties must be done (Bonanno et al., 1998).

The final component is of 'Coping and Emotion Regulation,' with a particular emphasis on verbal disclosure, wherein the person talks about their grief, as opposed to Freud's (1917) griefwork where he emphasised on an abrupt severing of ties with the deceased. Verbal disclosure allows the bereaved to engage in retrospective reappraisal and regulate their emotions around the loss. However, the person's comfort with verbal disclosure also depends on the perceived social support or social constraints: Fang (2018) demonstrated that members of Eastern cultures are more likely to reject the social support offered to them, and prefer to cope with the loss in their private space. Linked to the cognitive appraisal of the loss are the emotions produced (Folkman & Lazarus, 1988), i.e. how a person appraises their loss influences the emotional experience. This further influences the coping strategies chosen for regulating the emotions. Based on the strategy chosen, the person-environment dynamics change, which creates a continuous cycle of appraisal, emotions, and strategies chosen. However, emotions manifest in various channels: expressive, experiential, and physiological). These are not consistent and status in nature, but dynamic in its combinations and manifestation. Nevertheless, they play a crucial role in coping with grief.

All of these components together take into account various elements that influence the nature of loss and bereavement. This model also highlights that bereavement is a unique journey for each individual that results from a complex and dynamic interaction of all these factors. This sets base for a more holistic approach towards navigating through grief.

Post-Traumatic Growth (PTG) and Grief

Post-Traumatic Growth (PTG) refers to a process that is part of positive psychology which refers to the growth of an individual after an event that is stressful or traumatic (Blackie et al., 2016). It is the counter-part of Post Traumatic Stress Disorder, a psychiatric condition characterised by hypervigilance, increased arousal, and unwanted and intrusive flashbacks of a traumatic experience. Traumatic experiences create a situation wherein individuals can grow from as they reinforce social cohesion, boost spirituality, and create opportunities for meaning-making (Hurst & Kannangara, 2022). Although understood to be similar, PTG must not be used inter-changeably with resilience: resilience assesses the ability of a person to bounce back from the traumatic event to the previous baseline functioning whereas PTG assesses growth from the traumatic event.

Five components of life have been identified where PTG reflects (Tedeschi & Calhoun ,1996; Calhoun et al., 2016) : self-perception, changed interpersonal relationships, new possibilities, appreciation of life, and in existential elements. The first component reflects "emotional growth" that a pe rson experiences wherein they begin to feel more efficacy and self-reliance in coping with life challenges, and feel more competent in their abilities. The second component reflects a transformation in interpersonal relationships. Herein, the person experiences an increased closeness and connectedness with other people, especially with those who have had similar experiences (Calhoun et al., 2016). The third component is of finding new possibilities of life, such as taking up more responsibilities after the loss of a person, particularly if the loss is of one's spouse. There is also a change in one's philosophy of life wherein there is a greater appreciation for life : the person puts in effort to live more vividly and be present in the moment, moving out of routine to be more active and deliberate in one's life. Finally, one experiences existential renewal as well, which is a result of existential questioning. The person is more likely to participate socially more and have an increased intimacy with others. This domain may be supplemented by religion/spirituality as well (Rogers et al., 2008), and allow the bereaved to experience a spiritual connection with the deceased.

We hold certain assumptions about the world around us; loss can typically shatter or deeply impact these assumptions, often leading to a loss of sense of control over (Calhoun, 2016). These assumptions allow us to form a framework of guiding principles that also create predictability and meaning of the world around us, and their shattering plays a significant role in the distress experienced after loss. However, it is from these forms of loss that the bereaved engage in re-working their cognitions, leading to maximum post-traumatic growth (Calhoun, 2016), and this rumination is also a form of coping. Thus, loss poses us towards re-evaluating our own belief systems, and this can further push us towards growth from the loss.

Rationale

Humor is a psychological as well as a social phenomena, and has been the subject of scientific inquiry for centuries, with several theories providing their perspectives on its use, nature,   and social perceptions. In contemporary society, we observe a rise in the use of humor, particularly escalating due to the internet and social media (Attardo, 2023). Researches identified that humor plays a key influence on improved coping outcomes (MMcGraw & Williams, 2014; Martin et al., 2009).

Martin et al. (2003) identified four humor styles, namely : affiliative, self-enhancing, aggressive, and self-defeating. These have been further hypothesized to be classified as adaptive or maladaptive based on their impact on psychological well-being (Dozois et al., 2009). Humor has been found to be effective in coping with stress (e.g.: Bizi et al., 1988), and with other stress-related variables, such as physical well-being (Fry, 1962), internal locus of control (Lefcourt et al., 1974), positive cognitive appraisals of challenges (Kuiper et al., 1993), increased self-esteem and a stable sense of self (Kuiper & Martin, 1993), and dispositional optimism (Korotkov & Hannah, 1994).

Similarly, bereavement is a universal human experience (Abi-Hashem, 1999), and every person typically encounters it at least once, if not several times, in their lifetime. Bereavement is an immensely distressing experience that emotionally overwhelms a person, disrupts daily functioning and social relations, and potentially shatters one's fundamental worldview.

Both humor, along with its variations in its combinations of presentations, and bereavement as distinctive variables are subject to significant individual differences (Galloway, 2010; Mancini & BOnanno, 2011). However, despite extensive researches on the variables individually, the relationship between humor styles and bereavement remains unexplored. There is a significant research gap that regarding how humour styles may impact the process of grieving.

Thus, the present study aims towards addressing and bridging this research gap, as motivated by the rise in the use of humor, specifically in sensitive contexts. By exploring this relationship, the present research seeks to contribute insights into how various humor styles influence bereavement, as potentially moderated by coping humor.

Significance of the Study

The present study seeks to integrate the concept of four humor styles: affiliative, self-enhancing, aggressive, and self-defeating (Martin et al., 2003), coping humor (Martin et al., 2009), and the experience of bereavement so as to explore their inter-relations. The objective is to address and bridge the current research gap between the variables. Understanding how humor styles affect bereavement experience will contribute to both the theoretical basis as well as to psychological interventions and counselling of grief. The insights gained can be used to shape and individually tailor therapeutic approaches for the bereaved so as to maximise and improve coping.

The study also challenges the prevailing social taboos around the use of humor in sensitive contexts, where it is seen as inappropriate and insensitive. Since the role of the use of humor for coping with grief remains under-explored, it can be determined whether it is a valid and constructive coping mechanism. Additionally, insights can further be used to improve social relations by tapping into the social function of humor, which is often impacted during bereavement.

Lastly, the study places the objectives of the study within the Indian socio-cultural context, thereby contributing to cultural relevance and understanding the relationship among variables within a non-Western framework. This contextualisation further opens up possibilities of expanding the study to other cultures, and paving the way for broader cross-cultural comparisons,

Thus, the empirical findings will expand the knowledge on the overall functions of humor and its impact on other variables, all while maintaining the framework of socio-cultural influences in mind.

Chapter 2 : Review of Literature

Humor Styles and Other Psychological Variables

A study by Fu et al. (2024) compared the use of self-enhancing and self-defeating humours (Martin et al., 2003) on emotional regulation. The participants (N = 75) were assessed on their emotional regulation strategies, and baseline scores, cognitive re-appraisal, and the two self-directed humors (self-enhancing and self-defeating humors). For the research, the Negative Scene Materials, and Self-Directed Humor Sentences were developed. The results indicated that both the styles of self-directed humor can significantly influence emotional regulation. Self-enhancing humour positive correlates with improved mental health outcomes (Schneider et al., 2018), and the present study provides evidence that points out that it can improve positive emotion and reduce the level of negative emotions, thereby leading to emotional regulation. While self-defeating humor is seen as relatively maladaptive (Martin et al., 2003), it can also be seen as being able to identify and make peace with one's own imperfections. The current research identified it as a form of "defensive denial" (Fu et al., 2024) that helps people turn their negative emotions into more adaptive ones, thereby facilitating emotion regulation and improvised coping through humor. Paired with cognitive reconstruction, one can modify their broader attitudes into more adaptive ones (Wu et al., 2021), thus indicating that humorous cognitive reappraisal has improved outcomes as compared to the conventional forms of cognitive reappraisal. Additionally, the study also found that self-enhancing humor has higher effectiveness in emotional regulation than cognitive reappraisal, and that self-defeating humor leads to a self-negation (Samson & Gross, 2014), thereby making it fare comparatively lower on humorous cognitive reappraisal. This underscores the adaptive role of humor, which fosters emotional regulation and well-being

Kennison (2022) investigated whether humor styles can buffer a person in the face of adversity and contribute to resilience. The study employed Humor Styles Questionnaire, the Scale of Protective Factors, and the Oxford Happiness Questionnaire (N=204). It was found that greater use of affiliative and self-enhancing humours, and decreased use of self-deprecating humours contributes to resilience against adversity, particularly in areas of social skills, planning and prioritising of behaviour, social support, and goal-efficacy. Consistent with previous research (Ford et al., 2016), increased adaptive humor and lowered maladaptive humor also boosts happiness. The research demonstrated that using maladaptive humours style explain how resilience-related factors cause variance in happiness levels. Interestingly, no statistically significant finding was obtained for the same for positive humor styles. Thus, while increased use of positive humor doesn't significantly happiness, use of negative humor styles can be significantly detrimental to it. To explain this dynamic, the researchers drew upon on Positive-Activity Model of Happiness (Lyubomirsky & Layous, 2013),

which suggests that specific personality traits are associated with increase happiness and resilience and positive humor, and that specific behaviors increase positive emotions and thoughts within us. This directly and indirectly leads to increased happiness. Conversely, negative emotions that tend to take place after engaging in negative humor styles can lead to behaviors that sabotage our happiness (such as engaging in conflict, brooding, etc), or may limit how often we engage in happiness-inducing behaviors. This results in low self-esteem, narrowed social support, and unfavourable impressions of oneself. Thus, all these factors interact with each other to influence the outcomes of the variables.

Cheng et al. (2021) conducted a research to assess use of humour in managing work-life conflict (WLC), and distinguishing the effects of individual and co-worker humor. The study is based on integrating the Benign Violation Theory and the Transactions Theory of Stress and Coping. Data was collected from an online platform, CloudResearch, which allows researchers to screen and reach out to participants who meet their criteria. Three sub-studies were conducted. For the first sub-study, longitudinal surveys and between-subjects experimental design were used also employed for the first sub-study. In the first study, the participants (N = 224) were then randomly allotted conditions part of a 2 x 2 between-subjects experimental design (absence of WLC versus the presence of WLC; and absence of humor verses presence of humor), wherein each group had to complete certain tasks but certain differences were present. The aim was to assess whether coping humor aids in reducing the stress experienced from work-life conflict (WLC). It was found that using humor while thinking about work-life conflict does, in fact, aid in lowering stress. This suggests that the use of humor helps in the cognitive re-appraisal of the situation, and reduces the threat of the situation thereby making it 'benign,' as aligned with the Benign Violation Theory. The second study aimed at assessing whether coping humor reduces the stress associated with WLC, and whether it holds a significant relationship with the source of the humor (individual versus co-worker generated humor).For the same (N = 396), WLC was assessed using the shortened version of the Work-Family Conflict Scale, and withdrawal was assessed using the Turnover Intention Scale. The Coping Humor Scale, Stress Relieving Humor Subscale, and the shortened version of the Positive and Negative Affect Schedule were also employed. For assessing stress, measures of the first study were employed. The results found that individual humor plays a significant role in reducing stress and withdrawal that accompany WLC. Conversely, it found that stress levels increase when the humor is generated by co-workers. For the third study, researchers examined how the humor generated by co-workers influences the individual's perception of the co-worker support. A positive signifiant relationship was established, suggesting that high WLC that results from increased co-worker humor is linked to perception of low support from co-worker. Lower co-worker humor was found to still be associated with lower perceived support, however the degree of relationship was found to be relatively lower. Overall, the study concluded that individual or self-directed humor is positively associated with reduction of stress, as it leads to the individual appraising the situation differently. This finding is consistent with the Benign Violation Theory and the Transactional Theory of Stress and Coping. However, between individual and co-worker humour individual humor was found to reduce the stress and withdrawal associated with WLC. Co-worker humour, on the contrary, was found to exacerbate it. Higher co-worker humor was found to be negatively associated with perceived social support from co-workers i.e. those with high co-worker humor were found to perceive lower co-worker support, and its corollary. This could be because co-worker humor may be perceived as mockery or dismissal of the individual's stressors, rather than being seen as a form of genuine support.

Jiang et al. (2020) conducted a meta-analysis to examine to correlation between humor styles and subjective well-being (SWB), and to investigate whether age and culture moderate this correlation. The premise for this research is that there are cultural diversities in the use of humor, for example, humor usage varies in individualistic and collectivistic cultures (Yue et al., 2016). Similarly, inconclusive results have been found on the nature of the influence of age on use of humor styles. These inconsistencies in the theoretical discourse have formed the basis of the present research. The researchers have built their work on Schneider et al's (2018) research as well, wherein a meta-analysis of 37 studies (N = 37) was conducted, on a total of 12,734 participants to study the correlation between the four humor styles and mental health. Mental health was further understood from four domains: self-esteem, life satisfaction, optimism, and depression, which found that mental health correlates most significantly and positively with adaptive humor styles, and negatively with self-defeating humor. However, no significant correlation was established with aggressive humor. The present research analysed 85 studies (N = 85) that have employed various scales and indices to explore the relation between different types of humor styles and SWB. The results demonstrate that adaptive humor styles are significantly beneficial to SWB, and that maladaptive humor styles are detrimental to it. However, age was not found to be a significant moderating variable. The researchers speculated that this could be partially attributed to how data was coded and categorised. Similarly, the researchers found that culture

also does not play a significantly moderating role. This was contradictory to the hypothesis formulated, considering the differences in perceptions and usage of humor in individualistic and collectivistic cultures. Humor is a complex, layered, and multi-faceted phenomena; an expectation of a homogenous perception undermines its complexity. For example, within the Chinese culture, there are several philosophical traditions, each with their own beliefs around humor. As some of these may be contradictory, the research yielded inconclusive results. Additionally, the presence of only disproportionately less studies based in Eastern cultures, compared to the West, may have also contributed to the results.

Plessen et al. (2020) conducted a research using Humor Styles Questionnaire to explore the relation between health-promoting and health-endangering humour styles and their correlation with the Big Five Model (Costa & McCraw, 1999), and evaluate the role of moderating variables, such as age, sex, origin, etc. The researchers compiled data of 24 studies (N=11,791). The study results demonstrated that health-promoting or benign humor styles (self-enhancing and affiliative) correlate positively with conscientiousness, extraversion, openness, and agreeableness, and negatively with neuroticism. In contrast, malign humour styles (aggressive and self-defeating) shows a strong positive correlate with neuroticism and negatively with agreeableness and conscientiousness. This indicates that there is a significant association between our personality traits and our humor styles. We can also infer that the benign humor styles are more likely to be outgoing, to engage in affiliative humor to enhance social relations, and be perceived as kind and socially warm, whereas malign humor styles can be seen as more likely to exhibit stress and self-consciousness (Plesse et al., 2020), and exhibit more negative affect and emotional instability.

Heintz and Ruch (2019) assessed the correlation of various models of humor to empirically compare them. Craik and colleague's (1996) five bipolar styles, Martin and colleague's (2003) four humor styles, and Rich and colleague's (2018) eight comic styles were assessed using g the Comic Style Markers (Ruch et al., 2018) and Humor Styles Questionnaire (Martin et al., 2003). Ruch and colleagues (2018) introduced eight comic styles. Comic is more of an umbrella term which covers humor as well. The eight comic styles include : fun, benevolent humor, nonsense, cynicism, sarcasm, wit, irony, and satire. These styles cover a variety of styles : light, dark, simple, and relatively complex (Heintz & Ruch, 2019). The present study was conducted on German-speaking adults, and HSQ and Comic Style Markers were employed. It was found that high positive correlations exist between self-enhancing and benevolent styles, fun and wit with affiliative styles, and sarcasm and aggressive styles. Moderately strong positive correlations were found to be present between benevolent humor and nonsense, and wit with affiliative, self-enhancing and fun, wit, and nonsense; self-defeating and satire; and aggressive with irony and sarcasm. The study revealed that there are significant redundancies between fun and affiliative, sarcasm and aggression, and benevolent humor and self-enhancing, demonstrating that there are shared underlying tendencies. This indicates that production of humor (aligned with playful and affiliative styles), positive and cheerful mood (similar to fun and affiliative), and mockery (resembling sarcasm and aggressive humor) represent individual differences in humor, and require further empirical analysis. This highlights the multifaceted and nuanced nature of humor, and how it interacts with other variables such as personality, interpersonal functioning, etc, thereby requiring academic advanced that seek to explore it further.

Heintz and Ruch (2018) conducted a study to explore the relationship between self-defeating humour with self-esteem and emotions, using cognitive interviewing techniques of thinking out loud and online cognitive probing. The researchers used the Self-Defeating Scale, and the research was done in two studies, wherein Study 1 (N = 218) employed online cognitive probing while Study 2 (N = 502 employed the technique of thinking aloud. In the first study, the respondents were asked specific questions and the response was given to it. For the second study, participants must continuously narrate their thoughts while simultaneously answering questions. The first study found that higher self-defeating scores were linked to increased self-directed humour (as compared to lower scores on the scale). The second study illustrated that higher scores on the scale is linked to increased self-esteem, which in turn improves the quality of relationships. Higher scores were also found to positively correlate with wit increased facial displays of positive emotions. However, the hypothesis that self-defeating humour reduces self-esteem was not found to be supported. It was suggested that self-defeating humour can be used as a strategy used for coping with perceived weaknesses and difficulties, and in turn enhance their self-esteem. It can also be used to build social bonds by helping others cope, and be used to make oneself approachable, thereby improving social relationships.

Schneider et al. (2018) conducted a meta-analysis of studies (N=45) that used the Humor Styles Questionnaire too investigate the impact of humor styles on four variables: optimism, depression, life-satisfaction, and self-esteem. The meta-analysis findings indicated the presence of significant associations between humor and mental health: there is a positive correlation between benign humour styles (self-enhancing and affiliative) and a person's overall mental health; conversely, people with malign humor styles are likely to have poorer overall mental health. This was found to be particularly true for people with self-enhancing humor: people with this style of humor are likely to be more optimistic and bounce back from adversities in a more efficient manner due to their humorous approach in life. Although they do not correlate strongly with self-esteem and life-satisfaction, people with self-enhancing humor are more likely to be buffered against depression and have better coping skills. Affiliative humor was found to have relatedly weaker correlations with mental health, life-satisfaction, and optimism, but correlates most strongly with extraversion, and thus with self-esteem. The study thus assumes that affiliative humour is correlated strongly with personality traits that in turn are linked to improved mental health, even if there is no strong correlation between them. For self-defeating humor, it was found that there is a strong negative correlation with mental health, emotional stability, and self-esteem, which can be better understood by keeping in mind the very nature of this style of humor wherein the person creates humor at their own expense. Finally, aggressive humor was found to have no significant correlation with any of the variables considered. M

Ford et al. (2016) assessed the relationship of the four personality traits: extraversion, locus of control, self-esteem, and optimism, with humor styles and happiness. The study was grounded in the theory given by Myers and Diener (1995) which states these four personality traits are characteristics associated with happiness. Martin (2003) identified that certain humor styles, namely self-enhancing and affiliative humor styles, are more adaptive in nature, and correlate positively with psychological well-being and interpersonal rewards. The present study hypothesized that people with these four traits associated with happiness tend to incorporate the adaptive humor styles in their daily lives, and this further allows them to adopt a humor perspectives, and use humor to enhance their social relations. The study was conducted using various inventories : Eyesenck Personality Questionnaire, Locus of Control Scale, Rosenberg's Self-Esteem Scale, Life-Orientation Test-Revised, Martin's Humor Styles Questionnaire, and Oxford Happiness Questionnaire (N = 194). The study enhanced the evidence of Myers and Diener's (1995) and Martin's (2003) theories on the four traits associated with happiness, and that increased happiness is linked positively with adaptive humor. It demonstrated that people with adaptive humor styles tend to have higher levels of extraversion, adopt an internal locus of control, and report his levels of both optimism and self-esteem tend to have higher captive humor styles, and this contributes to higher levels of happiness. However, no significant differences were found between the comparative effects of affiliative and self-enhancing i.e. both adaptive humor styles are equally correlated with happiness. Overall, it supports the role of humor functions as a mediating factor between certain personality traits and happiness.

Cann and Collette (2014) conducted a research to examine the relationship between humor styles, stable affect, and psychological well-being. Participants (N = 120) were given the Humor Styles Questionnaire, the modified Differential Emotions Scale, the Satisfaction with Life Scale, the Depression, Anxiety, and Stress Scale, and the Connor-Davidson Resilience Scale (N = 120) to complete. The study found that self-enhancing humor positively correlates with stable affect, and correlates negatively with negative affect. These results were not found to be surprising as self-enhancing humor helps individuals minimise the intensity of any threat that could potentially lead to negative affect. Affiliative humor was found to enhance social bonds by contributing to shared amusement and mirth. However, no correlation was found to be significantly present between self-defeating humor and affect. The researchers proposed that self-defeating humor focuses on an all-encompassing, global experience of negative events and emotions, and would thus be correlate more with higher levels of depression and lower self-esteem (Martin et al., 2003). The study also revealed that positive affect is linked to higher resilience and well-being and reduced psychological distress. Stable negative affect is linked with higher distress and lower resilience. Aligned with the Broaden and Build Theory (Fredrickson, 2013), a person's flexible thinking boosts when they experience affect, and this contributes to them being able to adopt various perspectives and enhance resilience in the face of adversity. With regard to humor styles, only self-enhancing humor was found to be correlated with any health outcomes, both directly (enhancing resilience and reducing distress) and indirectly (creating positive affect that in turn leads to health benefits).

Zeigler-Hill and Basser (2011) conducted a research on Israeli undergraduate students (N = 200) to understand whether humour styles are linked with pathological forms of narcissism (grandiose and vulnerable) (Pincus & Lukowitsky, 2010) and self-esteem. Pathological forms of narcissism are associated with lack of empathy, emotional instability and an increased tendency to exploit others, thereby making it relatively maladaptive. Grandiose narcissism is characterised by more exhibitionism and superiority, whereas vulnerable narcissism is characterised by increased self-criticism and affective disturbances. A research by Besser and Zeigler-Hill (2010) found that grandiose style of narcissism is more associated with adaptive humor whereas vulnerable narcissism correlates more with maladaptive humor. The current study thus employed Pathological Narcissism Inventory, Humor Styles Questionnaire, and Rosenberg's Self-Esteem Scale on its participants (N = 200). The result revealed that humor styles act as important moderators between narcissism and self-esteem. Specifically, people with grandiose narcissism are more likely to engage in more adaptive styles of humor, which also acts as a boost to their self-esteem. In contrast, people with vulnerable types of narcissism either are less likely to engage in humour, or are likely to engage in maladaptive styles of humor, which corresponds with lower self-esteem. The study found that grandiose style of narcissism is often a defensive strategy to protect against the underlying vulnerable narcissism, and that humor is used to create the outward expression of superiority and confidence to regulate the underlying vulnerable narcissism.

Fort et al. (1973) conducted a research to investigate the psychological impact of detainment on the crew of USS *Pueblo*. The crew had been detained and imprisoned in North Korea, where they reported to have been subjected to physical mistreatment and dietary restrictions amidst uncertainty around their release. Within forty-eight hours of their return, they underwent several tests to evaluate their psychological state, as well as the defence mechanisms used by them to protect themselves. The researchers employed a 'comparison' (control) group so as to compare the 'success' of coping during the imprisonment period. This definition of 'success' was characterised by several dimensions: the ability of the individual to psychologically protect themselves, to contribute to supporting the group morale, and to be able to resist compliance to the demands made by the captors. Alternatively, absence of 'success' was understood from: the presence of psychiatrically significant symptoms, not being able to contributing to boosting group morale (or being detrimental to it), and compliance with the captors. They were also assessed on the individual's subjective opinion on their own performance, the crew-mates' opinions on each person, psychiatrists' report on the presence of (or absence of) clinically significant symptoms, and on how well each individual was able to resist complying with captors. The study hypothesized that it is not the demographic data or period of service of a soldier that is indicative of their ability to cope with the stress as prisoners of war, but their ego strength and the defence mechanisms employed are better predictors of their coping during imprisonment (Ford et al., 1973). It is based on this hypothesis that various defence mechanisms of the soldiers were assessed, including humor. The findings show that positive psychological outcomes were associated with use of both qualitative and quantitative types of defence mechanisms. The use of mature defence mechanisms, such as humour, are associated with better resistance to the demands of the captors, stronger group cohesion, and individual coping in extreme conditions. The use of defences was thus found to be a better mediator that psychological resilience.

Summary

Varies studies have sought to understand the nature and functions of humor with regard to other variables as well. Use of humor as a mature defence mechanism has been found to increase individual coping in the face of adversity, increase group cohesion, and strengthen resistance to compliance in high-risk, captivity-related situations (Fort et al., 1973). Humor thus acts as a protective mechanism against calamity and emotional vulnerability (Zeigler-Hill & Basser, 2011; Fort et al., 1973)

It positively correlates with lowered depression and improved mental health outcomes (Schneider et al., 2018), and with optimism, resilience, and overall coping. Self-generated humor has been found to lower work-life stress and conflict (Cheng et al., 2021). People with adaptive humor are also likely to be perceived as kind, warm, and sociable as these humor styles correlate positively with consciousness, extraversion, agreeableness, and openness (Plessen et al., 2020; Ford et al., 2016). Affiliative humor helps lower the intensity of emotions, and enhances interpersonal relations, whereas self-enhancing humor improves overall health (Cann & Collette, 2014). While they may not be directly associated with increased happiness, adaptive humour has been found to increase use of positive behaviours increase positive affect, which in turn boosts happiness levels (Kennison et al., 2022).

In turn, maladaptive humor styles have been found to significantly decrease happiness levels (Kennison et al., 2022). People with maladaptive humors are more likely to engage in behaviors that increase the chances of negative affect, and are detrimental to happiness (Kennison et al., 2022). They are more likely to exhibit traits associated with neuroticism, and are therefore more prone to stress, emotional instability, and self-consciousness (Plessen et al., 2020). They are also detrimental to the global subjective well-being of a person (Jiang et al., 2020).

Self-defeating humor, in particular, has been found to correlate significantly with poor mental health (Schneider et al., 2018). However, it has yielded inconclusive correlations with self esteem: Schneider et al.(2018) demonstrated that it is associated with lowered self-esteem, however Heintz and Such (2018) found that it actually improves self-esteem. In fact, self-defeating humor has been found to significantly improve coping with difficulties and weaknesses, and improves interpersonal bonds (Heintz & Such, 2018). It acts as a "defensive denial" that helps appraise a situation humorously, thereby regulating intense emotions and turning negative emotions into positive (Ford et al., 2024).

Humor and Interpersonal relations

Bringa (2023) conducted a research to explore how humor is used by peers and friends so as to defuse situations. The study required the participants (N = 74) to fill the Humor Styles Questionnaire, the Satisfaction with Life Scale, and the McGill Friendship Questionnaire-Respondent's Affection. The study found that people who perceived their friends to be using adaptive humor to defuse conflict were found to have higher levels of interpersonal/peer satisfaction. Conversely, if people perceive their friends to be employing maladaptive humor styles, the degree of peer satisfaction was found to be lower. Thus, use of adaptive humor is linked with relational satisfaction (Butzer & Campbell, 2008) and reduced levels of interpersonal stress (Martin et al., 2003). In cases of arguments, if one engages affiliative humor (or adaptive humor), it is likely to reduce the tension and defuse the conflict. Successfully working through the conflict allows disengagement from the situation, collaborative working through of the situation, and mutual understanding. This reduces the overall distress levels during the conflict. These findings are aligned with the research by Dyck and Holtzman (2013), which states that maladaptive humor styles negatively correlate with relational satisfaction, and that people employing maladaptive humor styles are likely to report lower levels of relational satisfaction. However, no specific humour style was found to be associated with life satisfaction, nor was relational satisfactions was not found to be a significant mediator variable for humor styles and life satisfaction.

Jones et al. (2021) conducted a research to assess the relationship between humour and friendships continuing from childhood to adulthood. The present study employed the Humor Styles Questionnaire and the Interpersonal Competence Questionnaire on its participants (N = 434). The researchers identified four clusters of responses on HSQ : self-defeaters (scoring above average on self-defeating humor, and below average on all other three), humor deniers (scoring low on all four styles of humor), humor endorsers (scoring above average on all four styles), and adaptive humor (scoring above average on the two adaptive styles, and below average on the two maladaptive styles of humor). It was found that adaptive humorists scored higher on initiating relationships and emotional support giving. They tend to be more empathetic, warm, and approachable, traits that foster long-term friendships. Among the other three, humor endorsers were found to initiative relationships more than those with self-defeating humor, although self-defeating humorists were found to be more emotionally giving that humor endorsers. Thus, self-defeating humor has been proposed to not always been seen as maladaptive: while they may have low feelings about themselves, they tend to be emotionally giving; when used in conjunction with other humor styles, it may be adaptive in nature. Finally, humor deniers were found to demonstrate minimal interpersonal competence. The study indicates that adaptive humors correlate strongly with positive and enduring interpersonal outcomes. Even self-defeating humor, in certain contexts, contribute to long-enduring friendships due to the emotional support provided. However, decreased use of humor can be detrimental to sustaining friendships.

Hall (2017) conducted a meta-analysis to understand the role of humor in romantic relationships. A total of 43 samples were obtained from 39 manuscripts, along with drawing data from studies employing Humor Styles Questionnaire. Several questionnaires on relationship satisfaction were also employed for data collection. Te results demonstrated that humor can be understood through the lens of two key dimensions : relational versus within-person humor, and positive versus negative valences of humor. The former is based on Darwin's (1859) theory that co-creation of humor between two individuals facilitates social interaction, bonding and cohesion. Within-person humor is more concerned with one's own space and generation of

humor, and how a person uses humor to regulate themselves. On the other hand, relational humor is co-created and mutually shared. It generates mirth, which further enhances the quality of relationships (Caron, 2002). It creates a collaboratively created shared space (Betcher, 1981) that allows the two people to 'get' each other's humor, and achieve a higher level of shared understanding with each other (Betcher, 1981). The results of present study are consistent with the previously established results: that use of relational humor increases the satisfaction with and quality of the relationship (Hall, 2017). This phenomenon tends to be more enhanced when the partners share a similar taste in humor. Humour thus plays a chief role in relationships (Barelds & Barelds-Dijkstra, 2010). Within-person humor, due to its self-directed nature, was found to be weakly associated with partner satisfaction (Hall, 2017). The second dimension is of affect-valence, and its associated impact on humor: positive valence is associated with self-enhancing humour whereas negative valence is associated with more aggressive styles of humor, as correlated with Martin et al's (2003) theory. Positive humor serves multiple purposes, one such being that it acts as a bonding factor that fosters intimacy and creates more satisfying relationships (Saraglou et al., 2010). Perceiving one's partner to have a 'good sense of humor' has been found to be reflective of a more general perspective of their partner, one that is more favourable (Martin, 1998). Aggressive humor, such as mockery or jokes at the expense of the partner, are seen more negatively, and generate negative affect, which contributes to relationship dissatisfaction. Thus, humor also contributes to shared relational values and levels of self-esteem, and the use of adaptive or maladaptive humors has a signifiant impact on their directions.

DiDomenico (2012) conducted a research to assess the moderating role of family humor on the link between family communication environments (FCE) (Ritchie & Fitzpatrick's, 1990) and family satisfaction. According to Koerner and Fitzpatrick (2002), based on the work of Ritchie and Fitzpatrick's (1990) Model of Family Communication, propose that there are two orientations on how family members communication: conversation orientation wherein members engage in a wide range of dialogue, and conformity orientation, wherein members are expected to follow a uniform and homogenous set of beliefs. Fitzpatrick and Ritchie (1994) developed a Family Communication Environment Instrument (FCEI) that assesses the communications schemata or beliefs of the family, and include : expressiveness, referring to the conversation orientation; structural traditionalism, referring to the traditionally established and followed hierarchy and power dynamics within the families; and conflict avoidance refers to avoiding uncomfortable discussions so as to maintain equilibrium. The present theory hypothesized that family communication environments influence the humor styles used by family members and this further influences their family satisfaction. Participants (N = 117) of diverse backgrounds were drawn from the Northwestern University's Communication Studies' undergraduate class. They were asked to fill various inventories: The Family Communication Environment Instrument, The Relational Humor Inventory, The Family Satisfaction Scale, and The Relational Maintenance Strategy Measure. Additionally, a survey questionnaire of three items was created by the researcher to assess the frequency of communication. The study results illustrated that conversation-oriented family environments facilitate use of affiliative humor, and tend to engage in communication with the intention of expressing affection. This finding is aligned with the work of Barbato et al. (2003) on supportive and expressive types of family communication. In contrast, neither structural traditionalism nor conflict avoidance were found to be significantly correlated with use of adaptive humor. This was proposed to be linked them stressing on conformity. Structural traditionalism and conflict avoidance were found to positively correlate to use of negative humor where there is an emphasis on aggression, hostility, and hurt. These tend to be used to prevent deviance from conformity, avoid conflict, and ensure that harmony is maintained at least on the surface. Additionally, it was found that conflict avoidance is positively linked with the instrumental use of humor within families i.e. humor is used to deflect conflict and ensure that interactions remain smooth and harmonious. However, conflict avoidance and negative humor are contradictory in nature, and this can disrupt congruous communication, thereby creating mixed signals within the family. This link was not significantly present in structural traditionalist families. Finally, an inverse correlation was found between expressiveness and instrumental use of humor, indicating that humor is used to defuse and resolve conflict. The study concluded that positive use of humor was found to be positively related with family satisfaction, whereas negative use of humor correlates inversely with it; instrumental humor holds no significant correlation with family satisfaction. However, humor styles and functions were not found to be a significant mediator between structural traditionalism and conflict avoidance, and holds only a mild positive link in the case of expressiveness.

Kuiper and Leite (2010) examined how humor style of a person is used to form impressions. For the conduction of research, researcher described Martin's (2003) four humor styles to the participants (N=166), and then a final descriptor on which they had to rate the humor styles as observed on a 7-point scale. The study found that adaptive humor, particularly affiliative humor, is particularly associated with attributes that are perceived to be more socially desirable, such as being more outgoing and extraverted. Conversely, maladaptive humor, especially aggressive humor, is linked with more socially undesirable traits, such as irritability and hostility, and were perceived as being lower in extraversion and higher on neuroticism. Therefore, whether a person has more of adaptive humour styles or maladaptive humor styles has either a beneficial impact on their broad social perception, or a detrimental one. This indicates that a person's humor style not only influences our perception of the individual but also how socially desirable we perceive them to be. This is consistency with Graham's (1995) findings that humour influences our romantic and social preferences and judgements. For example, people tend to lean towards others who exhibit affiliative humor style, as opposed to aggressive humor style. Moreover, adaptive humor styles can potentially bridge interpersonal gaps to foster social connection and cohesion.

Summary

Researchers have studied the humor styles in a social context as well, so as to establish their relationship with interpersonal relationships. At a broader level, people with adaptive humor are more likely be perceived in a positive manner as they are more likely to be socially desirable and extraverted (Kuiper & Leite, 2010), whereas people with maladaptive humor styles are likely to be perceived as irritate, hostile, and less socially outgoing. Bringa (2023) demonstrated that use of adaptive humor increases relationship satisfaction, and that employing them in tense situations, such as in arguments and conflicts, helps diffuse the situation, foster mutual understanding and collaboration. Relationship satisfaction has been found to increase when the partners seem to share humor styles (Hall, 2017). Conversely, people with maladaptive humor are more likely to report relational dissatisfaction (Bringa, 2023), especially aggressive humor style as it is more hostile in nature (Hall, 2017). Thus, humor styles influence our social and romantic preferences, as well as our overall interpersonal relations and degree of cohesion.

Jones et al. (2021) demonstrated that people who score high on adaptive humor ("adaptive humorists") are more likely to have long-term, enduring relationships as they tend to be warm, emotionally supportive, empathetic, and approachable. Conversely, people who score low on all four humor styles are likely to have low emotional competence, and are less likely to have warm and enduring friendships.

DiDomenico (2012) explored role of humor styles in family environments based on Model of Family Communication, and found that positive use of humor is positively correlated to family satisfaction. Expressiveness families are more likely to engage in adaptive humor, whereas structural traditional and conflict avoidance families are more likely to use maladaptive humor, and focus on aggression and hostility. Conflict avoidance families in particular use humor with the intention to deflect conflict and maintain family harmony at a surface-level. However, humor styles were not found to be significant moderators in conflict avoidance and structural traditionalism families, and only a mildly significant moderator in expressiveness families.

Culture and Humor

"Although humor and laughter are universal in humans and are likely a product of natural selection, the way people use and express them in a given time and place is strongly influenced by cultural norms, beliefs, attitudes, and values" (Martin, 2007; p. 26)

Schermer et al. (2021) conducted a large-scale, cross-cultural investigation across 15 countries (N-4,701), where they utilised Humor Styles Questionnaire and the Single-Item Self-Esteem Scale. Previous studies have established that there is a relationship between self esteem and humor, and the present study demonstrates the presence of cultural variations in this. For example, the participants from Colombia and Serbia were found to have the score the highest self-esteem, and on combining their scores, it was found that scoring high on affiliative, self-enhancing, and aggressive humour styles in this areas is associated with higher self-esteem (along with being older and being a woman). Scores from other countries (Except Russia) indicate that self-enhancing humor is linked most strongly with self-esteem, and that self-enhancing humour predicts self-esteem for only a few countries (namely, Canada, Ukraine, Estonia, Bulgaria, Serbia, Germany, and

Portugal). Self-defeating humor style was found to have a negative correlation with self-esteem (Ford et al., 2016), and the study results are consistent with this of all countries except in Russia and Bulgaria where no statistically significant conclusion was obtained. Interestingly, a positive correlation between aggressive humor and self-esteem were found in Poland, Russia, Estonia, and Portugal. This can be understood as resulting from a boost in self-esteem from perception of superiority (Schermer et al., 2021).

Mir and Cots (2019) conducted a comparative research between American English speakers and Peninsular Spanish speakers to explore whether there exists a difference in the use of humor, as well as in humor types, as response to compliments. A total of 100 participants of both cultures each (N=200) participated in the online data collection around use of humor in various situations. The study findings revealed that American English speakers prefer to engage in self-deprecating humor to indicate humility in the face of compliments and avoid coming across as arrogant. However, in cases of power dynamics—as demonstrated by use of self-denigrating humour by a professor in return to a compliment by a student—self-denigrating humor can undermine one's superiority or authority, and throw the relationship off-balance for the student who must now adapt to this change. In contrast, Spanish speakers typically respond with verbal irony, which is often an overstatement of the truth. This stems from the motivation to avoid coming across as arrogant, and to overcome the creation of a power dynamic that comes into play between the complimenter and the recipient. However, this irony can be seen as ambiguous as it leaves the complimenter unclear on whether the compliment had been accepted or rejected. Teasing was found to be the most commonly employed form of humor as a response to compliments as while it lies between humor and insult, it is without the aggression of the later. It is seen as a 'positive politeness' strategy that indicates trust and brotherhood. The use of teasing and verbal irony among Spanish speakers was found to be without aggression; instead, it relies heavily on shared cultural understandings and the responses are adjusted as per the relationship with the complimenter. One must be familiar with the cultural para-linguistics to understand the humour and the rationale of its use. The Spanish speakers are also more likely to take into consideration whether the compliment response was perceived as humorous or not, as compared to American speakers. This also results from the fact that compliments are given sparsely as compared to American culture; the respondent thus ensures that explicit humor is used to convey that the compliment is received, but is also mindful to maintain balance of the power dynamics. Efforts are put to ensure that the humorous response has been perceived as intended. On the other hand, American self-deprecating humor is directed more to the speaker or compliment recipient rather than the compliment. The ambiguity here lies in how the initial complimenter responds to the self-deprecation : whether they laugh along or they feel the need to re-state their compliment. This difference in response as well as the overall cultural difference around humor has been found to be a source of compliment between American English speakers and Peninsular Spanish speakers. Thus, it can be understood that American English responses are easier to understand and interpret as they can be directly interpreted, whereas Peninsular Spanish rely on context, and cultural and linguistic knowledge, and required more nuanced interpretations.

A study by Yue et al. (2016) found that Western cultures are more likely to view humor in a positive manner, whereas the Eastern cultures—particularly the Hong-Kongese—are likely to see it in a more negative light. It also revealed that Westerners are more likely to use self-enhancing humor whereas Easterners use more self-deprecating humor. The western culture has a long-down history of valuing humor, since its Greek roots, and views it as a natural outcome of delight and fun (Grant, 1924/197). They also view it as associated with self-actualisation (Maslow, 1968) , and crucial for coping with daily hassles (Lefcourt et al., 1995). The Chinese, representative of the Eastern culture, view humor and laughter as deviating from one's dignity and going against socially appropriate behaviors (Yue, 2010; Xu, (Lin, 1934). If one must laugh, one must do it privately and quietly, instead of loudly (Lin, 1974). Yue (2011) found that humor is associated with "intellectual shallowness" and "social informality," as part of the Confucianism beliefs; thus they are likely to enjoy humor but not value it as a personality characteristic. However, the current academic discourse on humor is tilted towards the Western beliefs, both a cause and consequence of predominance of research being biased towards individualistic cultures. This study is one step towards bridging the gap between the two broad categories of cultures.

Hiranandani and Yue (2014) used the Humor Styles Questionnaire, GELOPH-15 Scale, and the Rosenberg Self-Esteem Scale to examine the relationship between humor styles, gelotophobia (fear of being laughed-at), and self-esteem among Indian (N=102) and Hong-Kongian (N=101) university students. The research revealed several insights. First, both samples of students were found to engage in more adaptive humor. This can be understood from the lens that Indian and Chinese cultures are collectivistic in nature, prioritise social harmony (Yue et al., 2010), reciprocity, and interpersonal cohesion. Second, between the

samples, it was found that Indian students are likely to value humor more than the Chinese students, and are more likely to engage in affiliative and self-enhancing humors. They were also found to have lower levels of gelotophobia. A correlation was found between higher gelotophobia (as seen relatively in Chinese students), with less frequent use of affiliative humor (Ruch et al., 2008), and lower self esteem (Ruch & Proyer, 2009). Finally, it was found that affiliative humor functions as an important moderator of gelotophobia and self-esteem; it was found to enhance self-esteem and reduce gelotophobia, as observed in the Indian sample. Conversely, infrequent use of affiliative humor increases the gelotophobia and reduces self-esteem.

A study conducted by Chen and Martin (2007) examined the humor styles given by Martin (2003) in his Humor Styles Questionnaire (HSQ), as well as examined the coping humor using Coping Humor Styles in relation to its impact on mental health with the Symptom Checklist-90. Martin (2003) had already established that the adaptive humor styles (affiliative and self-enhancing) positively correlate with several components of Symptom Checklist-90; thus, this instrument was also adopted in the present study. The Chinese translation of all the three standardised scales were used. The findings reveal that, in the context of Chinese culture, aggressive humor shows a lower internal consistency as compared to the other three sub-scales, and that its items doesn't capture a single and unified construct, but cuts across various constructs; thus, the HSQ may not be the most appropriate measure to assess aggression in Chinese culture. It was also found that affiliative, self-defeating, and coping humours have a high correlation with mental health (as assessed by SCL-90), while self-enhancing and aggressive humours are associated with poor mental health outcomes. The former set tends to use humor for emotional regulation and coping whereas the latter use it with regard to social interactions. This can be explained with the fact that humor as a personality characteristics is viewed differently among different cultures: for example, the Canadian culture (the sample of the original HSQ) places more value to humor, and find it more desirable than the Chinese culture. This reveals the presence of a significant cultural divergence between Canadian and Chinese samples, where the former follows the individualistic cultural mindset whereas the latter is part of collectivistic culture, creating differences in the perception, application, and functions of humor.

Summary

The aforementioned researches highlight that there are cultural patterns in humor perception and usage, and that it is embedded within the broader cultural orientations. For example, use of humor among Chinese population is considered as "intellectual shallowness," (Yue et al., 2016) thus they place less value to it being used. China being a collectivistic culture finds the 'affiliative' scale more aligned with its cultural norms and personality characteristics that are valued. However, despite both China and India being socially oriented, India places more value to humor usage (Hiranandani & Yue, 2014), particularly the affiliative and self-enhancing types. Similarly, Spanish population are more likely to engage in usage of irony and teasing (Mir & Cots, 2019) as responses to compliments so as to maintain the socially expected humility.

These researches also demonstrate that outcomes of humour usage are not only influenced by the characteristics each of the four scales represent, but also have cultural variations: in Canada, and Ukraine, self-enhancing humor is most strongly linked with higher self-esteem outcomes, whereas in Colombia and Serbia, affiliative, self-enhancing, and aggressive humor styles correlate strongly with self-esteem (Schermer et al., 2021). In Poland, Russia, Estonia, and Portugal, aggressive humor was found to correlate the most with self-esteem.

These cultural variations in humor usage and perception question whether the HSQ is an appropriate measure to assess humor across: for example, Chen and Martin (2007) demonstrate that the aggressive scale of HSQ has lower internal consistency among Chinese populations, and that the scale cuts across several culture-specific constructs, which is not corresponding to the items as well as their classification on the scale. This points to a need for developing scales which cater to cultural variations, particularly of the collectivistic cultures, as present research is severely biased towards the individualistic Western norms.

Bereavement Experience and Social Factors

Gameon et al. (2024) conducted a research to gain understanding of the perspectives held by Native communities of America (American Indian/Alaskan Native) on grief and how it is linked with health inequities. The researchers conducted semi-structured interviews (N = 12). The researchers did not refer to only immediate or recent losses only while conceptualising 'grief,' but entended to include the structural

traumas experienced by the previous generations as well, which are passed down due to their unresolved nature (Gamepn et al., 2024; Brave Heart & DeBruyn, 1998). These collective psychological trauma transmitted makes the present generations of individuals and societies more vulnerable to poorer health outcomes, both physical and pfsychologistcal, as per the Indigenist Stress Coping Model (ISCM) (Walters & Simoni, 2002). These outcomes are buffered by the presence of social support, which is also a core component of collectivistic societies such as the Native communities. The study found that, within the Native communities, grief manifested in the form of physical signs (body aches and pains, memory loss, reduced appetite, a sense of heaviness, etc) as well as emotionally forms (such as in the forms of a sense of overwhelm, loneliness, anger, numbness, survivor's guilt, etc). Psychosocial impairment was also reported, such as withdrawing from community participation, avoiding culturally promoted grieving rituals and practices, and an increased sense of loneliness. All these factors interact, and influence grief outcomes. Other factors, such as frequent losses, losses extending beyond death (such as foster care separations, substance consumption and addiction-related losses, incarcerations), lack of healthcare, etc tend to exacerbate grief outcomes. Despite the challenges faced, participants identified that common ways of coping, such as relying on and seeking aid of social support, engaging in traditional grieving practices, letting go of the resentment and anger held, as well as supporting others through the grief. It was also established that within the communities, there exists a cyclic and inter-dependent relationship among health inequities, higher mortality rates, and complicated grief. This is further enhanced by poorer quality of as well as lack of basic healthcare available to the Native communities (Goodkind et al., 2010). This study highlights that impact of loss, as well as its nature and course, are often socially embedded, and may even be a collective experience. This marks the need for community-based support and cultural understandings.

Das et al. (2021) conducted a mixed-method study in India too assess the impact of neonatal death, stillbirth, and child death on the parents and their family members. The study involved parents and families (N = 41) of people who had lost a child to neonatal death, community representatives (N = 12), and eight focus group discussions held with mothers, fathers, grandparents, and those with children under five years but had not experienced child death or still birth (N = 72). The Perinatal Grief Scale, a 33-item scale, was used to measure active grief, difficulty in coping, and despair. Additionally, qualitative data was collected via semi-structured in-depth interviews, and through thematic analysis conducted of the focus group discussions. The study captured the immediate and long-term impacts of grief across various forms of losing a child, as well how it manifests between the parents (mothers and fathers). It was observed that, in most cases, the medical team would prefer to break the news separately to the parents, such as informing father of the child first. This often led to a fragmented experience of grief between the parents. The study also found that most women reported intense grief reactions upon hearing the news; some reported fainting as well. It was also observed that mothers and fathers tend to grief differently, and often not discuss with each other. Fathers tend to internalise grief, so as to not overwhelm the mother, and prefer to keep busy with their jobs. Comparatively, mothers took longer than the fathers to get back into the household routine. A consequence of the major grief was that parents often experienced loss of jobs, or would quit it themselves. This tended to created financial strains, adding to the existing emotional overwhelm. Several other variables, such minimal support from families, as well as the unexpected nature of loss and the associated guilt and remorse tend to amplify grief reactions. Parents often reported experiencing confusion as to how the loss took place, why had the medical staff not intervened in the initial stages; for some, there was no response from the staff, adding to the already-existing vacuum and emptiness. Mothers were found to have more severe grief, as compared to the fathers, 6-9 months post loss, owing to familial and cultural expectations. In several instances, women were found to be blamed by their families, and were even held responsible for the loss. Overall, the study illustrated the role of social factors that shaped their experience, even create a gendered divide in the nature of grief. This highlights that grief tends to be influenced by broader social factors as well.

Camacho et al. (2017) conducted a study to investigate the influence of guilt on the bereavement experience. For the study, The Ingen Bereavement Symptoms Questionnaire, the SC-35, and the Bereavement Guilt Scale (BGS) were utilised on a sample of 73 bereaved individuals (N = 73). The research found that there is a significant difference in the degree of self-blame and guilt that is present in cases of loss to suicide. In the study, guilt emerged as a prominent emotion, and a central feature of bereavement due to suicide. The intensity of guilt has been found to be strongest when the death was to suicide, and the lowest, as compared to other causes of death, when loss was to natural causes, a finding consistent with Li's (2012) study. The guilt associated with suicide is also what distinguishes this grief from other types of grief, as it is more prolonged, tends to remain unresolved, and is most likely to lead to grief symptoms (Stroebe 2014). The social factors associated with suicide further exacerbates the grief, wherein people may choose to not reveal the true

cause of death so as to avoid the stigma and due to the fear of being seen as accountable or responsible for the suicide. This socially enforced guilt is internalised, which further disrupts the resolution process. Thus, this study illustrates the sensitive nature of bereavement due to suicide, and highlights the need for sensitively tailored support during rehabilitation so as to facilitate coping and prevent the development of complicated grief.

Cheung et al. (2017) conducted a study to explore the associations between religion, bereavement, and depression in Hong Kong, specifically focusing on the nursing professionals there. 43% of the population of Hong Kong practice an established religion (Hong King Yearbook, 2013) with the predominant ones being Buddhism and Taoism. Religion has been found to be associated with improved health outcomes, both physical and mental, and the present research aims towards exploring its impact on bereavement outcomes. The researchers employed Depression Anxiety Stress Scale 21, a three single-item questions on their religious beliefs, and two questions assessing recent bereavement (specifically in the preceding 12 months). The study results revealed that practicing a certain religion led to comparatively lower depression scores than in case of not following religion, indicating that religion acts as a buffer or a resilience factor for the bereaved. This is because religions provide a community to people which helps them build support, thereby acting as an indirect buffer against intense emotional experienced through the social community networks it provides. Interestingly, in the cases of participants who did not meet the bereavement criteria, those following a religion were found to have lower depression scores than participants not following any religion. This illustrates that religious beliefs tend to have broader mental health benefits and foster emotional resilience.

Bristowe et al. (2016) conducted a systematic review and thematic analysis to examine the bereavement experiences of people of the LGBTQIA+ community after the loss of their partner(s). The study considered 23 articles of qualitative, quantitative, and mixed methods research, of which 13 articles including the experiences of 555 people were shortlisted. The study explored how the universal experience of loss that leads to a sense of vacuum and purposelessness is made more complex by additional social variables, such as marginalisation and stigmatisation. In the case of the queer community, grief was found to be exacerbated by certain variables, such as the stigma around the relationship, the social acceptance and support, cause of death, whether the couple were open about the nature of their relationship. In the previous decades, HIV/AIDS-related deaths further added to the isolation, the social stigma of which continues to prevail. The nature of grief is therefore more layered, based on social barriers such as whether the grief is even considered as valid, whether the bereaved has access to resources of support, as well as the presence legal and institutional that may add to the stigma or even declare queer relationships to be illegal. All these factors lead to disenfranchised grief **(Higgins, 2020),** where it is not socially acknowledged and mourned. It is also important to keep in mind that some participants have estranged relationships with their biological families. Studies of 1990s also identify that losing a partner to HIV-AIDS aggravates bereavement experience, especially with the associated social isolation and stigma experienced by men. Homophobia, with hostility and lack of support even from the medical staff preceding and even at the time of death. Both overt and subtle forms of homophobia prevents the bereaved from being able to share their loss and build or draw upon their social support systems. Thus, the results highlight the importance of building programs for the LGBTQIA+ community that are sensitive to the socio-cultural barriers that significantly influence the nature of grief and bereavement.

Draper et al. (2013) conducted a qualitative research to explore the belief systems of people who were recently bereaved. The researchers attended 46 funerals to gather information via semi-structured interviews of the participants (N = 37). From the data analysis, three dominant themes were established. The first theme centres around how the bereaved formulate the concept of death. People often try to conceptualise death by typically drawing upon their beliefs, such as religious, dualist, eco-spiritual, death-as-transition, and materialistic. The study results found that people's faiths tend to be diverse and mixed-and-matched, rather than fixed and uni-dimensional in nature, suggesting that it is often personalised in how they conceptualise death. The second theme extracted was of the process of actively making meaning of the loss, consistent with previous work that sees grief as a process of meaning-making and reconstruction **(Neimeyer, 2001).** This theme also blends with their broader and related beliefs on the possibilities of life after death, reincarnation, and possible reunion with the deceased. This larger process paves the way for a 'psycho-social transition' (Parkes, 1993), wherein they negotiate with both internal and external models of their belief systems to make sense of the loss. Finally, the third theme extracted was of continuing bonds, which is a core component of grief theories, referring to maintaining a sense of ongoing connection or relationship with the deceased while moving forward with one's life. It was revealed that bereaved maintain ongoing connections with the deceased in symbolic ways, such as tough objects and rituals, or through an emotional relationship with them. Thus, the

study allows insight into the experiences of the bereaved people, their typical experiences, as well as how they negotiate with them and navigate through them. These findings further the role of religious/spiritual beliefs in coping with loss.

Summary

This section of literature review identifies various social factors that impact the individual's as well as a community-specific bereavement experience. Gameon et al. (2024) found that community-specific collective trauma can span generations, and leads to poorer outcomes of bereavement. These factors include higher mortality rates, increased losses to addiction, losses extending beyond generations, etc. Broader social factors of unequal treatment and poorer healthcare access exacerbate the bereavement. As a result, members exhibit emotional and physical symptoms of bereavement, and may tend to socially withdraw. Despite these factors, each community develops their own specific psychosocial traditions too facilitate adaptive bereavement and provide social support.

Das et al. (2021) identified that there are gendered differences in coping with the loss of a child: men tend to internalise and suppress their grief; women exhibit more emotional and somatic symptoms. Financial losses, marital difficulties as a consequence of the loss, availability of social support influence the nature of bereavement. Women are also more likely to face familial and norm-influenced blame for the loss of a child.

Camacho et al. (2017) found that increased guilt level is a distinguishing factor of losses by suicide, and that this guilt often stems from a fear of being seen accountable. As a result, the bereaved is also less likely to openly engage in bereavement, and is less likely to see social support.

Cheung et al. (2017) identified that following a religion is associated with lowered depression scores, even in absence of bereavement, as religious communities provide support and help build rapport. Draper et al. (2013) demonstrated that religious faiths also allow for engaging in meaning-making, and reconstructing internal and external assumptions for adaptive functioning.

Bristowe et al. (2016) revealed that the nature of loss in queer relationships is aggravated by the degree of social acceptance, and being able to share the loss and whether it is seen as 'valid.' Legal and constitutional factors also shape the course of bereavement. Finally, a history of or loss due to HIV/AIDS adds to the degree of stigmatisation experienced.

Coping and Bereavement

Mitima-Verloop et al. (2021) conducted a research to explore the functions served by funerals and cultural rituals with regard to grief reactions. Funerals have been found to play a key role in facilitating transitions post the loss, and help the bereaved in adjusting to the absence of the deceased and start their recovery (Romanoff & Terenzio, 1998). Grief-related rituals particularly help the bereaved to cope after the loss has occurred, particularly within the three to twelve months after it, as it is during this period the social support that typically increases immediately after the loss starts to decrease (Castle & Phillips, 2003). The research conducted surveys on its participants (N = 558) and follow-up interviews (N = 316) to gather data. Several standardised scales were also used, such as the Traumatic Grief Inventory self-report version, the Positive and Negative Affect Scale, The Work and Social Adjustment Scale, the Funeral Evaluation Questionnaire (FEQ) (constructed by the researchers for the purpose of the study), and the Bereavement Activities Questionnaire. It was identified that the bereaved individuals tend to hold strong positive beliefs around the process of organising the funerals, even years after the loss, stating that it helps in the journey of processing the loss; however, no significant correlation was found on how it may influence the grief reactions. Thus, while the participants believe funerals to be useful in aiding processing of grief yet objectively the relationship between funeral perception and negative affect, grief reactions, and overall general functioning was not found to be statistically significant. Positive evaluations of the funerals was found to correlate with positive affect in the initial months, yet not with intensity of grief reactions. The researchers posit that this lack of a statically significant relationship stems from the fact that the participants of the study reported only positive evaluations to funerals and had had only mild to moderate grief reactions, thereby leading to a negligible variance that could help establish a significant relationship. With respect to grief-related rituals, such as lighting candles, visiting graves, etc, individuals engaged in both individual as well as collective rituals of grief (such as sharing stories, memorials, etc). This indicates that bereavement and meaning-making have

both private as well as collectivistic components. It was also demonstrated that the number of rituals performed were also found to be influenced by the nature of the death: higher number of rituals were performed when the death was more traumatic in nature, whereas seemingly less traumatic deaths, such as deaths due to natural causes, seemed to have less rituals performed. Performing collective rituals were not found to be significantly related to grief reactions; however, they may be performed to engage in public meaning-making (Possick et al., 2007). Thus, performing both individual and collective rituals were not found to be predictive of later grief reactions. Finally, the study results also yielded that help-seeking behaviors were not as prevalent as they were perceived to be, and were found to be less helpful as compared to grief rituals; they were found to be helpful only in the initial months. Thus, the results yield an intricate and layered role of funerals and related rituals in bereavement.

Fisher et al. (2020) conducted a research to assess the relationship between coping and whether the loss was sudden or anticipated (i.e. whether the bereaved was "prepared"), and its impact on the severity of grief, depression, and post-traumatic growth. The research sample consisted of 1,709 participants (N = 1709) people bereaved by accidents, combat, and suicide, and considered the time since death ranging between 6 months to twelve months. The researchers used the Brief COPE Inventory, the Inventory of Complicated Grief, the Patient Health Questionnaire, and the Post-Traumatic Growth Inventory - Short Form. Along with this, a survey assessing the demographics of the loss, such as possibility of death that was anticipated, reactions, circumstances around it, etc were also distributed to the participants. The study is based on three styles of coping, as given by Schneider et al. (2018): problem-focused or supportive coping (involving actively coping, and engaging in planning, relying on social support, using religion/spirituality as a moderator), active emotional coping (engaging in venting, humor, reframing one's beliefs around them event), and avoidant emotional coping (engaging in denial, self-blame, ruling on substances, disengaging behaviorally, etc). The study results found that avoidant coping had the poorest outcome as it worsened the intensity of grief and reduced post-traumatic growth. Problem-focused and active emotional coping did not yield a significant relationship with grief severity, but had significant correlations with post-traumatic growth. It was also demonstrated that there exists a significant correlation between cause of death and how it relates to the outcomes, regardless of coping style; i.e. it was found that deaths by suicide and accidents led to stronger grief severity, as compared to death in combat. This is associated with anticipation or preparedness of the possibility of death: people in combat (and their loved ones) are more likely to be prepared for the possibility of death, thereby reducing the grief severity in case of death. In contrast, in cases of loss of by suicide or accidents, due to the stigma around mental health, there is less preparedness in the case of suicide, and the unpredictability associated with death by accidents together cause stronger grief severity. With regard to coping style, different styles were differentially correlated with each variable : active emotional and supportive coping were found to be positively correlated with post-traumatic growth although no significant link was found between them and depression and grief severity. Avoidant coping was found to be negative correlated with post-traumatic group, and was strongly associated with depression, and linked with highest grief severity, especially when there was reduced preparedness of death. In conclusion, this research highlights that lowered avoidance is linked with improved outcomes and overall higher emotional expression, which lead to improved bereavement outcomes.

Kamp et al. (2018) convicted a study to assess the link between psychopathology, personality, and coping styles in elderly people who experienced bereavement hallucinations after the loss of their spouse (N = 175). The study did not refer to 'bereavement hallucinations' from a psychopathological intent, but from the lens of 'sensing the presence' of the deceased. These 'bereavement hallucinations' result from attachment to the deceased, and are a way of continuing bonds, even a type of searching behavior the bereaved engages in. The research employed the Coping Styles Questionnaire, the NEO-PI-R, the Inventory of Complicated Grief-Revised, the Harvard Trauma Questionnaire, and Beck's Depression Inventory-II. The research found that participants experiencing bereavement hallucinations are likely to experience increased emotional loneliness and symptoms of prolonged grief, depression, and PSTD, even years after their partner's death. This has been explained from the view that the bereavement hallucinations are how the bereaved creates a continued bond with the deceased, except that it is actually a result of loss-oriented process that interferes with grief resolution. Bereavement hallucinations result from a more subjective experience of isolation and yearning for the deceased, rather than from social isolation or lack of companionship. The study also identified variables that could predict bereavement hallucinations, and these include: having an avoidant coping style as it results in denial and avoidance of reality, which has detrimental consequences on grief resolution; longer marriages, as there is a likelihood of a stronger attachment and emotional bond; and having the personality trait of 'openness,' as it makes one more susceptible to sensory experiences. Detached coping was also

considered as a variable, however no significant correlation as established as it could also serve as adaptive in allowing the person to emotionally distance themselves and come to terms with the loss. Thus, an active approach towards resolving bereavement hallucinations must be taken to prevent the prolonging of bereavement experience.

Trevino et al. (2018) conducted a research to assess the challenges faced by bereaved individuals in their psychosocial functioning. For this purpose, caregivers of cancer patients (N = 162) were approached, and data was collected using the Bereavement Challenges Scale, Medical Outcomes Study Short Form 36, Prolonged Grief Disorder Scale, and the Structured Clinical Interview for the DSM-IV. Based on the Bereavement Challenges Scale, the results identified five fundamental domains where challenges were faced, and these include: with connecting with others, imagining a hopeful future, coping with the change that accompanies loss, accepting the occurrence of the loss, and the experience of the guilt that is sometimes associated wit the loss. It was demonstrated that grief intensity positively correlates with disruptions in typical social relationships, thereby amplifying the challenges present in maintaining relations with others. This was found to be consistent with previously established researches as well (Juth et al., 2015) that show that the bereaved often experiences social isolation after the loss. Resisting acceptance of the loss, associated change, and prolonged feelings of guilt were found to be associated with poorer mental health outcomes. They are also more likely to struggle with the task of continuing bonds. Further, it is likely that a bereaved individual may hold pessimistic worldview post the loss, as loss often challenges existing world-views. This can lower the hope one holds for the future. Thus, it was concluded that higher degree of challenges faced is likely to be associated with reduced quality of life, and more intense experiences of grief. It may also increase the chances of the bereaved meeting the criteria for a disorder as a result, such as depressive disorders.

Xiang et al. (2016) conducted a research to assess the relation among personality, styles of coping, and psychosomatic characteristics on people who had experienced the Wencuan earthquake. Participants (N = 181) consisted of two types of sub-groups: those who had lost loved one(s) to the earthquake (n = 79), and those who had not lost relatives to the earthquake (n = 102). The Revised NEO-PI, Coping Style Questionnaire, and Psychosomatic Situation Scale were utilised for the study. The results indicated that participants who had lost someone in the earthquake reported higher levels of low mood and loneliness, and were found to be more prone to fearfulness and negative emotions, as compared to people who had not lost relatives in the earthquake. Due to the loss, they were found to be less likely to be trustful and optimistic in their approach, and are less open to communicating with others and participating in social spheres. Bereaved individuals were found to have negative coping styles and engage in avoidance, self-blame, and fantasy, as compared to the non-bereaved participants. This correlates positively with their psychosomatic experiences; thus, different personality traits and styles of coping significantly influence psychosomatic experiences of both the bereaved and the non-bereaved. The experience of deeper grief left them to be more sensitive to the harsh realities of life, as a result of which, they are more prone to poorer mental health outcomes.

Doveling (2014) conducted an investigation to assess how the bereaved engage in emotional regulation and in seeking emotional support on social networking sites. A quantitative content analysis was conducted based on qualitative findings (2127 posts from 318 accounts) to gain insight into the motivations of engaging in online communication, what mechanisms are employed, and what purposes do they serve. The study results demonstrated that the bereaved may often reported that the people around them did not seem to be as emotionally understanding as they needed, and it is in such cases that they engaged in social media communication to fill the void left, and seek the emotional validation and understanding they did not perceive to have. Seeking social groups online of people who have been through similar experiences was found to also be contributing to a sense of cohesiveness and togetherness. Such spaces also allow engaging in exchanges and conversations around the bereaved and the experiences associated with loss, which furthers the feeling of community as well as continue their bonds with the deceased. Finally, the study also revealed that though the initial conversations on the groups centre around the loss, as the duration of the conversation increases, the topics discuss also begin to diversify, thereby creating a segue they facilitates restoration, empowerment, and emotional regulation through mutual support.

Summary

The section of the Literature Review explores the various elements that shape bereavement to be a heterogeneous experience. Mitima-Verloop et al. (2021) found that funerals, though not found to be significantly influencing the grief reactions, help in the subjective perception of the loss and facilitate in processing it. The bereaved engages in both individual and public grief-related rituals, indicating that meaning-making is both a private and a public practice.

Fisher et al. (2020) identified that problem-focused and active emotional coping correlate positively with post-traumatic growth; avoidance coping correlates negatively with it, and is more likely to lead to depressive symptoms. Coping style is also influenced by the cause of death, anticipation, and preparedness: unpredictability and suddenness of loss are associated with poor grief outcomes. Xiang et al. (2016) found that loved ones of those lost in the Wencuan earthquake (a sudden, unpredicted, and traumatic loss) were more likely to experience low mood, avoidance, and engage in negative coping styles. They were found to be more prone to self-blame and psychosomatic symptoms, as well as withdrawing socially.

Kemp et al. (2018) found that yearning and a subjective experience of isolation, as well as a long-term and secure attachment with the deceased, can lead to bereavement hallucinations, which leads to poorer outcome grief outcomes, prolonged bereavement, loss-oriented coping, and increased chances of developing a pathology. Similarly, Trevino et al. (2018) demonstrated that bereavement can disrupt social interactions, cause intense emotional experiences, and lead to pessimistic thinking style. Grief can tend to prolong feelings of any guilt present, and increase resistance to accepting the loss, thereby reducing the quality of life.

Doveling et al. (2014) found that the bereaved tend to seek emotional connection to cope, and that they may seek it online in social media groups of people with similar experiences. This creates a sense of community, and promotes restoration, and allows them to later diversity topics of discussion as well.

Culture and Grief

Fang (2018) conducted a comparative qualitative study to investigate the differences in bereavement across three cultures: Britain, Japan, and China. The researchers placed special emphasis on the role of motivation and language, and how they are embedded in a social context. 'Motivation' was conceptualised from a sociological lens wherein its function as a 'social device' or a 'social tool' that is used to form a consistent narrative of our environment and navigate through day-to-day experiences in a manner that is coherent and consistent **(Blum & McHugh, 1971).** In the context of bereavement, motivation refers to the drive that is present within the bereaved which pushes them to move forward with the loss. Since loss brings a shift in one's self identity and often changes their worldview, the bereaved must be motivated to re-start making sense of the world around them, as well as draw upon the social world around them for cues and support. Similarly, language was studied from the lens of culturally shared symbols that are used for constructing meaning and forming narratives. As a result of loss, the bereaved often engages in a negotiation with the outer world to make sense of the event and re-orient and restore themselves to life after it (Fang, 2018). The qualitative approach, as well as drawing on existing data-sets, allows for a rich comparison of cultural narratives. The study findings revealed that this process is influenced by norms and expectations of the social groups of the bereaved's life. Here, differences contrasting individualistic and collectivistic cultures prominently influence bereavement: it was found that in Britain, due to the predominant individualistic style, the bereaved are more likely to focus on regaining independence and autonomy. In fact, even the deceased is remembered as being autonomous before their demise. While social support was offered to the bereaved, the nature of the culture is such that the bereaved would politely turn it down, and would prefer to draw upon their own resources in order to be more self-sufficient in coping. Here, they reported often turning to spiritual or religious domains, as opposed to other meaningful social bonds. This is not to say that social support is not a strong coping resource: the family of the bereaved was also found to be a strong support that would aid in getting back on their feet and redefine themselves to be confident and capable. Cultural differences were also observed with regard to the process of dying as well as the event of death: in Britain, knowledge of medical procedures, naturalistic processes, and individualism were used to regain balance after the destabilisation that follows after watching the deceased lose bodily autonomy and functioning. In China, family values and interdependence influence bereavement. Traditional values, influenced by dominating Confucian philosophy, emphasise on reciprocity and sharing responsibilities as a form of offering and exchanging support, especially when the loss destabilises a person's reciprocal relationships. The aim is to maintain the family homeostasis

even during bereavement, so as to maintain the reciprocal relationship with both the deceased and the family, and to continue to exist within the family-focused domain. The bereaved tries to continue with their share of responsibilities with the family members while re-orienting their relationships. Here, long-drawn traditions allow them to maintain that relationship with the deceased. Thus, motivation here is understood to be socially constructed and influenced by social structures and the meanings ascribed, thereby situating bereavement in a social domain as well. Japan offers an interesting blend of interdependent and individuality, where the bereaved draws upon both social interdependence as well as personal resources to cope with the loss. The bereaved ensures to retain social ties, even during grieving, as grief is seen as a phenomenon that can potentially disrupt interpersonal relations, thereby going against the cultural norm of cohesion and interdependence. At the same time, the individual go through the process of grieving and restoration in their personal spaces as well. Fang's (2018) work thus allows a strong comparison among the three cultures. This allows for further understanding of cultural influences on bereavement and grief-related interventions.

Diaming et al. (2016) investigated the nature of prolonged grief in Chinese (N=32) and Swiss (N=33) bereaved parents, following the diagnostic criteria given by ICD-11. The investigation was carried out via interviews, and rating scales were provided to assess general health. Various standardised scales were also employed: the Prolonged Grief Disorder Scale and the Inventory of Complicated Grief-Revised were used to assess bereavement, Beck's Depression Inventory (Short Form), Post-Traumatic Growth Inventory (PTGI), Sense of Coherence Scale–Revised, and Social Axioms Survey, which was used to assess 5 basic culturally embedded social beliefs. Cross cultural analysis indicated that that Swiss parents exhibit a stronger preoccupation with their deceased child and continue 'seeing' them or feeling their presence in the form of images, thoughts, and sound, more than their Chinese counterparts. Their preoccupation is loss-oriented where it's around the connection with the child. Chinese parents, on the other hand, were found to be comparatively more likely to experience grief-related impairment in functioning, increased levels of depressive symptoms, as well as a more profound sense of meaninglessness. Their grief was more restoration-oriented as it would focus on regaining functioning, identity, and social relations. In both samples it was found that life satisfaction was found to be an important moderator that buffers grief. The study also found cultural differences in the symptom patterns of Prolonger Grief Disorder. These differences are resultant of both cultures belonging to different broad cultural categories: Swiss parents, being part of Europe, follow a more individualistic orientation whereas Chinese parents are more collectivistic in their approach. Thus, the Swiss parents emphasise on the connection with the child whereas the Chinese parents focus on the inter-dependent and social aspects of themselves. Gender-wise, Swiss mothers demonstrated more signs of prolonger grief than the Swiss fathers. This could be attributed to a comparatively stronger bond between the mother and the child in individualistic cultures, as compared to the father and child bond, as the father is typically expected to keep busy with their professional sides (Bergstraesser et al.,2015). However, the Swiss fathers were found to experience more impairment in social domains, probably because women are more likely to seek social support. However, within the Chinese sample, no significant sex difference in coping was found, thereby indicating that loss of a child affects both the parents equally without the moderating influence of gender. It can also be concluded that cultural expectations and gender roles create a significant difference in bereavement. Finally, it was also found that intra-personal demographic variables such as age, gender, etc influenced bereavement among Swiss parents, whereas culture-oriented and loss-related factors influenced bereavement among Chinese parents. Sense of coherence as a protective factor was present more significantly among the Swiss parents than in Chinese parents, as it is more of an individualistic construct. Social axioms assessed (such as social cynicism, fate controls social complexity), only social cynicism was found to the linked to higher prolonger grief symptoms, and was found to be present significantly only in the Chinese sample. Living conditions was found to be significant in both samples as dissatisfactory living conditions can reinforce the cycle of grief

Roberts et al. (2012) conducted a research to gauge into the social and cultural factors, such as lack of support, agreement with social norms, younger maternal age, and gender, that influence and are associated with Perinatal Grief. The research was conducted on the women (N = 335) of rural Chhattisgarh who had experienced stillbirth, and the data had been compared it with those who had not. For the same, the researchers conducted structured interviews to gather data, and various scales were also employed : Social Provision Scale, Shortened Ways of Coping Revised Scale, and Perinatal Grief Scale. The study demonstrated that still-birth was often preceded by increased consumption of tobacco, lower levels of education, increased health issues, and a higher number of sonograms conducted during pregnancy (Mishra et al., 2005). Medical records obtained from the population hospitals also demonstrated that participants who experienced labor and birth complications (such as anaemia, breech presentations, etc) were more likely to opt for Cesarean sections and

stillbirths. As expected, perinatal grief scores were significantly higher for women who had experienced childbirth, however the scores of participants who hadn't experienced stillbirths still scored higher than expected than those who had not, possibly due to higher levels of vicarious empathy or due to imagined bereavement (in case they were to experience it). Participants who had experienced stillbirth, or lost a child even without stillbirth, did not report any significant attenuation of grief with time, thereby indicating that grief may significantly impact a person for years after the loss of their children, especially in the absence of social support. Participants who also reported abandonment by their family, which reduced their social support, were found to have poorer grief outcomes (Roberts et al., 2011). It was also revealed that progressive social norms also reduce grief experience, This is could stem from a rejection of traditional norms and beliefs, such as early marriage and son preference. It was also reflected that maternal age is a significant veritable in stillbirth, and that it is inversely proportionate to perinatal grief. This could be explained by older women having more authority in the family unit, and thereby have more power and access to social support. In conclusion, the results highlight that an interplay of personal and social factors influence the experience of grief in the Indian context, and this holds implications for long-term consequences, such as depression, chronic grief, social isolation, etc.

Summary

This section summarises the various cultural factors that shape the course of bereavement. Fang's (2018) study revealed that individualistic cultures tend to focus more on regaining autonomy and independence post the loss. People belonging to individualistic cultures prefer to cope privately, and often turn down social support. They tend to engage in loss-oriented coping, tend to have increased preoccupations with the deceased and feel their presence more (Diaming et al., 2016)

Collectivistic cultures prioritise interdependence, social cohesion and reciprocal relationships, and grief is experienced as a collectivistic experience wherein support is offered and accepted to maintain social homeostasis (Fang, 2018). They are more likely to experience grief-related impairment, but engage in restoration-oriented coping so as to regain functioning. Grief has poorer outcomes if the woman is abandoned by the family and experiences less social support (Roberts et al., 2012).

In cultures where there is a blend of individualistic and collectivistic cultures, such as in Japan, grief can be perceived as a disruption to social cohesion. While the bereaved accepts social support, they also engage in coping in their personal spaces so as to maintain social harmony.

Objectives and Hypotheses

Objectives

Based on aim of the present study, the objectives for research are as follows:

1. To investigate the influence of the four humor styles on the existential loss/emotional needs experienced as part of bereavement among target population.

2. To investigate the influence of the four humor styles on the guilt, blame, and anger experienced as part of bereavement by the target population.

3. To investigate the influence of the four humor styles on the pre-occupation experienced as part of bereavement among target population.

4. To investigate the influence of the four humor styles on the total bereavement outcomes among target population.

5. Coping humor will play a significant role as moderating variable between humor styles and existential loss/emotional needs experienced as part of bereavement among target population.

6. Coping humor will play a significant role as moderating variable between humor styles and guilt, blame, and anger experienced as part of bereavement among target population.

7. Coping humor will play a significant role as moderating variable between humor styles and pre-occupation with the deceased experienced as part of bereavement among target population.

8. Coping humor will play a significant role as moderating variable between humor styles and total bereavement outcome among target population.

Hypotheses

Based on the objectives of the present study, the following hypotheses have been made:

1. Humor styles will significantly predict existential loss/emotional needs experienced as part of bereavement among target population.

2. Humor styles will significantly predict guilt, blame, and anger experienced as part of bereavement among target population.

3. Humor styles will significantly predict pre-occupation with the deceased experienced as part of bereavement among target population.

4. Humor styles will significantly predict total bereavement outcome among target population.

5. To assess the potential role of coping humor as a moderating variable between humor styles and existential loss/emotional needs experienced as part of bereavement among target population.

6. To assess the potential role of coping humor as a moderating variable between humor styles and guilt, blame, and anger experienced as part of bereavement among target population.

7. To assess the potential role of coping humor as a moderating variable between humor styles and pre-occupation with the deceased experienced as part of bereavement among target population.

8. To assess the potential role of coping humor as a moderating variable between humor styles and total bereavement outcomes among target population.

Chapter 3 : Method

Participants

The present research has been conducted in India, and data was collected exclusively from Indian nationals. Participants were approached via convenience and snowball sampling methods. Data was collected via Google Forms, and the link was posted and circulated on various social media platforms (such as Facebook groups targeting Indian population, Linkedin, and Instagram).

A total of one hundred twenty-two (N = 122) participants from various cities across India completed the form, with equal gender ratio (males = 61, females = 61) of the participants. Population of ages 18 to 35 years (M = 25.14 years, SD = 3.57 years) were targeted for the data collection. To be eligible to fill the survey, participants must have experienced the loss of a loved within two years preceding the conduction of survey.

Measures

Humor Styles Questionnaire

The Humor Styles Questionnaire (HSQ) was developed by Martin et al. (2003) to assess humor styles. The scale has four domains : affiliative humor, self-enhancing humor, aggressive humor, and self-defeating humor. Initially, the scale initially consisted of 60 items, however it was refined to comprise of thirty-two items, with each domain consisting of eight items each. It is rated on a 7-point Likert scale (1 = totally disagree, 2 = moderately disagree, 3 = slightly disagree, 4 = neither agree nor disagree, 5 = slightly agree, 6 = moderately agree, and 7 = totally agree). Certain items are reverse scored (1, 7, 9, 15, 16, 17, 22, 23, 25, 31).

The scale was cross-validated to ascertain its robustness using two auxiliary samples (N = 452, male - 177, female = 275). The first sample comprised of 300 undergraduate psychology students(n - 300, male = 131, female = 169, mean age = 19.7 years), and the second sample comprises of 152 adults participants (n = 152, male = 46, female = 106). The coefficients of congruence for the two sexes was found to be > 0.97, indicating a strong factorial invariance.

Further, a confirmatory factor analysis was performed on the data collected from all the participants (N = 1195, male = 470, female = 725), confirming the reliability of the four-factor structure of the inventory. All four scales were found to have adequate internal reliability, with the Cronbach alpha values falling within the range of 0.77 - 0.81. Low inter-correlations among the dimensions was established. Further, the test-retest reliability was conducted on the sample on whom the initial item pool was tested (N = 117), and the values were found to be 0.85, 0.81, 0.80, and 0.82.

Coping Humor Scale

The Coping Humor Scale (CHS) was developed by Martin and Lefcourt (1983) with the aim to assess how humor functions as a moderator between stressors and mood. It is a seven-item, self-report instrument, and is rated on a four-point Likert scale: from 1 (strongly disagree) to 4 (strongly agree). The scale is suitable for the adolescent and adult populations.

The CHS demonstrates moderate internal reliability, with its Cronbach alpha values ranging between 0.60 and 0.70 across various settings. It has found to be positively correlated with various constructs of dispositional optimism (Korotkov & Hannah, 1994), extraversion (Korotkov & Hannah, 1994), stability of self-concept (Kuiper and Martin 1993), self-esteem (Kuiper and Martin 1993), realistically cognitive appraisals (Kuiper et al.,1993) , and a sense of coherence (Korotkov & Hannah, 1994), and negatively correlated with neuroticism (Korotkov & Hannah, 1994) and dysfunctional attitudes (Kuiper and Martin 1993).

Bereavement Experience Questionnaire-24

Guarnaccia and Hayslip (1998) developed the revised version of the Bereavement Experience Questionnaire (Demi, 1984; Demi & Schroeder, 1987, 1989), originally a sixty-seven item scale. The revised version was developed using data from bereaved adults (N = 437) who had experienced loss within the past two years. The data was analysed through exploratory and confirmatory factor analysis, and was cross-validated based on the results of an independent sample of bereaved adults (N = 297). For the entire scale, the alpha internal consistency reliability was found to be 0.91. The BEQ-24 has twenty-four items, with a three-factor structure : existential loss/emotional needs, guilt/blame/anger, and preoccupation with thoughts of the deceased. The items are rated on a four-point Likert scale, with the anchors being never (1), sometimes (2), often (3), and almost always (4).

Procedure

For collection of data, quota sampling method was employed to locate participants. It was used as a specific sub-group of people were considered for population based on the inclusion criteria that : they must be Indian nationals, must fall within the age range of 18-35 years, and must have experienced the loss of a loved one to death in the past two years.

Those who opted to complete the survey were initially presented with an introductory session which outlined the purpose of the study, eligibility criteria, and their participant rights. To proceed, they were required to select a checkbox that confirmed their eligibility of all the criteria. Since meeting all the criteria was compulsory, those who did not meet the criteria would not be able to proceed with the form. Following this, another section highlighting their rights was presented: that their participation is voluntary, that they consent to the use of the collected data collected for research purposes, that they have the right to withdraw from the research at any time for any reason and that their data will then be destroyed, and that their identity will remain confidential so as to guarantee full anonymity. A mandatory checkbox obtained their full consent for the same.

Basic demographic details of age and gender, with the name being an optional, was collected. The survey consisted of three standardised psychometric instruments : the Humor Styles Questionnaire, the Coping Humor Scale, and the Bereavement Experience Questionnaire - 24. Each instrument was presented in separate sections, maintaining the original format and structure of each survey in the format of the Google Form so as to ensure consistency and accuracy.

Chapter 4 : Results

The current study conducted the Humor Styles Questionnaire, Coping Humour Scale, and the Bereavement Experience Questionnaire - 24 on the participants (N = 122), with a 1:1 gender ratio of men and women. To meet the criteria of filling the survey, participants were required to be of Indian nationality, fall within the age range of 18-35 years (*Mean* = 25.14, *SD* = 3.58), and have had lost a loved one in the preceding two years.

Stepwise Multiple Linear Regression

For the analysis, Stepwise - Multiple Linear Regression was used on SPSS. All four humor styles (affiliative, self-enhancing, aggressive, and self-defeating) had their effects studies on each domain of the BEQ-24 (existential loss/emotional needs; guilt, blame, and anger; and pre-occupation) individually as well as with the total bereavement score

Humor styles and existential loss/emotional needs

Table 1.
Model Summary for Stepwise Multiple Linear Regression Humor Styles and Existential Loss/Emotional Needs

				Model Summary					
Model	R	R²	Adjusted R²	Standard Error of Estimate	R Square Change	F Change	df1	df2	Sig. F Change
1	- 0.301a	0.090	0.083	5.253	0.090	11.932	1	120	<0.001
2	0.365b	0.133	0.118	5.151	0.042	5.827	1	119	0.017

* Affiliative Humor (predictor)
** Affiliative and Self-Defeating Hummers (predictor)
Dependent variable : existential component

The existential component of the BEQ-24 was then considered the DV for the statistical analysis, and again, the Stepwise Multiple Linear Regression was applied. For the first model affiliative humor was found to be statically correlated with the DV, with the correlation coefficient being -0.301. This indicates that a negative correlation is present between affiliative humor and existential component, which means that increased use of affiliative humor is linked with a reduced impact on existential crisis. The R² value was found to be 0.090, indicating that 9% variance within the existential component can be explained solely by the use of affiliative humor. However, there is a decrease in the adjusted R² value . The SEE was 5.253, which demonstrates that there is an average deviation of the observed scores of the existential component from the predicted scores, which suggests that variables other than affiliative humor can influence the existential experiences. The F-value was found to be 11.932 at df = 120, and a strong significant value of p = <0.001 indicates that affiliative humor strongly influences the existential component, rather than the scores being resultant of chance factors.

The stepwise multiple regression also yielded a second model which combined affiliative and self-defeating humors as a significant predictor of existential component. It found that together, there is a stronger correlation of 0.365, indicating that both significantly correlate with existential aspects, and stronger than just when affiliative humor is considered. There was an increase in the R² value as well to 0.133, meaning that together they account for 13.3% variance. However, this increase is relatively small, which suggests that affiliative humor in itself is a stronger predictor of the existential component. The adjusted R² value is 0.118**.** The value of SEE was found to have decreased slightly to 5.151, which indicates that the addition of self-defeating humor reduces the margin of error, and indicates that the observed values of the existential component are close to the predicted values. The F-change value was found to be 5.827 (at df = 119) with p - 0.017 (which is significant at 0.05), indicating that this change is statistically significant, yes relatively less than as seen in Model 1.

Humor styles and guilt, blame, and anger

Table 2.

Model Summary for Stepwise Multiple Linear Regression Humor Styles and Guilt, Blame, and Anger associated with the Deceased

					Model Summary				
Model	R	R²	Adjusted R²	Standard Error of Estimate	R Square Change	F Change	df1	df2	Sig. F Change
1*	-0.266a	0.071	0.063	5.957	0.071	9.163	1	120	0.003
2**	0.334b	0.111	0.096	5.851	0.040	5.398	1	119	0.022

* Affiliative Humor (predictor)
** Affiliative and Self-Defeating Hummers (predictor)

The conduction of Stepwise Multiple Linear Regression on guilt, blame, and anger associated with the deceased. The first model found that affiliative humor in itself is correlated with the DV, and that a negative correlation of -0.266 is present, which indicates a weak but negative correlation. This means that increased use of affiliative humor can reduce the emotional dysregulation associated with the loss, though not particularly strongly. An R² value of 0.071 indicates that affiliative humor alone accounts for 7.1% variance in emotional regulation, and when adjusted, yields an adjusted R² value of 0.063. This value is slightly lower than R². The value of the Standard Error of Estimate (SEE) is 5.957, which is a relatively high score, thereby suggesting that while the model predicts average deviation from the predicted values, it does not account for high precision. The F Change value resulted to be 9.163 and the p-value or the Significant F change value is 0.003, which falls below the standard thresholds for both 0.05 and 0.01, indicating that affiliative humor is a significant predictor of the DV, and that the presence of affiliative humor significantly improves the DV outcomes.

The second model added self-defeating humor as a second predictor, thereby creating the model to illustrate the combined use of affiliative humor and self-defeating humor and their combined relationship with guilt, blame, and anger. The model found that a correction of 0.334, which is a negative correlation, indicating than when considered together, both humor styles significantly reduce the emotional dysregulation. The R² value increased in the second model to 0.111, indicating that an 11.1% variance in emotional dysregulation is explained by the combined presence. This increase implies that self-defeating humor improves the ability to predict the emotional dysregulation associated with the loss. Similarly, the value of the adjusted R² also increases to 0.096 from 0.063 (Model 1), suggesting that the presence of self-defeating humor improves the model outcomes, although only relatively small amount. The SEE decreases slightly in Model 2 to 5.851, which indicates that the accuracy of the predictions of the outcome has improved slightly. The degrees of freedom was considered 119 as another IV had been added. The F-change value is 5.398, and the p-value or the significant F change value is 0.022, a statistically significant improvement, which indicates that self-defeating humor does significantly predict emotional dysregulation.

Humor styles and pre-occupation with the thoughts of the deceased

Table 3.

Model Summary for Stepwise Multiple Linear Regression Humor Styles and Preoccupation with the Deceased

					Model Summary				
Model	R	R²	Adjusted R²	Standard Error of Estimate	R Square Change	F Change	df1	df2	Sig. F Change
1*	-0.203a	0.041	0.033	4.483	0.041	5.135	1	120	0.025

* Affiliative Humor (predictor)

Table 2. illustrates the model summary of the stepwise multiple linear regression on the DV 'pre-occupation with the deceased.' It indicates that a negative yet weak correlation is present between affiliative humor and pre-occupation with death, meaning that as affiliative humor increases, pre-occupation with the deceased reduces. The coefficient of determination (R^2) illustrates that the regression accounts for 0.042 or 4.1% of the variance in the DV, and that after adjusting, the adjusted R^2 value is 0.033. The low value of R^2 indicates that while affiliative humor influences pre-occupation with the deceased, other factors also influence the variability. The standard error of estimate is 4.483, which indicates that the observed values deviate within an average range from the regression line. The F- change value is 5.145, which indicates that the inclusion of the predictor / independent variable significantly improves the model. For this model, the degrees of freedom considered is 120, as there is only one variable with a significant correlation with the DV. The P value for the F-change test is 0.025, which falls below the threshold of 0.05, indicating that affiliative humor significantly predicts that DV.

Humor styles and total bereavement outcome

Table 4.
Model Summary for Stepwise Multiple Linear Regression Humor Styles and Total Bereavement Outcome

Model Summary									
Model	R	R^2	Adjusted R^2	Standard Error of Estimate	R Square Change	F Change	df1	df2	Sig. F Change
1	- 0.273a	0.075	0.067	14.885	0.075	9.692	1	120	0.002
2	0.330b	0.109	0.094	14.668	0.034	4.579	1	119	0.034

* Affiliative Humor (predictor)
** Affiliative and Self-Defeating Hummers (predictor)
Dependent variable : Total Bereavement Outcome

Finally, stepwise multiple linear regression was also applied to the total bereavement outcome, based on the combined score of each of the three domains. The first model yielded the result that a negative correlation of -0.237 is present between afflictive humor and total bereavement outcomes, indicating that as affiliative humor increases, bereavement scores reduce, implying that affiliative humour allows for better bereavement outcomes. The coefficient of determination (R^2) was found to be 0.075, indicating that a 7.5% variance in scores is explained by only affiliative humor. The adjusted R^2 score is 0.067, which is slightly less than R^2. The SEE for this model was found to be 14.885, a moderate to high score, which represents that affiliative humor in itself does not fully explain bereavement outcomes. Te F-change value was found to be 9.692 (at df = 120), and the p value = 0.002, falling below the threshold of 0.01, indicating that affiliative humor strongly correlates with bereavement outcomes, rather than it being influenced by chance factors.

The second model combined self-defeating humor with affiliate humor to determine whether together they act as predictors of total bereavement outcome. It was found that the correlation increased to 0.330, suggesting that self-defeating humor increased the correlation with the DV. The R^2 value increased to 0.109, meaning that when taken together, the two types of humor together explain 10.9% variance in the DV, which is an improvement in the model's explanatory power. The adjusted R^2 value was also found to have increased to 0.094, strengthening the notion that self-defeating humor does play a significant role in predicting outcomes, but that its contribution is modest. The SEE value decreased slightly to 14.668, indicating that together the model's predictive value increases. However, because the decrease is relative less, it may only slightly improve the predictive value. The F-change value was found to be 4.579 (at df = 119), with p = 0.035, which is significant at the level of 0.05. This indicates that the improvement in outcomes is statistically significant, but still weaker than when affiliative humor alone is used.

Moderation Analysis of Coping Humor

A moderation analysis was run to assess whether Coping Humor is a statistically significant moderator between the Humor Styles and the domains of bereavement. Moderation Analysis was run individually for each pair of Humor Style and a domain of bereavement. The analysis was conducted by setting the threshold of significance at α = 0.05. The results are presented as follows.

Coping Humor as a moderator between Affiliative Humor Style and bereavement domains

Table 5.
Moderator Analysis of Coping Humor between Affiliative Humor and Existential Loss/Emotional Needs

Model Summary						
R	R²	MSE	F	df1	df2	p
0.2225	0.0495	230.3071	2.0480	3.0000	118.0000	0.1006

Model						
	coefficient	Standard Error of Estimate	t	p	LLCI	ULCI
constant	4.3981	14.2701	0.3082	0.7584	-23.8427	32.6389
Affiliative Humour	-1.4349	0.2934	-4.8916	0.0000	-2.0153	-0.8545
Coping Humor	0.7646	0.6814	1.1219	0.2642	-0.5858	2.1150
Int_1	-0.5053	0.1837	-2.7503	0.0071	-0.8687	-0.1419

This model illustrates the output of the moderation analysis conducted to check for the statistical significance of Coping Humor between Affiliative Humor and Existential Loss.Emotional Need that are associated with bereavement. The obtained values of R and R² are .2225 and .0495, and the MSE value obtained is 230.3071, which is an extremely high value, indicating that this model is a poor-fit model. The F-statistic obtained is 2.0480, and the p-value obtained is .1006, which is not statistically significant, indicating that Coping Humor does not play a signifiant moderating role between the two variables.

Table 6.
Moderator Analysis of Coping Humor between Affiliative Humor and Guilt, Blame, and Anger

Model Summary						
R	R²	MSE	F	df1	df2	p
0.2508	0.0629	37.3256	2.6414	3.0000	118.0000	0.0526

Model						
	coefficient	Standard Error of Estimate	t	p	LLCI	ULCI
constant	23.7495	13.4051	1.7717	0.0790	-2.7962	50.2953
Affiliative Humour	-2.7043	1.7663	-1.5310	0.1284	-6.2021	0.7935
Coping Humor	-0.3469	0.7051	-0.4920	0.6236	-1.7432	1.0494
Int_1	0.0023	0.0258	0.0882	0.9298	-0.0489	0.0535

This model illustrates the moderation analysis conducted to check for the statistical significance of Coping Humor between Affiliative Humor and Guild, Blame, and Anger associated with bereavement. The R value obtained is .2508, and the R2 value obtained is .0629. Along with the moderate value of MSE of 37.3256, this indicates that the model is a poor fit. The value obtained for the F-statistic is 2.6414, and the p-value obtained is .0526, which crosses the threshold of significance. This indicates that Coping Humor is not a statistically significant moderator between Affiliative Humor and Guilt, Blame, and Anger.

Table 7.
Moderator Analysis of Coping Humor between Affiliative Humor and Pre-occupation with the Thoughts of the Deceased

Model Summary						
R	R²	MSE	F	df1	df2	p
0.2444	0.0597	20.0440	2.4976	3.0000	118.0000	0.0631

Model						
	coefficient	Standard Error of Estimate	t	p	LLCI	ULCI
constant	3.6209	14.9052	0.2429	0.8085	-25.8955	33.1372
Affiliative Humour	0.1908	0.3492	0.5463	0.5859	-0.5008	0.8823
Coping Humor	0.8256	0.7596	1.0869	0.2793	-0.6786	2.3299
Int_1	-0.0159	0.0177	-0.8993	0.3703	-0.0508	0.0191

This table provides the output results of the moderation analysis of Coping Humor between Affiliative Humor and Pre-occupation with the Thoughts of the Deceased. The R value of .2444, whereas the R² value of .0597 indicates a relatively low variance in the outcome variables. The Mean Squared Error (MSE) was found to be 20.0440. The F-statistic of this overall model is 2.4976, which is comparatively low, and the p value is 0.0631, which exceeds the threshold of 0.05, indicating that the overall model results are not significant. This indicates that Coping Humor is not a significant moderator between Affiliative Humor and Pre-occupation with the Thoughts of the Deceased, and does not significantly influence the outcomes.

Table 8.
Moderator Analysis of Coping Humor between Affiliative Humor and Total Bereavement Outcome

			Model Summary			
R	R²	MSE	F	df1	df2	p
0.1226	0.0150	237.9216	0.3523	3.0000	118.0000	0.7649

Model						
	coefficient	Standard Error of Estimate	t	p	LLCI	ULCI
constant	15.6487	30.7541	0.5086	0.6117	-45.3111	76.6085
Affiliative Humour	-0.9386	1.8273	-0.5136	0.6082	-4.5586	2.6813
Coping Humor	1.0741	1.4621	0.7344	0.4641	-1.8216	3.9698
Int_1	-0.1884	0.3273	0.5756	0.5660	-0.8361	0.4594

This table illustrates the output results of the moderation analysis of Coping Humor between Affiliative Humor and Total Bereavement Outcome. The value of R obtained is .1226, and the value of R² obtained is .0150. The MSE value obtained is a high 237.9216, indicating that this model is a poor-fit. The F-statistic obtained is .3523, and the p-value obtained is .7649, which renders the results to be statistically not significant. Thus, Coping Humor is not a significant moderator between Affiliative Humor and Total Bereavement Outcome.

Coping Humor as a moderator between Self-Enhancing Humor Style and bereavement domains

Table 9.
Moderator Analysis of Coping Humor between Self-Enhancing Humor and Existential Loss/Emotional Needs

			Model Summary			
R	R²	MSE	F	df1	df2	p
0.1623	0.0263	30.0447	1.0641	3.0000	118.0000	0.3672

Model						
	coefficient	Standard Error of Estimate	t	p	LLCI	ULCI
constant	9.7258	10.2314	0.9506	0.3438	-10.5352	29.9868
Self-Enhancing Humour	0.2100	0.2969	0.7073	0.4807	-0.3779	0.7979
Coping Humor	0.7533	0.5542	1.3592	0.1767	-0.3442	1.8508
Int_1	-0.0155	0.0153	-1.0089	0.3151	-0.0458	0.0149

This table represents the statical results moderation analysis of Coping Humor between Self-Enhancing Humor and Existential Loss/Emotional Needs. Here, the R value is .1623, and the R² value is .0263, which are weak values indicating poor correlation and variance between variables. The MSE value for this interaction is quite large, as interpreted from the obtained value of 30.0447. The F-statistic value is 1.0641, which is a weak outcome, and the p-value is 0.3672, which indicates that the model is not statistically significant. Thus, Coping Humor is not a significant moderator between Self-Enhancing Humor and Existential Loss/Emotional Needs.

Table 10.

Moderator Analysis of Coping Humor between Self-Enhancing Humor and Guilt, Blame, and Anger

Model Summary						
R	R²	MSE	F	df1	df2	p
0.1974	0.0390	37.3336	1.5951	3.0000	118.0000	0.1943

Model						
	coefficient	Standard Error of Estimate	t	p	LLCI	ULCI
constant	14.5305	11.4052	1.2740	0.2052	-8.0549	37.1158
Self-Enhancing Humour	-0.0303	0.3309	-0.8915	0.9273	-0.6856	0.6251
Coping Humor	0.5306	0.6178	0.8588	0.3922	-0.6928	1.7539
Int_1	-0.0039	0.0171	-0.2301	0.8184	-0.0378	0.0299

This table represents the interaction between Self-Enhancing Humor, and the Guilt, Blame, and Anger associated with the loss as moderated by Coping Humor. The value of R here is .1974, and the value of R² is 0.0390, both of which are small values, representing very low correlation and variance between the variables. The value of MSE is 37.3336, which is an exceptionally large value, indicating a significantly poor fit model. The F-statistic is 1.5951, which is again a low value, and the p-value is .1943, which crosses the threshold of significance of 0.05. Thus, Coping Humor is not a significantly moderating variable between Self-Enhancing Humor and Guilt, Blame, and Anger associated with the loss.

Table 11.

Moderator Analysis of Coping Humor between Self-Enhancing Humor and Pre-occupation with the Thoughts of the Deceased

Model Summary						
R	R²	MSE	F	df1	df2	p
0.1346	0.0181	20.9308	0.7252	3.0000	118.0000	0.5389

Model						
	coefficient	Standard Error of Estimate	t	p	LLCI	ULCI
constant	4.4212	8.5397	0.5177	0.6056	-12.4898	21.3323
Self-Enhancing Humour	0.2227	0.2478	0.8986	0.3707	-0.2680	0.7134
Coping Humor	0.6026	0.4626	1.3027	0.1952	-0.3134	1.5186
Int_1	-0.0132	0.0128	-1.0348	0.3029	-0.0386	0.0121

This table represents the interaction of Self-Enhancing Humor and Pre-occupation with the Thoughts of the Deceased, as moderated by Coping Humor. The R value was found of .1346, and R² value is of .0181, both of which are relatively weak, indicating weak correlation and variance. The MSE of this model is 20.9308, which is a high number, and indicates a poor model. The F-statistic value was yielded to be .7252, which is a low value, and the p-value of this model was found to be .5389, which exceeds the significant threshold of 0.05, indicating that this model is not significant. Thus, Coping Humor is not a significant moderator between Self-Enhancing Humor and Pre-Occupation with the deceased.

Table 12.
Moderator Analysis of Coping Humor between Self-Enhancing Humor and Total Bereavement Outcome

Model Summary						
R	R²	MSE	F	df1	df2	p
0.1672	0.0280	236.7187	1.1315	3.0000	118.0000	0.3393

Model						
	coefficient	Standard Error of Estimate	t	p	LLCI	ULCI
constant	28.6775	28.7189	0.9986	0.3201	-28.1938	85.5488
Self-Enhancing Humour	0.4024	0.8333	0.4829	0.6301	-1.2478	2.0526
Coping Humor	1.8864	1.5556	1.2126	0.2277	-1.1942	4.9670
Int_1	-0.0326	0.0430	-0.7586	0.4496	-0.1179	0.0526

Here, the statical analysis of Coping Humor as a moderator between Self-Enhancing Humor and Total Bereavement Outcome is evaluated. The R value is .1672, and the R² value is .0280, both of which are low values, indicating a weak correlation and variance. The MSE value was found to be 236.7187, which is exceptionally large. The F-statistic is 1.1315, which is again a weak value. The p-value yielded the value of .3393, and crossed the significance threshold, therefore Coping Humor is not a stistcically significant moderator between Self-Enhancing Humor and Total Bereavement Outcome.

Coping Humor as a moderator between Aggressive Humor Style and bereavement domains

Table 13.
Moderator Analysis of Coping Humor between Aggressive Humor and Existential Loss/Emotional Needs

Model Summary						
R	R²	MSE	F	df1	df2	p
0.2263	0.0512	29.2778	2.1222	3.0000	118.0000	0.1011

Model						
	coefficient	Standard Error of Estimate	t	p	LLCI	ULCI
constant	27.8657	9.3705	2.9738	0.0036	9.3095	46.4219
Aggressive Humour	-0.4083	0.3491	-1.1697	0.2445	-1.0995	0.2829
Coping Humor	-0.1674	0.4929	-0.3395	0.7348	-1.1435	0.8087
Int_1	0.0139	0.0180	0.7704	0.4426	0.4426	0.0496

This table is the statistical output table of the results of the moderation analysis of Coping Humor between Aggressive Humor and Existential Loss/Emotional Needs. The value of R is .2263, indicating weak correlation between the variables, and the value of R² is .0512, indicating weak variance, and taken together with the low value of MSE is 29.2778, indicates that this is a poor fit model. The value of F-statistic is 2.1222, which can be interpreted as moderate, but the value of p falls above 0.05 as it was found to be .1011, therefore is not significant. Thus, Coping Humor is not a significant moderator between Aggressive HUmor and Existential Loss/Emotional Needs.

Table 14.
Moderator Analysis of Coping Humor between Aggressive Humor and Guilt, Blame, and Anger

Model Summary						
R	R²	MSE	F	df1	df2	p
0.1979	0.0392	37.3256	1.6038	3.0000	118.0000	0.1922

Model						
	coefficient	Standard Error of Estimate	t	p	LLCI	ULCI
constant	18.2447	10.5803	1.7244	0.0873	-2.7072	30.1966
Aggressive Humour	-0.1344	0.3941	-0.3411	0.7337	-0.9149	0.6461
Coping Humor	0.2798	0.5565	0.5027	0.6161	-0.8223	1.3819
Int_1	0.0018	0.0204	0.0867	0.9311	-0.0385	0.0421

In this output result, the value of R is .1979, indicating a weak correlation between the variables, and the value of R² is .0392, indicating weak variance. The value of MSE is 37.3254, which is a moderate size, but alongside the low values of R and R², it indicates a poor-fit model. The F-statistic is a low 1.6038, and the p-value is .1922, which indicates that it is not significant. Therefore, Coping Humor is not a significantly moderating variable between Aggressive Humor and Guilt, Blame, and Anger.

Table 15.

Moderator Analysis of Coping Humor between Aggressive Humor and Preoccupation with the Thoughts of the Deceased

Model Summary						
R	R²	MSE	F	df1	df2	p
0.1816	0.0330	20.6138	1.3412	3.0000	118.0000	0.2644

Model						
	coefficient	Standard Error of Estimate	t	p	LLCI	ULCI
constant	20.6591	7.8627	2.6275	0.0097	5.0887	36.2295
Aggressive Humour	-0.3412	0.2929	-1.1649	0.2464	-0.9212	0.2388
Coping Humor	-0.2014	0.4136	-0.4686	0.6273	-1.0204	0.6177
Int_1	0.0136	0.0151	0.8989	0.3705	-0.0164	0.0436

This table represents the statistical analysis of Coping Humor as a Moderator between Aggressive Humor and Preoccupation with the Thoughts of the Deceased. This model has poor correlation and poor variance due to low values of R (R = .1816), and R² (R² = .0330). The MSE value is moderate, as interpreted from the value 20.6138, and indicates a poor-fit model when interpreted in conjunction with R and R². The F-statistic yielded a value of 1.3412, which is a low value, and the p-value is .2644, which falls beyond the threshold of 0.05, indicating that the model is not significant. Thus, Coping Humor is not a statistically significant moderator between Aggressive Humor and Preoccupation with the Thoughts of the Deceased

Table 16.

Moderator Analysis of Coping Humor between Aggressive Humor and Total Bereavement Outcome

Model Summary						
R	R²	MSE	F	df1	df2	p
0.1979	0.0392	37.3256	1.6038	3.0000	118.0000	0.1922

Model						
	coefficient	Standard Error of Estimate	t	p	LLCI	ULCI
constant	18.2447	10.5803	1.7244	0.0873	-2.7072	39.1966
Aggressive Humour	-0.1344	0.3941	-0.3411	0.7337	-0.9149	0.6461
Coping Humor	0.2798	0.5565	0.5027	0.6161	0.8223	1.3819
Int_1	0.0018	0.0204	0.0867	0.9311	-0.0385	0.0421

This table represents the statistical findings of Coping Humor as a moderating variable between Aggressive Humor and Total Bereavement Outcome. The R value is .1979, and the R² value is .0392, both indicating low correlation and low variance respectively. This indicates that this model is a poor-fit model, as understood by both R and R² values, as well as with the moderate value of MSE being 37.3256. The F-statistic value is 1.6038, which is a low value, and the p-value is statistically not significant, as it is .1922. Thus, Coping Humor is not a statistically significant moderating variable between Aggressive Humor and Total Bereavement Outcome.

Coping Humor as a moderator between Self-Defeating Humor Style and bereavement domains

Table 17.
Moderator Analysis of Coping Humor between Self-Defeating Humor and Existential Loss/Emotional Needs

Model Summary						
R	R²	MSE	F	df1	df2	p
0.1974	0.0390	29.6553	1.5944	3.0000	118.0000	0.1944

Model						
	coefficient	Standard Error of Estimate	t	p	LLCI	ULCI
constant	17.3054	9.1512	1.8911	0.0611	-0.8164	35.4273
Self-Defeating Humour	0.0649	0.2826	0.2296	0.8188	-0.4947	0.6245
Coping Humor	0.0131	0.4793	0.0273	0.9783	-0.9361	0.9623
Int_1	0.0021	0.0145	0.1456	0.8845	-0.0267	0.0309

This table demonstrates the statical analysis of Coping Humor as a moderator between Self-Defeating Humor and Existential Loss/Emotional Needs. Here, the R value is .1974, and the R² value is .0390. Both are low values, indicating poor correlation and poor variance of the values respectively. These, combined with the MSE value of 29.6553, indicate a poor-fit model. The F-statistic value is 1.5944, which is also a low value. The p-value for this model is .1944, which crosses the threshold of significance of 0.05, thereby indicating that this model is not significant. Thus, Coping Humor is not a significant moderator between Self-Defeating Humor and Existential Loss/Emotional Needs.

Table 18.

Moderator Analysis of Coping Humor between Self-Defeating Humor and Guilt, Blame, and Anger

Model Summary						
R	R²	MSE	F	df1	df2	p
0.2241	0.0502	36.0872	2.0791	3.0000	118.0000	0.1067

Model						
	coefficient	Standard Error of Estimate	t	p	LLCI	ULCI
constant	13.8296	10.2076	1.3548	0.1781	-6.3842	34.0433
Self-Defeating Humour	0.0848	0.3152	0.2689	0.7885	-0.5394	0.7089
Coping Humor	0.1916	0.5347	0.3584	0.7207	-0.8672	1.2504
Int_1	0.0012	0.0162	0.0726	0.9423	-0.0309	0.0333

Here, the R value obtained is .2241, which indicates a weak correlation. The R² value of .0502 indicates a weak variance, and the moderate MSE value of 36.0872, together indicate a poor-fit model. The F-value obtained is 2.0791, with is a moderate value, however since p-value crosses the threshold of 0.05 as its value obtained is .1067, it renders the model statistically not significant. Thus, Coping Humor is not a significant moderator between Self-Defeating Humor and Guilt, Blame, and Anger.

Table 19.

Moderator Analysis of Coping Humor between Self-Defeating Humor and Pre-Occupation with the Thoughts of the Deceased

Model Summary						
R	R²	MSE	F	df1	df2	p
0.1238	0.0153	20.9902	0.6120	3.0000	118.0000	0.6085

Model						
	coefficient	Standard Error of Estimate	t	p	LLCI	ULCI
constant	14.1090	7.6990	1.8326	0.0694	-1.1371	29.3551
Self-Defeating Humour	-0.0415	0.2377	-0.1746	0.8617	-0.5123	0.4293
Coping Humor	-0.0375	0.4033	-0.0930	0.9261	-0.8361	0.7611
Int_1	0.0043	0.0122	0.3509	0.7263	-0.0199	0.0285

This table illustrates the statical analysis of Coping Humor as a moderator between Self-Defeating Humor and Pre-Occupation with the Thoughts of the Deceased. The model is a poor-fit model, as interpreted from the low values of R and R² (R = .1238, and R² =.0153) and the moderate value of MSE (MSE = 20.9902). The F-statistic value obtained is .6120, which is a low value. The p-value of .6085 crosses the threshold of significance, thereby rendering this model not significant. Thus, Coping Humor is not a statically significant moderator between Self-Defeating Humor and Pre-Occupation with the Thoughts of the Deceased.

Table 20.
Moderator Analysis of Coping Humor between Self-Defeating Humor and Total Bereavement Outcome

Model Summary						
R	R²	MSE	F	df1	df2	p
0.1929	0.0372	234.4643	1.5206	3.0000	118.0000	0.2128

Model						
	coefficient	Standard Error of Estimate	t	p	LLCI	ULCI
constant	45.2440	25.7314	1.7583	0.0813	-5.7113	96.1993
Self-Defeating Humour	0.1081	0.7946	0.1361	0.8920	-1.4653	1.6816
Coping Humor	0.1672	1.3478	0.1241	0.9015	-2.5018	2.8362
Int_1	0.0076	0.0409	0.1856	0.8513	-0.0734	0.0885

Finally, this table illustrates the statistical analysis of Coping Humor as a moderator between Self-Defeating Humor and Total Bereavement Outcome. The R value obtained is .1929, the R² value obtained is .0372, and the MSE value obtained is 234,4643. This indicates a poor correlation and variance, and an extremely high MSE value, with together indicate that this model is a poor-fit model. The F-value obtained is 1.5206, and the p-value obtained is .2128. Since the obtains value of p crosses 0.05, this model is not statistically significant. Thus, Coping Humor is not a statically significant moderator between Self-Defeating Humor and Total Bereavement Outcome.

Chapter 5 : Discussion

The aim of the research was to study whether there is a correlation between humor styles (Martin et al., 2003) and bereavement styles, with Coping Humor being a potential moderator, using the Humor Styles Questionnaire (Martin et al., 2003), Coping Humor Scale, and Bereavement Experience Questionnaire. Stepwise linear regression between the four humour styles and each of the bereavement questionnaire variables, as well as a moderator analysis were conducted.

Humor Styles and Bereavement Experience

As per the results, the following has been concluded : that affiliative humor correlates with the domain of 'pre-occupation' with the deceased, and that affiliative humor and a combined model of affiliative and self-defeating humours correlate with guilt, blame, and anger; existential; and total bereavement outcomes. The stepwise linear regression thereby excluded other variables and combinations. Thus, our hypotheses remain partially confirmed: that there is a significant correlation between humor styles and bereavement outcomes, however only some humor styles have been found to show a significant correlation

The results of the study found that affiliative humor, when used independently, and a combination of affiliative and self-defeating humors negatively correlate with existential loss/emotional needs. This indicates that the more a person engages in affiliative humor or employs a combination of self-defeating and affiliative humors, the less intense is the perception existential loss and surge of emotional needs. Such a person is less likely to experience existential distress and increased need for emotional support as a consequence of bereavement.

The domain of existential loss/emotional needs is characterised by a profound sense of meaningless that follows loss. Due to its devastating nature, loss has the ability to shatter one's fundamental worldview (Calhoun, 2016), and creates a disruption in how one experiences oneself and in how one relates to others. The broad philosophy on which one's life is based on has now been shattered. Thus, the bereaved is left with a sense of meaningless, as indicated by one of the items of the domain: *"felt life has no meaning."* The bereaved now faces the task of re-adjusting to the loss by engaging in the process of active meaning-making, particularly of their religious and spiritual beliefs (Cait, 2004).

As a direct and indirect result of tis loss, the bereaved also experiences an increased need for emotional support, as indicated by the item: *"Felt a need to be emotionally close to someone."* This explains why the affiliative humor is more likely than other styles of humour to be correlated with reducing the existential impact and mangling the increased need for emotional support. Affiliative humor is associated with using humor in a social context to enhance social/interpersonal relations and cohesion (Martin et al., 2003). It has been found to increase social support (Lefcourt, 2001). One's successful resolution of the existential crisis is significantly influenced by the social support received (Calhoun & Tedeschi, 2006; Dyregov, 2003-2004). This involves having a space to talk about the loss, to experience support. It also creates the opportunity to explore these questions around existential crisis in a safe space. Conversely, social isolation has been found to be detrimental to bouncing back after loss (Kemp et al., 2018). Keeping worries to oneself, and not disclosing them, has been found to increase the anxiety and loneliness (Delmar et al., 2013). A study by Neupane (2022) on the existential crisis faced by young adults (ages 18-30) identifies that social support (during bereavement) can prevent one from feeling disheartened and experiencing overwhelming sadness.

Research (Nheung et al., 2017) has found that holding religious/spiritual beliefs buffers the impact of bereavement. One reason behind this is that such spaces provide the individual with social support communities. Bereavement can cause a sudden loss of or break in one's faith in religion or spirituality (Tedeschi & Calhoun, 2006), as indicated clearly by one of the items in the domain: *"lost my religious faith."* One begins to question the possibility of life after death, the possibility of re-uniting with the deceased (Draper et al., 2013), and even on one's own mortality (Tedeschi & Calhoun, 2006). One thus also grapples with the reality of one's own mortality. The presence of a "social guide" (Tedeschi & Calhoun, 2006) or support system help them manage this , and navigate through the crisis.

Loss can shatter a person's sense of meaning of the world around them; thus, they are required to engage in the task of meaning-making. Reconstruction and meaning-making of the loss is a key feature of Neimeyer's (2001) Meaning-Making theory. The individual must engage in the task of making sense of the loss, and assimilating this new narrative into their lives.

The combined model of self-defeating and affiliative humor has also been found to buffer the impact of loss. Martin et al. (2003) identified that individuals who engage in an increased use of affiliative humor are more likely to use self-defeating humor as well. This is done to put others at ease. Contrary to prevailing perceptions, self-defeating humor is not all maladaptive, and can even serve an adaptive purpose. It has been found that self-defeating humor provides a fresh perspective of being able to look at the "funny side" of an event, thereby reducing negative affect and promoting well-being. It has also been found to foster strong interpersonal relations, and help build social support (Heintz & Rich, 2018). It is only the pervasive and excessive use of self-defeating humor that is detrimental to one's well being and self-esteem, which could explain why the independent use of self-defeating humor has not been found to be significantly correlated with this domain of bereavement. Rawlings and Findlay (2013) also found that self-defeating humor correlates positively with openness and extraversion, and correlates negatively with neuroticism.

A person's increased need for emotional support encourages them to seek the comfort of others around them, which builds on their social support resources. This adds to creating an 'upward spiral' of a positive feedback loop that buffers adversity, increases resilience, and reduces social avoidance (Frederick, 1998), as per her Broaden and Build Theory.

Humor Style and Guilt, Blame, and Anger

Guilt, blame, and anger are emotional consequences that follow the loss of a loved one, and are considered typically normal to experience (Guarnaccia & Hayslip, 1998). In fact, anger is even part of one of Kubler-Ross' stages of grief (1969). However, when these emotions are experienced in an intense and prolonged manner, and are not resolved, they become maladaptive in nature and impair daily functioning.

The present study conducted a Multiple Linear Stepwise Regression to identify which humor styles and models correlate significantly with the Guilt, Blame, and Anger experienced as part of bereavement. The results yielded that affiliative humor independently, as well as a combined model of affiliative humor and self-defeating humor significantly and negatively correlate with the emotions of guilt, blame, and anger that are experienced around the loss. This indicates that increased tendencies to engage in affiliative humor or in a combination of both affiliative and self-defeating humours are significantly associated with a reduction in guilt, blame, and anger that are experienced towards oneself or others in relation to the loss. This significant reduction of emotions reduces psychological distress and allows better emotional coping with the loss.

The social orientation of affiliative humor increases the chances of the bereaved to have a strong social support (Martin et al., 2003; Lefcourt, 2001). It strengthens interpersonal bonds, which enhance one's psychological well-being (Martineau, 1972). Strong social relations create a channel for communication of supportive messages, wherein one messenger communicates encouragement to be emotional open to the other person (Burleson, 1994). In the cases of bereavement, the bereaved is provided a space to express their emotional overwhelm. Thus affiliative humor helps create a safe and non-threatening environment for emotional expression and emotional receptivity.

Bereavement is sometimes accompanied by guilt and anger that is both intrapersonal and interpersonal in nature. Anger directed towards oneself :*"Felt angry at myself,"* is usually rooted in a perception of *'not having done enough' or having said/behaved in a certain undesirable manner. The anger at the deceased : "Felt angry at the deceased person"* can stem from several reasons, such as from previous conflicts or a sense of abandonment that follows the death, and these reflect an unfinished business with the deceased (Root, 2012). At times, the bereaved may even hold themselves, or someone else, accountable for the death: *"Thought I contributed to the death,"* and "*Felt that some person was responsible for the death."* Here, there is a sense of helplessness that follows over the perceived responsibility or preventability (Bugen, 1977) over the death. These are often accompanied by maladaptive cognitions, wherein a person wishes they had done things differently, which leads to anger directed towards self: *"thought there were some very real reasons why I felt guilty," "felt guilt about things I did/said before the death," "felt angry at myself."* These perceptions of regret and self-blame can cause the person to experience intense emotions, and leads to poor resolution of grief (Weinberg, 1995; 1994). The perception of support thus helps mitigate intense emotional responses and the psychological distress. Since affiliative humor has been found to be negatively correlated with reduced psychological distress, its influence on mitigating strong emotional responses in bereavement is understandable.

Self-defeating humor has originally been classified as a maladaptive humor style (Martin et al., 2003), however recent evidence has challenged this perspective. It has been found that self-defeating humor can enhance the psychological well-being of people who have low self-esteem and are prone to experiencing negative affect (Heintz & Ruch, 2018) as it allows one to see the "humorous side" of things. It has also been found to correlate positively with adaptive forms of humour (Ruch & Heintz, 2013). These factors could provide insight into why self-defeating humor has been found to be part of a model that correlates negatively with the overwhelming emotions associated with bereavement.

Self-defeating humor has been found to correlate positively with extraversion and openness, and negatively with neuroticism (Rawlings & Findlay, 2013). Despite the nature of its content being self-deprecatory, it holds a social component as well, wherein it helps reduce interpersonal tensions and elicit laughter (Greengross & Miller, 2011). This social dimension could partly explain its inclusion in the predictive model. Additionally,

it also acts as a "defensive buffer" (Martin et al., 2003) which helps in the regulating emotions (Samson & Gross, 2014). Rawlings and Findley (2013) found that self-defeating hum**or** correlates negatively with neuroticism, thereby adding to the evidence that it could help in emotional regulation.

Importantly, Brown (2019) distinguishes between self-defeating humor and self-disparaging humor. Self-disparaging humor involves laughing at oneself in a social context or allowing one to be 'the butt of jokes' for the sake of social amusement but without the presence of an underlying low self-esteem, and in a controlled amount. This allows one to 'laugh at themselves' and 'not take things too seriously.' Thus, the benefits of self-defeating humor in a controlled and moderated use, yet inconclusive findings in academic discourse could explain why it was not found to be significant independently, but in a combination with affiliative humor.

Thus, the combination of affiliative and self-defeating humors can be conceptualised as emotionally regulatory and socially oriented. Both have a social component, with helps in building a strong social network, and both have been found to manage and mitigate strong emotionality. These factors can, therefore, be assumed to support the statistical findings.

Humor Style and Pre-occupation with Preoccupation with Thoughts of the Deceased

The statistical analysis conducted to assess whether Humor Styles correlate with levels of pre-occupation with the thoughts of the deceased found that only affiliative humor has emerged to be a statistically significant negative correlate of this variable. This suggests that as levels of affiliative humor increase, the intensity of the preoccupation decreases—i.e. the more a person engages in affiliative humor, the lower the pre-occupation with the deceased is. This indicates that a person's tendency to engage in spontaneous and light-hearted humor so as to amuse others, facilitate interpersonal harmony, and reduce overall relational strains helps in reducing the overall pre-occupation with the thoughts around the deceased.

Loss of a loved one is an intense and multi-dimensional experience, and can have a profound impact on a person. This loss tends to create a void in the person's life. Thus, the bereaved often engages in proximity-seeking behaviors where they try to "find" the deceased, as reflected by Item 2: *"Found myself searching for the one who died."* There is an effort to search for and recreate the presence of the deceased, as demonstrated by Item 14: *"Spent time looking at deceased's pictures, clothing, belongings*." Some bereaved even report "experiential stimulations," a term given by Markman and McMullen (2003), which refers to when the bereaved can sense the presence of the deceased guiding them (Item 10). These experiences can sometimes take the form of distorted perceptions, such as illusions around the deceased, or even hallucinations related to them (Field & Filanosky, 2010). The underlying reason is that the bereaved tries to maintain a bond with the deceased so as to maintain a connection with them and to provide comfort to oneself through these continuing bonds(Klass, 1993; Stroebe et al., 1992) through these continuing bonds.

Humor is one of the resources that have been found to reduce stress and foster emotional resilience (Wilson et al., 2022), and enhance social relations (Miczo et al., 2009). The affiliative humor style, in particular, has been associated with reduced psychological distress, greater social support, and improved communication outcomes (Fritz, 2020). It is socially oriented, helps generate social cohesion, and builds strong interpersonal relations with other people.

Bereavement is often accompanied by a decline in social support (Stroebe & Stroebe, 1987) as one typical tends to isolate themselves. However, use of affiliative humor creates sources of support that buffer a person against adversity, and help them bounce back. Social support allows for a form of restoration-oriented coping (Stroebe & Schut, 1999) that helps a person regain their identity, reorient back to their life and continue functioning. Preoccupation, conversely, is a more loss-oriented approach. While both orientations are required to for the resolution of grief, restoration-oriented coping involves actively putting efforts to regain a sense of normalcy, and thus has improved outcomes. Moreover, social support gained from affiliative humor has been found to act as a moderator that helps mitigate the impact of loss on psychological health (Folkman, 2001; Mikulincer & Shaver, 2008; Stroebe &Stroebe, 1987).

Of all the four styles of humor, only affiliative humor has been found to be a significant correlate. Aggressive humor style, which is characterised by hostility and sarcasm at other's expense, has been found to yield mixed results (Fritz, 2020), thereby rendering it an unreliable and inconsistent humor style for coping with bereavement. Self-defeating humor, which involves self-disparagement for the sake of social approval,

has been associated with lower social support and increased psychological distress (Fritz, 2020), indicating that context and frequency of use are key moderators that influence its benefits. Thus, aggressive and self-defeating humors may not provide consistent results, and this is possibly why no maladaptive humor style was found to statically correlate significantly with this variable.

Self-enhancing humor, which involves maintaining a humorous outlook even in the face of adversity, has been found to be associated with health outcomes, reduced psychological distress, and greater social support. However, it is primarily associated with self-regulation and emotional management, and comparatively less with garnering and building social support. It can be assumed that it is to its inward-focus, as opposed to a social focus, that it was not found to be a significant correlate with preoccupation with the deceased.

Bereavement humor allows for recovery from grief and build social support (Wilson et al.,2022), and is prevalent across several cultures (Lund et al., 2009; Donnelly, 1999). Higher levels of proximity-seeking behaviors tend to prolong the bereavement period (Boelen et al., 2006; cf. Field et al., 2003). The task of the bereaved is to fully adjust to the loss, and a significant indicator of this is when the intense inner relationship to the deceased is severed, and the bereaved accepts the final nature of the loss (Rubin, 1985). With this, the preoccupation with the deceased reduces. The bereaved no longer searchers for the lost person or seeks their representations for comfort. This leads to the resolution of grief.

Coping Humor as a Moderator

The present study was also conducted with the objective of exploring whether coping humor is a significantly moderating variable between Humor Styles and domains of bereavement experience. A moderator is a third variable that influences the strength and direction of the association between the IV and the DV (Hoyt et al., 2006). It was hypothesized that coping humor will act as a statistically significant moderator between the individual humor styles and each domain of bereavement experience i.e. the degree of coping humor used would significantly influence (enhance or diminish) the association and direction between humour styles and bereavement outcomes.However, of the 16 models of moderation analyses ran revealed that Coping Humor is not a statically significant moderator for the interaction between these two sets of variables. Thus, all the hypotheses were rejected. These findings were contradictory to our expectations, as several studies have found coping humor to be a significant moderator in reducing low mood (Nezu et al., 1988), moderating stress (Overholser, 1992), improving immunological outcomes (Porterfield et al., 1987).

In all the output tables of moderation analysis, it was observed that the values of R, R2, and F-statistic were too low, and that the MSE values were too high, indicating that the models were poor fit. Thus, p-value of the models always crossed the threshold of significance. These could contribute to why Coping Humor was not found to be a statistically significant moderating variable. These reasons are further elaborated.

Correlation is a statistic that establishes statically significant relationship between two variables, and specifies the strength of that relationship (Goodwin & Leech, 2006). The stronger the correlation value (denoted by r), the stronger the relationship between the two variables. In the present study, the values of r were consistency low across all the moderation analyses, indicating that the correlation between the two variables was low, and that they were only weakly related. Values of correlation go down when there is low variability in the observations, which results from a smaller sample size. Similarly, presence of outliers and type of sample selected also significantly influence correlation value (Goodwin & Leech, 2006). It can be assumed that the sample size was too small and had significantly deviant outliers, which could have influenced the results.

Linked to correlation is the concept of coefficient of determination (R^2), which measures the how much variance within the dependent variable can be predicted from the values of independent variable. A low value of R^2 (nearing 0) indicates that the independent variable does not account for a meaningful variability of the model, whereas values of R^2 that are closer to 1 implies that it is the independent variables that significantly influenced the values of the dependent variable in the model (Minium & King, 2011). The value of R^2 tends to go down in cases of small sample size, high errors of measurement, and due to residual variance, which in this case could be that it is not the humor styles that influence bereavement outcomes but other factors which were unaccounted for (Cornell & Berger, 1986). Thus, it can assumed that the present model was a poor-fit, with high errors of measurement, and unaccounted-for factors.

Measurement Standard Error (MSE) refers to the standard errors, or the amount of errors, that are present in a data set as a result of poor reliability. In the present study, we observed during the moderation analyses that the MSE values obtained fell within categories of moderate to high. This is often a result of poor reliability of the instruments used, lower number of items within those tests, non-normal distribution, and a high variability within the scores (Minium & King, 2011).

The F-Statistic tests whether there are significant differences present between the means of groups. Associated with the F-Statistic is the p-value which indicates whether the results are statistically significant or not. A threshold of significance is set to indicate the demarcation of whether results are statically significant; in this case, the alpha value was set at 0.05. Thus, any value that falls below 0.05 ($p < 0.05$) would be considered statistically significant. In the present study, none of the p-values obtained fell below 0.05 ($p > 0.05$), indicating that in none of the moderation analyses was Coping Humor a significant moderator. The p-value also evaluates whether the F-statistic is significant or not, and it is based on whether the p-value is significant. There are various factors which lead to low p-values, such as: small sample size, low effect size (as a result of a small sample size), increased residual variance, poor reliability of the instrument used, and the presence of measurement errors (Cohen, 1988).

The present study is explanatory in nature, and one of the first in the field of humor and grief, and the theoretical base for the study is limited in nature. Based on the aforementioned discussion, we can assume that several factors probably led to the Coping Humor not being established as statistically significant in the present research. It is likely that the same size was too small, that outliers were that skewed the data set, and that the reliability of the tests were not strong enough to produce statistically significant results here. It is also likely that there are several other factors which influence bereavement, and not just Humor Styles, and that this assumption influenced the results. Thus, it is recommended to consider a larger sample size for future researches. It is also possible that there may be other variables present that act as moderating variables, which have not been considered for the present study. Future researchers may draw on the existing theoretical basis to study other such moderators to strengthen the base for the correlation between the two variables.

General Discussion and Conclusion

The aim of the present study was to investigate the influence of the four humor styles, as given by Martin et a. (2003) on bereavement outcomes, with coping humor as a moderator. The study found that affiliative humor positively correlates with improved bereavement domains and outcomes, and that in some domains, a model of affiliative and self-defeating humors improve bereavement outcomes. Coping Humor, however, was not found to be a significant moderating variable.

Limitations and Suggestions

The present study assessed the role of different humor styles on coping humor and bereavement outcomes. As the first of its type, it lays the foundation for further research in this area.

The first key limitation is that the research has been conducted exclusively on Indian nationals and is embedded in the Indian socio-cultural context, therefore has limited cross-cultural generalisability. India in itself homes diverse cultures and subcultures, religions, and practices, each with distinct and unique perspectives and practices around use of humor as well as bereavement. Thus, even within the Indian context, generalisability of the outcome may vary based on both regional and cultural variations. The second limitation arises from the lack of longitudinal data, meaning that research only captures a snapshot of the relationship between variables, and not whether humor influences the trajectory of grief, such as whether use of humor or certain types may shorten or prolong coping timelines.

Due to the sensitive nature of the research as well as the societal perceptions around the use of humour in sensitive contexts, date study does not determine whether participants even used humor to cope with the loss. Thus, the research assesses only trait-level humor - the general types of humor styles of an individual - and not their active application in the context of bereavement. It is important to keep this distinction in mind as a humorous dispositional does not necessarily correlate with whether humor was actually used as a coping mechanism, and vice-versa.

It is also important to keep in mind that the subjective nature of bereavement and its perception in mind. Because bereavement is a personal experience, an objective conceptualisation of it is neither plausible nor suitable. Thus, individual differences of perception of one's own humor usage and bereavement experience challenges the standardisation of the research.

Moreover, the present study also doesn't take into account the specific time period since the loss, and broadly only considers the first two years i.e. it doesn't differentiate between relatively recent and distant losses. Nor does it keep in mind the type and nature of loss, or the relationship with the deceased, factors which can be hypothesized to be influencing humor styles. Finally, as a pioneering research, the data does not assess other variables that could potentially be relevant, such as age, gender, occupation, caste, religion, etc. The sample consistent of only men and women, thereby limiting its generalisability to trans- and non-binary people.

Suggestions

The present study opens up several avenues for further research so as to build upon and enhance the applicability of the findings. The first recommendation is to expand the cultural context to improve cross-cultural generalisability as well as facilitate studying cultural comparisons. Additionally, future researches are recommended to focus on specific subcultures within India to assess potential within-culture differences as well. Another key suggestion is to conduct longitudinal research to account for whether humor styles could influence the temporal nature of bereavement: such as whether it remains an effective coping mechanism, fluctuations in its effectiveness, etc.

Future studies should also investigate whether humor is actually used as an active coping mechanism during bereavement, and if so, then assess its nature and impact. However, it would be important to keep in mind that the participants are answering honestly rather than answering in a socially desirable manner that may arise from the stigma around use of humor in sensitive and unconventional circumstances. Future inquiries are recommended to also keep in mind factors of loss and grief in mind, such as whether certain components of the type and nature of loss generate use of humor (or lack thereof) differently. Te nature and trajectory of bereavement is influenced by the nature of the loss, and it is important to consider whether specific differences exist. In a similar vein, it must also be the centre of focus whether the use of humor is adaptive or if its used as a maladaptive defence mechanism.

Finally, it is important to keep in consideration demographic variables, such as how age at both the time of loss and at the time of study, caste, gender, religious beliefs, etc influence the relationship between humor and bereavement. Gender-based differences, as well as extension of the research to trans-people and non-binary identities must be explored so as to ensure inclusivity.

By addressing this scope, future research can expand and refine the knowledge on the role of humour styles and its influence on bereavement processes, and contribute to the academia, as well as enhance the generalisation and applicability of the outcomes.

Implications

The present study is the first to assess the role of humor styles on bereavement outcomes. By bridging the literature gap, it contributes significantly to academia by broadening how humor functions as a coping mechanism in the context of bereavement, including its influence on the emotional component of guilt and anger, preoccupation with the deceased, and the existential needs.

The first key implication of the study is on potential application in grief therapy and counselling wherein humor-based interventions can be used and tailored to optimise adaptability and coping. It can also refine the grief counselling by recognising how humor may facilitate or hinder coping and regulation. It can also be extended to identify people who are at-risk for severe and intense grief responses based on humor styles. This allows for early intervention and the building of coping resources.

At a broader level, it contributes to the de-stigmatising of the use of humor in unconventional circumstances, where the use of humor may be perceived as inappropriate. The present research can contribute to initiating a shift in perspective and pave way for acceptance of unorthodox forms of coping mechanisms.

The research also contributes to non-Western literature, and paves the way for exploring potential variations in the humour functions across cultures as well as within the diverse Indian sub-culture as well.

Thus, the present research expands the current understanding on humor, contributes to academic literature, opens doors for discourse around the existing societal attitudes, as well as has significant applications in therapy and mental health.

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Appendix

Appendix A
Humor Styles Questionnaire

1. I usually don't laugh or joke around much with other people.

2. If I am feeling depressed, I can usually cheer myself up with humor.

3. If someone makes a mistake, I will often tease them about it.

4. I let people laugh at me or make fun at my expense more than I should.

5. I don't have to work very hard at making other people laugh -- I seem to be a naturally humorous person.

6. Even when I'm by myself, I'm often amused by the absurdities of life.

7. People are never offended or hurt by my sense of humor.

8. I will often get carried away in putting myself down if it makes my family or friends laugh.

9. I rarely make other people laugh by telling funny stories about myself.

10. If I am feeling upset or unhappy I usually try to think of something funny about the situation to make myself feel better.

11. When telling jokes or saying funny things, I am usually not very concerned about how other people are taking it.

12. I often try to make people like or accept me more by saying something funny about my own weaknesses, blunders, or faults.

13. I laugh and joke a lot with my friends.

14. My humorous outlook on life keeps me from getting overly upset or depressed about things.

15. I do not like it when people use humor as a way of criticizing or putting someone down.

16. I don't often say funny things to put myself down.

17. I usually don't like to tell jokes or amuse people.

18. If I'm by myself and I'm feeling unhappy, I make an effort to think of something funny to cheer myself up.

19. Sometimes I think of something that is so funny that I can't stop myself from saying it, even if it is not appropriate for the situation.

20. I often go overboard in putting myself down when I am making jokes or trying to be funny.

21. I enjoy making people laugh.

22. If I am feeling sad or upset, I usually lose my sense of humor.

23. I never participate in laughing at others even if all my friends are doing it.

24. When I am with friends or family, I often seem to be the one that other people make fun of or joke about.

25. I don't often joke around with my friends.

26. It is my experience that thinking about some amusing aspect of a situation is often a very effective way of coping with problems.

27. If I don't like someone, I often use humor or teasing to put them down.

28. If I am having problems or feeling unhappy, I often cover it up by joking around, so that even my closest friends don't know how I really feel.

29. I usually can't think of witty things to say when I'm with other people.

30. I don't need to be with other people to feel amused -- I can usually find things to laugh about even when I'm by myself.

31. Even if something is really funny to me, I will not laugh or joke about it if someone will be offended.

32. Letting others laugh at me is my way of keeping my friends and family in good spirits.

Appendix B
Coping Humor Questionnaire

I often lose my sense of humor
I have often found that my problems have been greatly reduced when I tried to find something funny in them
I usually look for something comical to say when I am in tense situations
I must admit life would probably be easier if I had more of a sense of humor
I have often felt that if I am in a situation where I have to cry or laugh, it's better to laugh
I can usually find something to laugh or joke about even in trying situations
It has been my experience that humor is often a very effective way of coping with problems

Appendix C
Bereavement Experience Questionnaire - 24

1. Felt life has no meaning
2. Found myself searching for the one who died
3. Thought I contributed to the death
4. Yearned for the deceased person
5. Lost my religious faith
6. Lost interest in my work
7. Thought I was losing my mind
8. Lost interest in activities I previously cared about
9. Felt like I was watching myself go through the motions of living
10. Felt the deceased was/is guiding me
11. Felt a need to be emotionally close to someone
12. Felt that some person was responsible for the death
13. Felt guilty about some things I said or did after the death
14. Spent time looking at deceased's pictures, clothing, belongings
15. Felt emotionally distant from people death
16. Thought that there are some very real reasons why I feel guilty
17. Felt guilt about things I did/said before the death .
18. Felt angry at myself
19. Felt guilty about little, unimportant things
20. Felt angry at the deceased person
21. Was preoccupied with thought of deceased person
22. Felt afraid to be alone
23. Could not bear to sort or part with the deceased's belongings
24. Felt unable to recall the deceased's image