Pro-sociality in times of separation and loss

Haywantee Ramkissoon (PhD) Professor (Full)
[1]College of Business, Law & Social Sciences Centre for Contemporary Tourism & Hospitality
&
Centre for Business Improvement Derby Business School
University of Derby, UK
[2]College of Business & Economics Johannesburg Business School
University of Johannesburg, South Africa

Corresponding author: Haywantee Ramkissoon (H.Ramkissoon@derby.ac.uk)

Abstract

Humans are particularly drawn to social connections. Prosociality in times of loss and separation require intervention designs aimed at reinforcing social bonds to help those grieving. Pro-social behaviors reinforce social support, contributes to resilience, and promotes mental health, overall wellbeing and quality of life. This review summarizes multidisciplinary evidence from literature showing emerging trends in prosocial behavior, loss and separation research with adaptive pro-social interventions to promote resilience contributing to mental wellbeing and quality of life outcomes. A summary of research findings showing the digital transformation to promote pro-social behaviors for mental wellbeing is provided. Finally, new and classic evidence of prosocial behaviors for adaptation and resilience in the community is discussed to promote future prosociality in loss and separation.

Introduction

Prosocial behavior is commonly defined as a voluntary behavior that intends to help or benefit another person and involves the making and maintaining of social connections essential for cooperation and enriched quality of life [1, 2*, 3, 4]. The topic of prosociality has been of great interest to scholars across a multitude of disciplines including (but not limited to) sociology, psychology, anthropology, forensic science, management, political science, public health [e.g., 2*, 3, 4**,5-11]. Much theory and research address important basic and applied questions regarding the factors that motivate and reinforce people's willingness to help others as well as how best to foster pro-social behavior.

Despite existing research into prosocial behavior, a focus on promoting pro-sociality to address separation anxiety [12] due to separation and loss of close bonds needs more investigation [8*, 14**, 15**, 16-17]. The COVID-19 global pandemic provides an important context to understand the mechanisms of prosociality in separation and loss. This review provides a selective overview of research from different disciplines into prosocial behavior in times of loss and separation. Drawing on this cross-disciplinary evidence, the paper proposes an integrative model showing the role of prosocial behaviors in dealing with loss and separation (using the COVID-19 pandemic as a context). I commence by providing an overview of this cross-disciplinary research, followed by a description of the proposed model and its implications for loss and separation within one's place of living.

Crisis separation and loss

Millions of people have experienced separation from and loss of loved ones due to the unprecedented COVID-19 global health tragedy. Social isolation since the pandemic has been an important public issue gaining a lot of media attention [2*, 16, 19-20, 21(*in this issue)*]. How the loss of close ones has impacted on people's health and quality of life cannot be overlooked and demands urgent action as COVID-19 continues to drastically impact on the mental wellbeing of the planet's residents with the mutated virus. Failure to address to the important concerns of those impacted by separation, loss and grief can lead to further decline in mental and physical health.

The COVID-19 literature (much like the literature on other health crises and natural disasters) suggests that in a post disaster/crisis context, bereavement and grief may continue [22*]. This could be over the loss of close ones and other negative effects such as loss of employment and financial instability (23-24, 25). Some evidence suggests that major health crises and disasters are experienced as traumatic events, but that many also evidence resilience during such events

[6] which is suggestive of positive growth. However, a lack of social support post traumatic events can lead to prolonged mental distress and the experience of trauma symptoms. Loneliness due to loss of family and friends coupled with social isolation in place confinement [2*, 8*, 14**] has resulted in many individuals to experience heightened depressive symptoms [26*]. Furthermore, grief related to loss and separation and excessive worry about the uncertainty of the future can collectively prolong stress [25, 27-28] impacting on people's general health, wellbeing and quality of life [29].

The multitude and significance of pandemic-related stressors are of particular concern, with a need for rapid interventions to address the mental health concerns experienced by many during the COVID-19 pandemic. It is of paramount importance to mention here that interventions need to be feasible, low-cost, engaging, and relative to context [2*, 8*, 30]. But importantly, these interventions need to address how COVID-19 has disrupted our fundamental need for human connection [31]. We require intervention designs aimed at reinforcing social bonds to help those grieving the loss of connection. A focus on fostering prosocial behavior and activities may well provide a novel perspective for combating people's sense of loss and separation during this pandemic period. From an evolutionary perspective, the synchronous movements of people during prosocial events and gatherings such as weddings, parties and sporting events bring about social closeness, and promote pro-social attitudes and behaviors [34-35] which can mitigate feelings of loss and separation. From a neurophysiological perspective, social bonding during these and other social activities is heightened through the release of endorphins enhanced by oxytocin [36*]. A consequence of social bonding is that it can help create stronger social networks by bringing people in the community together including counsellors, parents, teachers, volunteers, NGOs and hence bring a coordinated approach in promoting mental health [37*].

Amidst adversity, and the mental health concerns of the world's citizens, COVID-19 has brought forward an increase in pro-sociality [2*, 38]. This increase in prosociality, coupled with cross-disciplinary literature on the positive outcomes of prosocial behavior and events provides a window of opportunity to reflect on how the development of interventions that focus on enhancing prosocial behavior can improve people's health and wellbeing during a time marked by loss and separation.

Prosocial behaviors for dealing with the stress and strain of loss and separation
Pro-sociality can trigger a change of mind-sets which is beneficial for when coping with grief, loss and separation in our everyday lives [2*, 8]. From a cognitive stress perspective, grief

can be experienced as stressful when loss is appraised as taxing one's resources to deal with loss. However, research has found that the fostering of adaptive and growth mindsets to deal with loss can mitigate grief symptoms and alleviate depression as well as promote wellbeing and quality of life. [15**]. An increasing body of research shows that engagement in prosocial behaviours can shift mindsets in times of stress and adversity [8, 12, 24]. Some evidence suggests that encouraging more adaptive mind-sets in the home and promoting pro-sociality in the neighborhood can bring emotional, psychological and physiological wellbeing benefits [8*, 12, 48].

A possible adaptive pathway developed by Ramkissoon [2] is outlined in the model presented in Figure 1. The model proposes that engagement in pro-social behaviors can enhance mental health and quality of life in times of loss through place attachment. Place attachment is conceptualized as the development of an emotional bond that a person has with their place setting.[1] Major crises and disasters such as the COVID-19 pandemic where loss and separation are experienced can trigger the enactment of prosocial behaviors to not only help those around them, but to deal with their own sense of anxiety when disconnected from close others [18]. According to the model presented in Figure 1, the implementation of adaptive pro-social interventions is a necessary step in fostering people's enactment of prosociality, which in turn, can enhance a sense of place attachment, which subsequently can contribute to improving mental health and quality of life both during and after the COVID-19 pandemic [2*, 8].

Ramkissoon [2] argues that fostering pro-social behaviors through engagement in community activities can further influence people's levels of engagement in collective efforts to protect their place. She argues pro-social and pro-environmental behaviors can in turn foster place attachment that can enhance wellbeing and quality of life in times of loss and social isolation from close ones and friends. The deep emotional bonds one develops with the community can contribute to more pro-sociality and bring a sense of calmness promoting mental wellbeing and quality-of-life that extends to contexts of emotional and material losses. Endowing a place with meaning can lead to higher levels of community support. This is well supported by the sensemaking perspective drawing from cognitive social psychology. Sensemaking depicts how people make sense of events that do not conform to their usual cognitive scheme and engage in new behaviors to adapt to the new context [2, 11]. Aguinis and Glavas [50] in their review of sensemaking and corporate social responsibility (CSR) reflects evidence of pro-sociality at work; in business, people may demonstrate pro-social motivation and sensemaking which is caring for CSR and give back to the community [23]. The goal is for people in the community to co-create pro-social identities to work towards a common goal with a shared meaning. Thus, from a prosocial and place attachment perspective, one's prosocial

identity and connection with a sense of place and broader members of the social network can buffer the impact of loss and separation from a significant other. This is because one's embeddedness in the community is likely to result in the receipt of social support to deal with loss, and a sense of attachment to one's place can provide a sense of comfort to help attenuate a sense of loss or social disconnection. Scholars, doctors, and healthcare providers have recognized the importance of social bonds for individual and community health and wellbeing [2*, 14**, 39]. Moreover, the fostering of meaningful social connections through the provision and receipt of social support has been found to enhance mental health and improve quality of life [8*], especially in times of great loss and crisis as experienced during the current pandemic. But during a time of social isolation, how can interventions be developed that promote social connection and support through prosocial behviors and activities to combat loss and separation? The answer (at least in part) may lie in leveraging digital technologies.

Digital transformation: promoting pro-social behaviors for mental wellbeing

Research and prior reports point out to increasing use of telemedicine across some parts of the globe [40**, 41-42]. With limited access to healthcare and increased pressure on our global medical resources, digital platforms are being promoted as a pandemic response tool. There is a body of studies studying the effectiveness of telemedicine in crisis/disaster management and recovery programs [42-44]. Digital empowerment is required, it can help people to connect and re-connect post crises and disasters to combat loneliness, boredom and psychological distress. The aim is to turn the covid-19 challenge into an opportunity and promote social bonding through digital transformation for a healthier global society.

Scholars have been in quest of more innovative measures to promote pro-sociality through digital empowerment [41**]. Digital platforms are being recommended in alternative and integrative medicine to deliver interventions to encourage pro-sociality to cope with isolation and grief due to loss and separation through body-mind interventions [8*]. Online interventions can include meditation, mindfulness and relaxation training, psycho-education, psycho-socio therapy [8*, 11, 25, 45] and nature therapy using virtual and augmented reality [46]. Literature evidences that these intervention techniques can help people not to react to these challenges with worry. An important example is Hafenbrack et al. (2020) [47] study employing self-training interventions recorded by a trained mindfulness practitioner concluding that a 7-15 minute short mindfulness with focused breath and loving kindness mindful practices can increase pro-social behaviors. These align with prior research evidencing that those who experienced distress and engaged in a short 8-minute mindfulness session were more likely to engage in pro-social behaviors and help others. Mindfulness training promoted pro-social

responsiveness in an ostracized stranger in Berry el. (2018) [45] study. Online training meditative sessions among healthcare practitioners is also evidenced to improve gratitude, wellbeing, self-compassion and confidence [11].

While there is growing evidence that receiving support as well as giving support online can trigger pro-social attitudes and contribute to psychological restorativeness and wellbeing [14**], it is to be noted with caution however that digital platforms set up for delivering these interventions may not be readily accessible to several parts of the globe. This will necessitate collaborative efforts from global stakeholders [42; 46] to ensure accessibility to these platforms and services. Further, people who are less familiar with technology and the elderly are likely to require technical assistance to benefit from these interventions.

Conclusion

There are a number of papers in this special issue that expand on the discussion on attachment, loss and social identity [for example, see 51-52]. More research is needed to induce adaptive mindsets and foster pro-social behaviors to first assist the grieved individual in promoting positive growth which can perhaps expand to contribute to higher-effort collective goals. This can help shift the focus   and can improve mental wellbeing through engagement in activities at the community level [53], in the workplace and for some possibly in broader societal and environmental issues such as human rights and climate change. People from respective communities and social groups are likely to respond differently. Cross-country and cross-cultural studies are required for more conclusive findings to assist in developing appropriate pro-social interventions for those grieved by loss and separation relevant to context. Further, most studies to date are cross- sectional in nature, there is an urgent need for innovative methodologies to assess impacts of pro-social behaviors on mental wellbeing over time for comparative assessments. We will need to undertake a multidisciplinary approach and plan for longitudinal and evidence-based strategies to promote mental health and wellbeing and quality of life outcomes.

Declaration of interest: none

References and recommended reading
Papers of particular interest, published within the period of review has been highlighted as:
          *of special interest
          **of outstanding interest

References
Papers of particular interest, published within the period of review, have been highlighted as:
* of special interest ** of outstanding interest

1. Walsh JJ, Christoffel DJ, Wu X, Pomrenze, MB, Malenka, RC. Dissecting neural

mechanisms of prosocial behaviors. Curr Opin in Neurobio 2021, 68: 9-14.

2. *Ramkissoon H. COVID-19 Place confinement, pro-social, pro-environmental behaviors, and residents' wellbeing: A new conceptual framework. Front in Psychol 2020, 11: 2248.

This paper discusses how pro-social and pro-environmental behaviors in the COVID-19 place confinement context can promote place attachment and residents' wellbeing.

3. Dahl A. Paulus M. From interest to obligation: The gradual development of human altruism. Child Dev Persp 2019, 13(1): 10-14.

4. **Loades ME. Chatburn E. Higson-Sweeney N. Reynolds S. Shafran R. Brigden, A. ... Crawley E. Rapid systematic review: the impact of social isolation and loneliness on the mental health of children and adolescents in the context of COVID-19. Jour of the Amer. Acad of Child & Adoles Psych 2020.

This rapid systematic review provides important recommendations for early interventions to deal with the increase in mental health problems post the COVID-19 pandemic.

5. Schumpe BM. Bélanger JJ. Moyano M. Nisa, CF. The role of sensation seeking in political violence: An extension of the Significance Quest Theory. Jour of Pers and Soc Psychol 2020, 118(4): 743.

6. Singer J. Spiegel JA. Papa A. Preloss grief in family members of COVID-19 patients: Recommendations for clinicians and researchers. Psychol Trauma: Theo, Res, Pract, and Pol., 2020, 12(S1): S90.

7. Campbell AM. An increasing risk of family violence during the Covid-19 pandemic: Strengthening community collaborations to save lives. Foren Sci Int Reports 2020, 2: 100089.

8. * Ramkissoon H. Body-Mind Medicine Interventions in COVID-19 Place Confinement for Mental, Physical and Spiritual Wellbeing. OBM Integ and Complem Med, 2021, 6(16): doi:10.21926/obm.icm.2102016.

This paper discusses a range of body-mind body interventions for mental, physical and spiritual wellbeing during and after the pandemic.

9. Ramkissoon H. Mavondo F. Uysal M. Social involvement and park citizenship as moderators for quality-of-life in a national park. Journ of Sust Tour, 2018, 26(3): 341-361.

10. Ramkissoon, H., 2021. Social Bonding and Public Trust/Distrust in COVID-19 Vaccines. Sustain., 13(18): 10248.

11. Rao N. Kemper KJ. Online training in specific meditation practices improves gratitude, well-being, self-compassion, and confidence in providing compassionate care among health professionals. Jour of Evidence-based Comp & Alter Med, 2017, 22(2): 237-241.

12. Huebschmann NA. Sheets ES. The right mindset: stress mindset moderates the association between perceived stress and depressive symptoms. Anxiety, Stress, & Coping, 2020, 33(3): 248-255.

13. Crane MF. Searle BJ. Kangas M. Nwiran Y. How resilience is strengthened by exposure to stressors: the systematic self-reflection model of resilience strengthening. Anxiety, Stress, & Coping 2019, 32(1): 1-17.

14. **Van Bavel JJ. Baicker K, Boggio PS Capraro V Cichocka A, Cikara M. ...Willer R. Using social and behavioural science to support COVID-19 pandemic response. Nat Hum Beh 2020, 4(5): 460-471.

This paper provides evidence from a selection of research areas including stress due to loss and separation in pandemics and discusses coping strategies.

15. ** Snyder CR. Lopez SJ, Edwards, LM, Marques, SC (Eds.). *The Oxford handbook of positive psychology* 2020. Oxford university press.

This presents a good case for positive psychology and provides a good understanding for the need for a science-practice integration.

16. Smith ML. Steinman LE. Casey EA.Combatting social isolation among older adults in a time of physical distancing: the COVID-19 social connectivity paradox. Front in Pub Health 2020, 8: 403.

17. Bassi G. Mancinelli E. Di Riso D. Lis, A. & Salcuni, S. Separation anxiety in a community sample of Italian emerging adults and its relationship with dimensions of borderline personality. Res in Psycho: Psychopathology, Process, and Outcome 2021: 24(1).

18. Ruiz-García A. Jiménez Ó. Resurrección, DM. Ferreira M. Reis-Jorge J. Fenollar-Cortés J. Portuguese validation of the Adult Separation Anxiety—Questionnaire (ASA-27). Plos one 2021, 16(3): e0248149.

18. Peçanha T. Goessler KF. Roschel H. Gualano B. Social isolation during the COVID-19 pandemic can increase physical inactivity and the global burden of cardiovascular disease. Amer Jour of Physiol-Heart and Circ Physiol 2020, 318(6): H1441-H1446.

19. Hwang TJ. Rabheru, K. Peisah C. Reichman W. Ikeda, M. Loneliness and social isolation during the COVID-19 pandemic. Intern Psychogeriatrics 2020, 32(10): 1217-1220.

20. Pietrabissa, G. Simpson, SG. Psychological consequences of social isolation during COVID-19 outbreak. Frontiers in Psychology 2020, 11: 2201.

21. Pietromonaco P, Overall NC. Implications of social Isolation, separation and loss during the COVID-19 pandemic for couples' relationships. Curr Opin in Psychol 2022, 43:xx-xx.

22. *Saltzman LY, Hansel TC, Bordnick PS. Loneliness, isolation, and social support factors in post-COVID-19 mental health. Psychol Trauma: Theo, Res., Prac, and Policy 2020.

This paper provides a discussion of the importance of social support in the COVID-19 context and new ways of social connectedness for psychological recovery.

23. Ramkissoon H, Mavondo F, Sowamber V. Corporate social responsibility at LUX* resorts and hotels: Satisfaction and loyalty implications for employee and customer social responsibility. Sustain 2020, 12(22): 9745.

24. Ramkissoon H. Perceived social impacts of tourism and quality-of-life: a new conceptual model. Jour of Sust Tour 2020: 1-17.

25. Vatansever D, Wang S, Sahakian BJ. Covid-19 and promising solutions to combat symptoms of stress, anxiety and depression. Neuropsychopharmacology 2021, 46(1): 217.

26. *Goodman-Casanova JM, Dura-Perez E, Guzman-Parra J, Cuesta-Vargas A, Mayoral-Cleries F. Telehealth home support during COVID-19 confinement for community-dwelling older adults with mild cognitive impairment or mild dementia: survey study. Journ of Medical Inter Res., 2020, 22(5): e19434.

Findings of this study report greater negative psychological effects of confinement and discuss important measures to address those including a strong support network.

27. Bäuerle A, Teufel M, Musche V, Weismüller B, Kohler H, Hetkamp M., ... & Skoda, E. M. (2020). Increased generalized anxiety, depression and distress during the COVID-19 pandemic: a cross-sectional study in Germany. Journ. of Pub Health, 2020, 42(4): 672-678.

28. Musche V, Kohler H, Bäuerle A, Schweda A Weismüller B, Fink M, ...Skoda EM. COVID-19-Related Fear, Risk Perception, and Safety Behavior in Individuals with Diabetes. In Healthcare. 2021, 9(4): 480 Multidisciplinary Digital Publishing Institute.

29. Majeed S, Ramkissoon H. Health, Wellness, and Place Attachment During and Post Health Pandemics. Front in Psychol, 2020, 11.

30. Békés V, Aafjes-van Doorn K. Psychotherapists' attitudes toward online therapy during the COVID-19 pandemic. Jour of Psychothe Integ 2020, 30(2): 238.

31. Ramkissoon H, Smith LDG, Weiler B. Testing the dimensionality of place attachment and its relationships with place satisfaction and pro-environmental behaviours: A structural equation modelling approach. Tour Man 2013, 36: 552-566.

32. Kaniasty K. Social support, interpersonal, and community dynamics following disasters caused by natural hazards. Curr Opin in Psycho 2020, 32: 105-109.

33. Savage PE, Loui P, Tarr B, Schachner A, Glowacki L. Mithen S. Fitch WT. Music as a coevolved system for social bonding. Behav and Brain Sci 2020, 1-36.

34. Chang A, Kragness HE, Livingstone SR, Bosnyak DJ, Trainor LJ. Body sway reflects joint emotional expression in music ensemble performance. Scientific Reports 2019, 9(1): 205.

35. Cross L, Turgeon M, Atherton G. How moving together binds us together: the social consequences of interpersonal entrainment and group processes. Open PsychoL 2019, 1(1): 273–302.

36. *Olff M, Frijling JL, Kubzansky LD, Bradley B, Ellenbogen MA, Cardoso C, ...Van Zuiden M. The role of oxytocin in social bonding, stress regulation and mental health: an update on the moderating effects of context and interindividual differences. Psychoneuroendocrino 2013, 38(9): 1883-1894.

This paper presents findings from 5 studies concluding that oxytocin administration may increase sensitivity to social salience cues.

37. *Singh S, Roy MD, Sinha CPTMK, Parveen CPTMS, Sharma, CPTG, Joshi CPTG. Impact of COVID-19 and lockdown on mental health of children and adolescents: A narrative review with recommendations. Psychiat Res. 2020, 113429.

Findings show most studies on mental health of adolescents and children in COVID-19 are cross-sectional in nature and stress on the crucial need for longitudinal and developmental studies.

38. Zaki J. Catastrophe compassion: Understanding and extending prosociality under crisis. Trends in Cognit Sci 2020, 24(8): 587-589.

39. Chen S. Bonanno GA. Psychological adjustment during the global outbreak of COVID-19: A resilience perspective. Psychol Trauma: Theo, Res, Prac, and Pol 2020, 12(S1): S51.

40. Pfefferbaum B. North CS. Mental health and the Covid-19 pandemic. New England Journ of Med 2020, 383(6): 510-512.

41. **Hollander JE, Carr BG. Virtually perfect? Telemedicine for COVID-19. New England Journ of Med 2020, 382(18): 1679-1681.

This brief paper provides a robust perspective for promoting telemedicine with food for thought on whether the in-patient visits could actually become the last option.

42. *Dorsey ER Topol EJ. Telemedicine 2020 and the next decade. The Lancet, 2020, 395(10227): 859.

This paper discusses the current trend in telemedicine and its use in the next decade.

43.Riva G. Mantovani F. Wiederhold BK. Positive Technology and COVID-19. Cyberpsychol, Beh, and Social Network 2020 23(9): 581-587.

44. Ohannessian R, Duong TA, Odone A. Global telemedicine implementation and integration within health systems to fight the COVID-19 pandemic: a call to action. JMIR Public Health and Surv 2020, 6(2): e18810

45. Berry DR, Cairo AH, Goodman RJ, Quaglia JT, Green JD, Brown KW. Mindfulness increases prosocial responses toward ostracized strangers through empathic concern. Jour of Expe Psychol: General, 20*18, 147*(1): 93–112. https://doi.org/10.1037/xge0000392

46. Hassan A, Ramkissoon, H. Augmented reality application for visitor experiences in nature-based tourism in Albrecht, J. N. (Ed.). (2021). Managing Visitor Experiences in Nature-based Tourism. CABI.

47. **Hafenbrack AC, Cameron LD Spreitzer GM, Zhang C Noval LJ Shaffakat, S. Helping people by being in the present: Mindfulness increases prosocial behavior. Organ Beh and Huma Deci Process 2020, 159: 21-38.

48. *Park D Yu A Metz SE Tsukayama E Crum AJ Duckworth AL Beliefs about stress attenuate the relation among adverse life events, perceived distress, and self- control. Child Dev. 2018, 89(6): 2059-2069.

49. Jiang Y, Zhang J, Ming H, Huang S Lin D. Stressful life events and well-being among rural-to-urban migrant adolescents: The moderating role of the stress mindset and differences between genders. Jour of Adolescence 2019, 74: 24-32.

50. Aguinis H. Glavas A. (2019). On corporate social responsibility, sensemaking, and the search for meaningfulness through work. Jour of Man, 45(3): 1057-108.

51. Karantzas GC, Feeney JA, Agnew CR, Christensen A, Cutrona CE, Doss BD, Eckhardt CI, Russell DW, Simpson JA. Dealing with loss in the face of disasters and crises: Integrating

interpersonal theories of couple adaptation and functioning. Curr Opin in Psychol 2022, 43:xx-xx.

52. Haslam A, Haslam C, Cruwys T, Jetten J, Bentley SV, Fong P, Steffens NK. Social identity makes group-based social connection possible: Implications for loneliness and mental health. Curr Opin in Psychol 2022, 43:xx-xx.

53. Ramkissoon, H. Place affect interventions during and after the COVID-19 pandemic.Front in Psychol 2021, 3864.

Prosociality in times of loss and separation

Haywantee Ramkissoon (PhD)

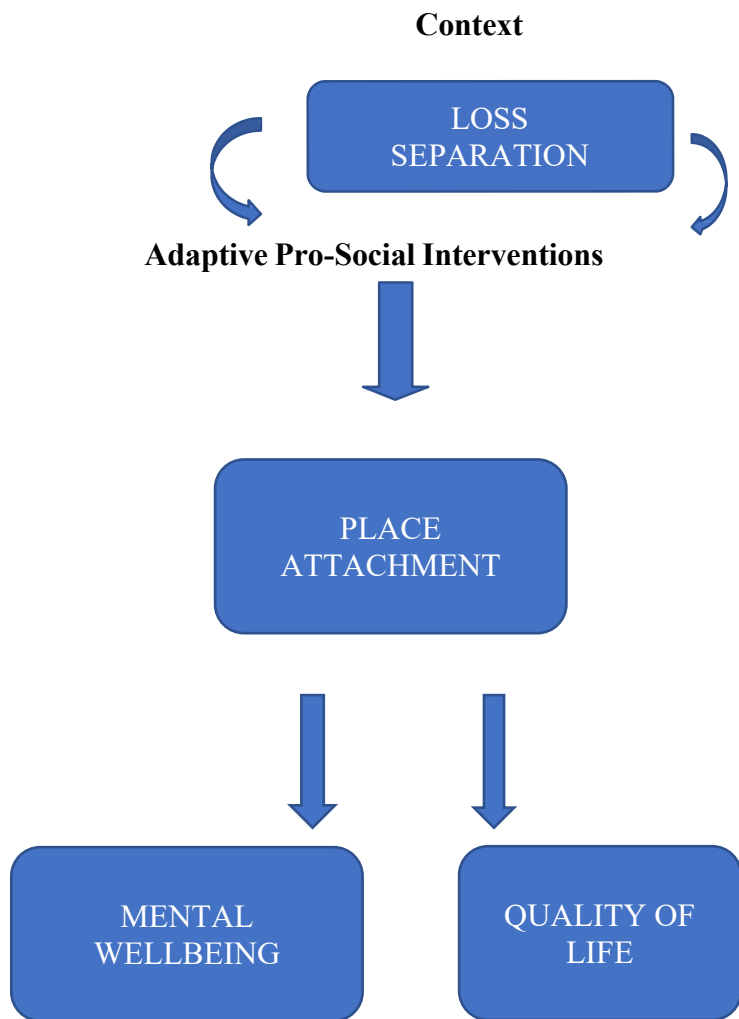Declaration of interest: none

Context

Figure 1: Prosociality in loss and separation

Footnote

[1] Although the construct place attachment shares some parallels with the term 'attachment' as discussed within attachment theory, the concept is multifaceted and multidisciplinary in that the construct also draws on conceptualisations of attachment as described in sociological, demographic, and geographic sciences.

Pro-sociality in loss and separation

<u>Highlights</u>

1. Prosocial behaviors reinforce social support.

2. Prosocial behaviors contribute to place attachment.

3. Place attachment contributes to mental health and quality of life.

4. Adaptive pro-social interventions are discussed.

Many thanks for this excellent contribution to this special issue of COIP. The paper provides a nice overview of emerging evidence regarding prosociality-focused approaches to supporting people's wellbeing in times of loss, and makes good reference to the COVID-19 pandemic.

Thank you very much for your encouraging comments.

The main substantive point that I have to make is that I would like to see some explicit reference and explanation of the figure (i.e., Figure 1) that you have provided. First, there is no explicit reference to the figure, and second, there is little explanation of the figure. I feel as if you allude to aspects of this figure in the second half of the manuscript at times, but there is no explicit "walk-through" of the figure for the reader. This important to include because, COIP places quite an emphasis on authors summarising key ideas and models in the form of figures, which can be accompanied by extensive figure captions. The emphasis on using figures where possible is also because COIP wants to ensure that people new to a given field can develop a clear understanding of a given topic – figures are seen as a good way to orient and help conceptualise ideas, models, and theories for novices in particular. What I would like to see is some explicit justification for the process-like model presented in Figure 1 that brings together some of the evidence you highlight throughout the manuscript. I also note, that in the description of your recently posited model that "place attachment" figures prominently, thus, I wonder if this concept may need to be featured in the conceptual model – it probably resonates well with research on loss in disasters/crises more generally.

Thank you very much for your insightful comments. I have included some explanation and justification in text (highlighted). I have also amended Figure 1 by adding 'place attachment'. I now refer to Figure 1 in text.

I know that you have cited (and thus cross-reference) with one other paper in the special issue (as we encouraged authors to do) – the Pietronmonaco & Overall paper. I have provided the exact citation below for (minus page numbers which can be corrected later, as we don't know these as yet). However, I am aware of other papers that would be important to cite as the pick-up on themes relevant to your paper regarding attachment, social identity, and grief. I appreciate that adding papers in a numbered system can mess-up the ordering, so I think its fine to cite these papers even in the conclusion as papers in the special issue that expand on a number of themes as they relate to your paper. As with the Pietromonaco and Overall paper, because, the page numbers of these papers are yet to be determined, they can be left for now and inserted at page-proof time.

Pietromonaco P, Overall NC. Implications of social Isolation, separation and loss during the COVID-19 pandemic for couples' relationships. Curr Opin in Psychol 2022, 43:xx-xx.

Karantzas GC, Feeney JA, Agnew CR, Christensen A, Cutrona CE, Doss BD, Eckhardt CI, Russell DW, Simpson JA. Dealing with loss in the face of disasters and crises: Integrating interpersonal theories of couple adaptation and functioning. Curr Opin in Psychol 2022, 43:xx-xx.

Haslam A, Haslam C, Cruwys T, Jetten J, Bentley SV, Fong P, Steffens NK. Social identity makes group-based social connection possible: Implications for loneliness and mental health. Curr Opin in Psychol 2022, 43:xx-xx.

Many thanks. I have made the changes and added some text in the conclusion (highlighted) and the suggested references.

Please provide 3-5 highlights as part of your final submission. These are not published as part of the paper, but they are featured as part of the online page when people go to access the paper. The author guidelines also provide information on these highlights (including character lengths).

Thank you. I have attached the highlights.

References need to be converted into COIP format, currently these are in APA (the author guidelines provide information regarding referencing [including links to resources to help with the shortening of journal titles]).

Thank you. I have reformatted the references.