

Grief and Attachment Personality Prototype

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Abstract

This study examined the relationship between the Big Five personality traits and grief outcomes among adults who experienced the loss of a loved one. Grounded in attachment theory, the research explored how individual personality differences influence the intensity of prolonged grief symptoms. A quantitative correlational design was used, and data were collected from 67 adults aged 18 years and older who had lost a loved one at least 12 months earlier. Participants completed an online survey that included the Big Five Inventory and the Prolonged Grief Scale-Revised (PG-13-R). Reliability, correlation, and multiple regression analyses were conducted using SPSS version 26. Results indicated that extraversion, agreeableness, and conscientiousness were negatively associated with prolonged grief, whereas higher neuroticism was positively and significantly related. Regression analysis identified higher neuroticism as the only significant predictor of prolonged grief, explaining 34.5% of the variance in PG-13-R scores. These findings suggest that individuals high in neuroticism are more vulnerable to maladaptive grief responses, while those higher in extraversion, agreeableness, and conscientiousness may exhibit greater resilience. The results highlight the clinical importance of considering personality factors in grief assessment and intervention planning, particularly in identifying individuals at risk for prolonged grief disorder.

Keywords

Grief, Attachment Theory, Big Five Personality, Prolonged Grief Disorder, Neuroticism, Resilience

1. Introduction

Grief and Attachment Personality Prototype

The COVID-19 pandemic, which began in early 2020, caused profound global losses, both in life and in emotional stability. Millions of people lost loved ones

during this period, leading to a wave of collective grief (Khan et al., 2020). Losing someone significant is among the most painful human experiences. Feelings of shock, anger, disbelief, remorse, and deep sorrow may surface in unpredictable cycles. Because grief does not follow a fixed timeline (Stroebe et al., 2007), many individuals experience prolonged emotional suffering that requires professional support to process and contain their pain.

Attachment theory provides an important framework for understanding individual differences in grief. Attachment is defined as the emotional bond formed between an infant and a caregiver (Holmes, 1993). Early attachment experiences profoundly shaped psychological development, particularly in how individuals seek safety and regulate distress. A caregiver who is available and responsive fosters a secure base, allowing the child to explore the world with confidence (Holmes, 1993). Conversely, inconsistent or unavailable caregiving may contribute to insecure attachment patterns, predisposing individuals to difficulties in coping with later loss.

As the pandemic caused widespread bereavement, attachment theory gained renewed relevance in explaining variations in grief responses (Goveas & Shear, 2020). While grief is a universal experience, the distinction between normal and complicated grief has long been studied (Stroebe et al., 2007). Normal grief is typically self-limited and adaptive, whereas prolonged or complicated grief can lead to chronic distress, impaired functioning, and increased risk of mental and physical health issues (Melhem et al., 2011). When individuals fail to integrate the reality of a loved one's death into their internal world, a state of complicated grief or prolonged grief disorder (PGD) may emerge (Shear & Shair, 2005).

In recognition of this clinical concern, the American Psychiatric Association (APA) officially included Prolonged Grief Disorder in the Diagnostic and Statistical Manual of Mental Disorders (DSM-5-TR) after years of empirical review. Understanding how attachment personality prototypes contribute to this disorder is therefore of growing importance. Research indicates that each attachment style—secure, anxious, and avoidant—shapes how individuals experience and recover from loss. Avoidant attachment has been linked to maladaptive grief reactions (Huh et al., 2020), while anxious attachment is associated with heightened negative affectivity (Rosa-Mendes et al., 2019). Some avoidant individuals may suppress distress yet show poor long-term adaptation (Fraley & Bonanno, 2004), whereas those high in attachment anxiety may paradoxically experience personal growth through grief (Xu et al., 2015).

Empirical findings also suggest that attachment avoidance is strongly related to depressive symptoms and prolonged grief outcomes (Maccallum & Bryant, 2018). Relationship quality further moderates this link, emphasizing the complexity of the attachment-grief relationship (Mancini et al., 2009). Given these findings, examining attachment personality prototypes offers valuable insights into why some individuals recover adaptively, while others struggle with enduring emotional pain.

2. Literature Review

The present study is grounded in two major frameworks: attachment theory and the Big Five personality model. Both frameworks contribute to understanding how personality and relational patterns shape grief responses. Literature provides a foundation for linking early attachment experiences to adult coping mechanisms and identifying how individual personality traits influence emotional adaptation following loss.

Attachment Theory and Grief

Attachment theory, first proposed by John Bowlby and later expanded by Mary Ainsworth, describes how emotional bonds formed during infancy serve as internal working models for later relationships (Holmes, 1993). Secure attachment, characterized by trust and emotional stability, allows individuals to regulate distress effectively. In contrast, insecure attachment styles—avoidant and anxious—are associated with maladaptive emotional regulation and heightened vulnerability to psychological distress (Shear & Shair, 2005).

When applied to grief, attachment theory posits that losing an attachment figure activates the same system responsible for seeking proximity and comfort (Fraleigh & Bonanno, 2004). Individuals with secure attachment tend to integrate the loss adaptively and maintain a continued sense of connection to the deceased without becoming emotionally overwhelmed. Conversely, avoidant attachment is linked to emotional suppression and disengagement, which can delay adjustment and lead to unresolved grief (Huh et al., 2020). Meanwhile, anxious attachment often manifests as heightened yearning, guilt, and difficulty accepting the reality of loss, predisposing individuals to prolonged grief disorder (PGD) (Maccallum & Bryant, 2018).

Cultural factors also influence attachment expression and grief reactions. In collectivist societies such as Arabs, the emphasis on family cohesion and religious coping can buffer against some of the emotional isolation seen in Western grieving styles (Goveas & Shear, 2020). However, strong social expectations to remain composed or rely solely on faith may sometimes discourage open emotional processing, potentially complicating recovery for individuals with insecure attachment tendencies.

Personality Traits and Emotional Regulation

The Big Five personality traits: Extraversion, Agreeableness, Conscientiousness, Neuroticism, and Openness to Experience, provide a comprehensive model for understanding individual differences in behavior and emotion (Benet-Martínez & John, 1998). These dimensions play a critical role in how individuals experience and manage emotional pain following bereavement. Research suggests that personality traits influence both the intensity and duration of grief through their effects on coping strategies and resilience (Rosa-Mendes et al., 2019).

- Extraversion is typically associated with optimism, sociability, and a tendency to seek social support. Individuals high in extraversion often use interpersonal relationships as a coping resource, reducing the likelihood of prolonged grief

(Asselmann & Specht, 2020).

- Agreeableness reflects empathy and interpersonal warmth, qualities that promote emotional expression and mutual support, which are protective against complicated grief reactions (Pai & Carr, 2010).
- Conscientiousness involves organization, self-discipline, and goal-directed behavior. Conscientious individuals may engage in structured coping strategies and reestablish daily routines more efficiently, aiding recovery after loss (Roccas et al., 2002).
- Neuroticism, by contrast, is characterized by emotional instability, anxiety, and vulnerability to stress. Numerous studies identify neuroticism as a major predictor of prolonged or maladaptive grief (Maccallum & Bryant, 2018), (Komischke-Konnerup et al., 2021). These individuals are prone to rumination, excessive guilt, and difficulty tolerating distress, leading to longer and more intense mourning periods.
- Openness to Experience may contribute to cognitive flexibility and posttraumatic growth in some cases (Xu et al., 2015), though its relationship with grief outcomes remains inconsistent across studies.

Personality and Grief Outcomes

Empirical evidence supports a significant association between personality traits and grief adaptation. In a meta-analysis by Komischke-Konnerup et al. (2021), higher neuroticism was strongly correlated with symptoms of depression, anxiety, and prolonged grief, while conscientiousness and agreeableness were linked to more adaptive adjustment. Rosa-Mendes et al. (2019) found that individuals high in agreeableness and emotional stability reported lower grief severity, emphasizing the protective role of interpersonal trust and emotional balance. Similarly, extraversion predicted higher levels of social support and positive affect following bereavement, both of which facilitate emotional recovery.

Cross-cultural findings indicate that personality and grief interactions are shaped by societal expectations and coping norms. In Western samples, openness and extraversion predict meaning-making and post-loss growth, whereas in collectivist cultures, agreeableness and conscientiousness appear more relevant due to their alignment with social harmony and duty (Huh et al., 2020).

In Monteiro & Miguel's (2025) study in bereavement research, emotional intelligence, especially emotion regulation and understanding, emerges as a protective factor for grief adjustment, while extraversion is linked to more adaptive coping. The study supports integrating affective regulation training with attention to personality-driven social coping in interventions for bereaved mothers.

In suicide bereavement research, personality traits shape perceptions of public stigma toward affected families. A study of 380 Israeli participants found that higher neuroticism and openness predict greater perceived stigma, while higher conscientiousness predicts lower stigma. Ethnicity also mattered, with Arab participants reporting more stigma than Jewish participants. This highlights the role of personality in stigma perceptions and the need for cross-cultural anti-stigma

efforts (Weinberg & Soffer, 2023). Such findings highlight the importance of examining grief within the cultural framework in which it occurs.

Integrating Personality and Attachment Perspectives

Attachment theory and the Big Five framework intersect in meaningful ways when explaining grief responses. Traits like neuroticism parallel the hyperactivation tendencies of anxious attachment, characterized by heightened distress and difficulty self-soothing. In contrast, agreeableness and conscientiousness mirror the emotional regulation and relational security found in secure attachment patterns (Fraley & Bonanno, 2004). These overlaps suggest that personality traits may serve as behavioral manifestations of underlying attachment mechanisms. Understanding this interplay provides clinicians with a more nuanced view of grief, one that accounts for enduring personality structures and relational histories.

In sum, the literature underscores the multifaceted nature of grief, shaped by personality, attachment, and cultural context. However, there remains a gap in studies exploring these factors together in non-Western populations. This study addresses this gap by examining the relationship between the Big Five personality traits and prolonged grief symptoms among adults in Saudi Arabia, guided by attachment theory as a conceptual framework.

3. Methodology

Participants

The study included a total of 77 adult Arab Saudi Arabian participants who completed the online questionnaire through Google Forms. After screening, 10 responses were excluded because the respondents had experienced a loss of less than 12 months prior to data collection. The final sample consisted of 67 adults aged 18 years and above who had experienced the loss of a loved one at least one year earlier. A convenience sampling method was used to recruit participants. All participants voluntarily participated and provided informed consent before completing the survey. The anonymity and confidentiality of their responses were maintained throughout the study.

Measures and Materials

Two primary instruments were used in this study: the Big Five Inventory (BFI) and the Prolonged Grief Scale-Revised (PG-13-R).

Big Five Inventory (BFI)

Personality traits were measured using the Big Five Inventory (Benet-Martínez & John, 1998), including 44 items that assess five major personality dimensions: Extraversion, Agreeableness, Conscientiousness, Neuroticism, and Openness to Experience. In this research, the shortened 21-item version developed by Rammstedt & John (2005) was utilized, as had been used in Tamimi's (2009) research. It was used for its efficiency in online administration. Each item was rated on a Likert-type scale ranging from 1 (strongly disagree) to 5 (strongly agree). Internal consistency of the scales in the current study was acceptable, with Cronbach's alpha values ranging from 0.596 (Extraversion) to 0.691 (Neuroticism).

Prolonged Grief Scale-Revised (PG-13-R)

Grief intensity and prolonged grief symptoms were measured using the Prolonged Grief Scale-Revised (PG-13-R) (Prigerson & Maciejewski, 2006). This 13-item scale assesses the severity of grief on a dimensional continuum and can be used to identify Prolonged Grief Disorder (PGD) based on DSM-5-TR criteria. Responses were rated on a 5-point Likert scale reflecting frequency or intensity of grief-related experiences. In the present sample, the PG-13-R demonstrated high internal consistency (Cronbach's $\alpha = 0.844$).

Procedure

Data was collected using an online self-administered survey created in Google Forms. The link to the questionnaire was distributed electronically to eligible adults who met the inclusion criteria. Participation was voluntary, and informed consent was obtained before beginning the survey. The questionnaire included demographic items followed by the BFI and PG-13-R scales. Data was screened to ensure eligibility and completeness. Statistical analyses were conducted using SPSS version 26.

Data Analysis

Descriptive statistics were used to summarize the central tendencies and variability of each variable. Reliability analyses were conducted using Cronbach's alpha to assess the internal consistency of each construct. Pearson's correlation coefficients were computed to examine the relationships between the Big Five personality traits and grief intensity. Multiple linear regression analysis was used to determine which personality traits significantly predicted prolonged grief scores on the PG-13-R. Statistical assumptions of linearity, normality, homoscedasticity, and multicollinearity were tested and met prior to the analyses.

4. Results and Discussion

Data Collection

The data has been collected from 77 respondents using a primary source, namely Google Forms. The data were coded and analyzed with appropriate statistical analysis using SPSS version 26. The statistical tests performed in this study include reliability analysis, descriptive statistics, Pearson's correlation coefficient analysis, scatterplots for linearity, and simple linear regression analysis.

Formulating Hypothesis

H₁: Individuals with higher Extraversion personality prototypes will have a negative association when dealing with prolonged grief.

H₂: Individuals with higher Agreeableness personality prototypes will have a negative association when dealing with prolonged grief.

H₃: Individuals with higher Conscientiousness prototypes will have a negative association when dealing with prolonged.

H₄: Individuals with higher Neuroticism personality prototypes have a positive association when dealing with prolonged grief.

H₅: Individuals with Openness personality prototypes have an inconsistent im-

pact in dealing with prolonged grief.

Reliability Analysis

A common method for examining the reliability of individual constructs in research is called Cronbach's alpha. The larger Cronbach's α value ensured the internal consistency among the constructs. As can be seen in **Table 1**, all the Cronbach's α values range between 0.61 and 0.85, which is in the acceptable range (>0.60) (Hair et al., 2019). This means that the constructs are reliable for further analysis.

Table 1. Cronbach's alpha values.

Variables	Cronbach's alpha
Extraversion	0.634
Agreeableness	0.663
Conscientiousness	0.616
Neuroticism	0.727
Openness to new experiences	0.711
Prolong Grief Scale Revised-13	0.847

Descriptive Statistics

All the variables were primarily analyzed using the scores of mean and standard deviation. The center of a distribution is indicated by the mean or central tendency. In addition, the standard deviation is used to see how the data have deviated from the mean. As demonstrated in **Table 2**, conscientiousness ($M = 3.97$, $SD = 0.75$) generated the highest score, followed by agreeableness ($M = 3.64$, $SD = 0.82$), whereas Prolong Grief Scale Revised-13 had the lowest ($M = 2.23$, $SD = 0.66$). Apart from that, the rest of the variables generated a moderate score. In terms of skewness values, both of the variables fall under the acceptable range of normally distributed data.

Table 2. Descriptive statistics.

Variables	Mean	Std. Dev.	Skewness	Kurtosis
Extraversion	3.2273	0.81332	-0.194	-0.537
Agreeableness	3.6429	0.82361	-0.761	0.287
Conscientiousness	3.9740	0.75392	-1.260	2.519
Neuroticism	3.3571	0.87962	-0.356	-0.301
Openness to new experiences	3.4338	0.84068	-0.283	-0.282
Prolong Grief Scale Revised-13	2.2363	0.65864	0.610	-0.265

Correlation Analysis

It is evident from **Table 3** that all of the personality prototypes, except for openness to experience, had a significant association with the Prolong Grief Scale Revised-13 at $p < 0.05$, and $p < 0.01$. Extraversion and agreeableness personality pro-

types had a weak and negative association with the Prolong Grief Scale Revised-13 ($r = -0.254$, and $r = -0.282$, respectively) at $p < 0.05$. Similarly, the conscientious personality prototype had a moderate but negative association with the Prolong Grief Scale Revised-13 ($r = -0.301$) at $p < 0.01$. On the other hand, the higher neuroticism personality prototype had a moderate and positive association with the Prolong Grief Scale Revised-13 ($r = 0.447$) at $p < 0.01$.

Table 3. Pearson's correlation coefficient matrix.

	E	A	C	N	OE	PGR-13
Extraversion						
Agreeableness	0.158					
Conscientiousness	0.329**	0.276*				
Neuroticism	-0.174	-0.418**	-0.230*			
Openness to new experiences	0.248*	-0.081	0.366**	-0.087		
Prolong Grief Scale Revised-13	-0.254*	-0.282*	-0.301**	0.443**	-0.092	

* $p < 0.05$; ** $p < 0.01$.

Multiple Linear Regression Analysis

Testing Linearity

The following scatterplot demonstrates the connection between openness to new experiences and PGR-13 is linear. Therefore, the assumption of linearity is met (Figures 1-5).

Testing Heteroscedasticity

The following Breusch-Pagan test of heteroscedasticity demonstrated a statistically insignificant result, $\chi^2(1) = 0.285$, $p > 0.05$. Therefore, the residuals are homogeneous in variance, and the assumption of homoscedasticity is met (Table 4).

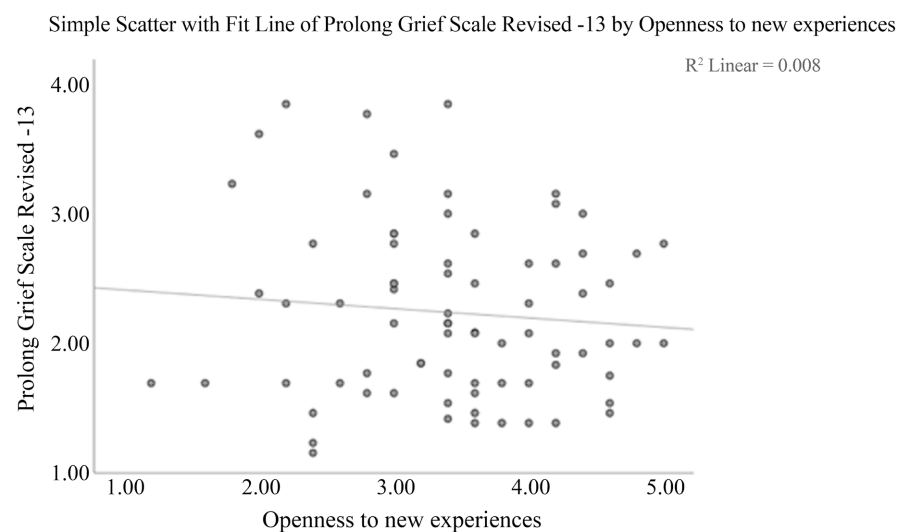


Figure 1. Scatterplot (openness to new experiences with PGR-13).

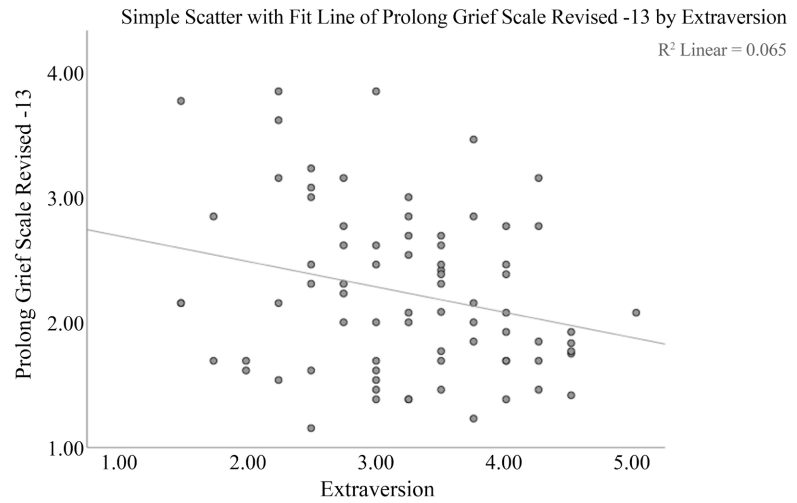


Figure 2. Scatterplot (extraversion with PGR-13).

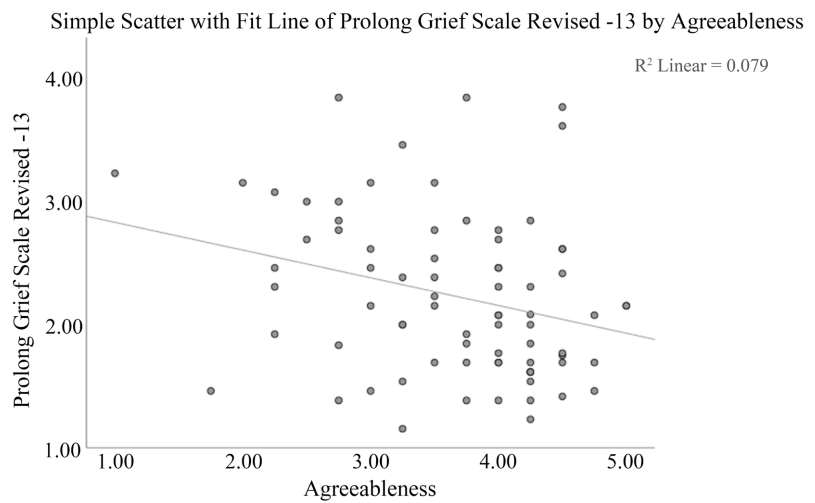


Figure 3. Scatterplot (agreeableness with PGR-13).

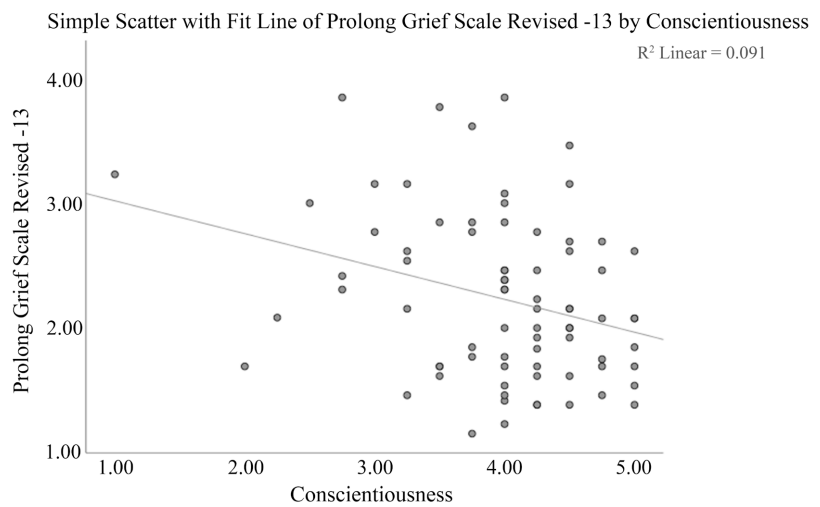


Figure 4. Scatterplot (conscientiousness with PGR-13).

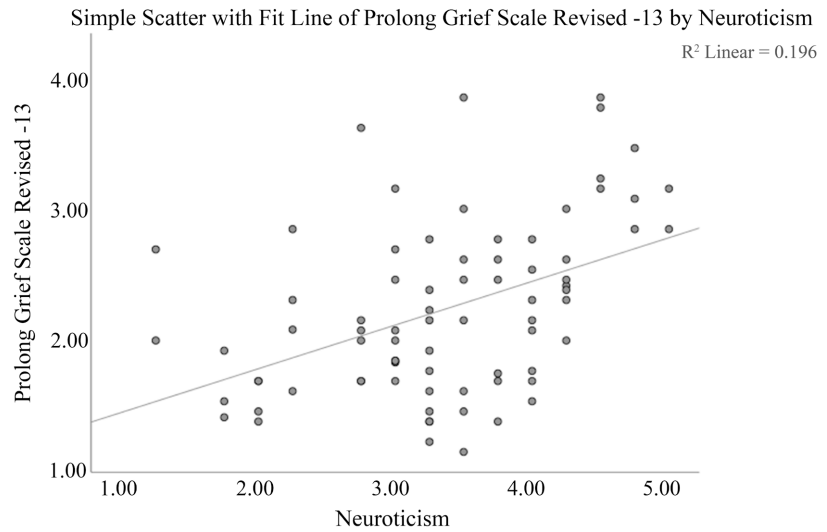


Figure 5. Scatterplot (neuroticism with PGR-13).

Table 4. Breusch-Pagen test of heteroscedasticity.

Breusch-Pagan Statistic	<i>p</i> -value
0.285	0.594

In addition, the following figure shows the graphical representation of homogeneous residuals. It is also evident from **Figure 6** that there is homogeneity in the residuals.

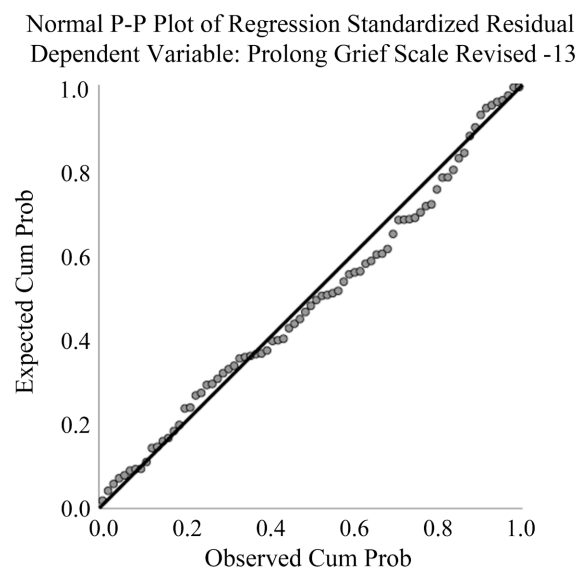


Figure 6. Normal P-P plot.

Testing Normality

As depicted in the following **Figure 7**, the residuals are normally distributed. Therefore, the assumption of normality is also met.

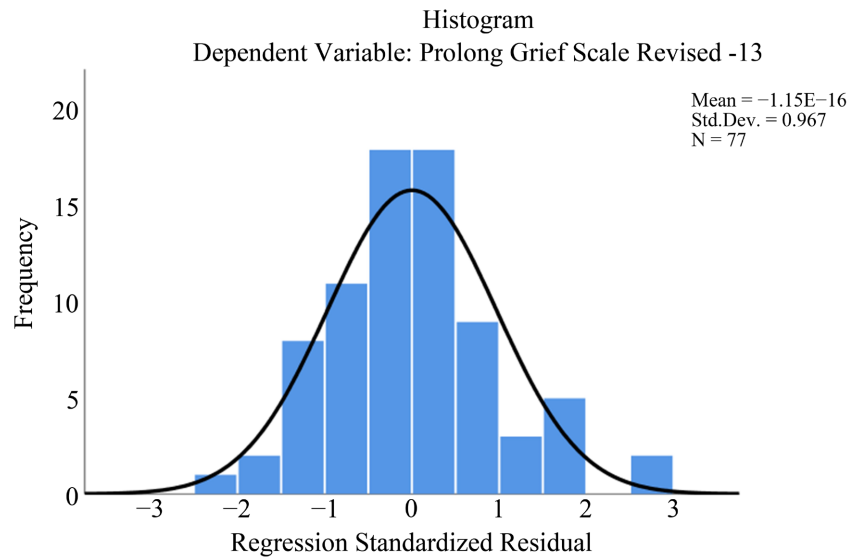


Figure 7. Histogram.

Testing Multicollinearity

According to [Hair et al. \(2019\)](#), the estimated path coefficients can be affected if the independent variables are highly correlated among themselves. Multicollinearity can be detected through the variance inflation factor (VIF) and tolerance level. The recommended threshold for variance inflation factor (VIF) is below 5, and tolerance is above 0.10 ([Hair et al., 2019](#)). Here, the maximum VIF is 1.367 and is within the acceptable level. Tolerance value also falls within the acceptable range (0.10 and 1). So, the assumption of multicollinearity is met ([Table 5](#)).

Table 5. Multicollinearity diagnostics.

Variables	Tolerance	VIF
Extraversion	0.858	1.165
Agreeableness	0.749	1.336
Conscientiousness	0.732	1.367
Neuroticism	0.801	1.249
Openness to new experiences	0.803	1.245

Model Summary and Autocorrelation

As depicted in [Table 6](#), the relationship between the Big Five scales and Prolong Grief Scale Revised-13 is further supported by the coefficient of determination or R^2 value (0.258), which implies that around 25.8% variance of PGR-13 can be explained by all the independent variables. Nevertheless, to examine whether the effects of the predictors were worthy enough to predict PGR-13, the Durbin-Watson test was conducted. The data met the assumption of independent errors (Durbin-Watson value = 1.902) as $1.50 < 1.902 < 2.50$.

Table 6. Model summary.

R	R Square	Adjusted R Square	Durbin-Watson
0.508 ^a	0.258	0.206	1.902

a. Predictors: (Constant), Extraversion, Agreeableness, Conscientiousness, Neuroticism, and Openness to Experience.

ANOVA Result

As demonstrated in **Table 7**, the ANOVA result is statistically significant, $F(5, 71) = 4.936$, $p < 0.01$, indicating that the regression model can precisely predict the respondent's PGR-13 based on the Big Five scales.

Table 7. ANOVA.

	Sum of Squares	df	Mean Square	F statistic	<i>p</i> -value
Regression	8.504	5	1.701	4.936	0.001
Residual	24.465	71	0.345		
Total	32.970	76			

Results of the Regression Analysis

It can be seen from **Table 8** below, only the people with high neuroticism personality prototype ($\beta = 0.268$, $t = 3.128$) had a significant impact on the Prolong Grief Scale Revised-13 at $p < 0.01$, and the relationship is positive. Here, the β value of 0.268 indicates that if the neuroticism score increases by 1 unit, then the PGR-13 score will increase by 0.268 units. Hence, H_4 is supported. Conversely, H_1 , H_2 , H_3 , and H_5 are not supported and while H_1 , H_2 and H_3 were not significant predictors in the multiple linear regression model, they did show significant bivariate correlations with prolonged grief, as shown in the significant **Table 3**.

Table 8. Regression coefficients.

	β	Std. Error	Beta	t-statistic	<i>p</i> -value
Constant (β_0)	2.377	0.684		3.476	0.001
Extraversion	-0.109	0.089	-0.134	-1.215	0.229
Agreeableness	-0.050	0.094	-0.063	-0.530	0.598
Conscientiousness	-0.147	0.104	-0.168	-1.406	0.164
Neuroticism	0.268	0.086	0.357	3.128	0.003
Openness to new experiences	0.022	0.089	0.029	0.251	0.803

Summary of Findings

The findings indicated that personality traits significantly influence grief outcomes. High Neuroticism emerged as a strong positive predictor of prolonged grief symptoms, suggesting that emotionally unstable individuals are more likely

to experience maladaptive grief responses. Conversely, extraversion, agreeableness, and conscientiousness were negatively correlated with grief, reflecting their potential protective role in emotional regulation and resilience following loss. Openness to experience showed no significant relationship with grief outcomes.

5. Discussion

The present study investigated the relationship between the Big Five personality traits and prolonged grief symptoms among adults who had lost a loved one at least 12 months earlier. The findings partially supported the hypotheses, revealing that high neuroticism was positively associated with prolonged grief, whereas extraversion, agreeableness, and conscientiousness were negatively correlated with grief intensity. Among these, only higher neuroticism emerged as a significant predictor in the regression analysis, explaining a substantial portion of the variance in prolonged grief symptoms.

These results are consistent with prior research suggesting that individuals high in neuroticism are more prone to maladaptive emotional regulation and prolonged distress following loss (Maccallum & Bryant, 2018; Shear & Shair, 2005). High Neuroticism is characterized by heightened emotional reactivity, anxiety, and vulnerability to stress—all of which may intensify the perception of loss and hinder adjustment (Komischke-Konnerup et al., 2021). In contrast, traits such as extraversion and conscientiousness have been linked to adaptive coping and resilience (Rosa-Mendes et al., 2019), which aligns with the negative correlations found in this study.

From an attachment theory perspective, these findings underscore the emotional and behavioral parallels between insecure attachment and neuroticism. Individuals high in neuroticism may mirror the hyperactivation strategies of those with anxious attachment—seeking reassurance yet struggling to regulate distress effectively. Similarly, those higher in conscientiousness or agreeableness may embody traits akin to secure attachment, facilitating adaptive coping through emotional stability and relational support (Fraley & Bonanno, 2004).

The absence of a significant relationship between openness to experience and grief aligns with mixed findings in the literature. While openness may contribute to cognitive flexibility, it may not necessarily protect against the intensity of loss-related emotions. In collectivist Arab contexts such as Saudi Arabia, bereavement adjustment is strongly shaped by family and social support, with lower perceived support predicting more severe grief reactions, including prolonged grief symptoms and suicidal ideation (Ariapooran et al., 2018; Specht et al., 2022). These findings suggest that social and familial factors may carry more weight than individual personality traits in determining grief outcomes in such cultural settings (Elsharkawy et al., 2025).

Theoretical and Clinical Implications

The present study contributes to the growing body of research connecting personality structures, attachment patterns, and grief outcomes. From a theoretical

perspective, the findings emphasize the role of high neuroticism as a psychological vulnerability that parallels characteristics of anxious attachment. Both constructions are characterized by emotional instability, preoccupation with loss, and difficulty regulating distress. This alignment supports the assumption that underlying attachment systems may be expressed through stable personality traits. Thus, the Big Five framework offers a complementary lens for understanding attachment-related processes in adulthood.

The negative correlations observed between extraversion, agreeableness, and conscientiousness and prolonged grief also correspond with existing theoretical models. These traits may serve as behavioral indicators of secure attachment, reflecting adaptability, self-regulation, and social connectedness. Individuals with high conscientiousness often rely on structured coping and problem-solving approaches, while those high in extraversion and agreeableness benefit from social engagement and emotional openness. The protective nature of these traits provides theoretical support for the integration of personality-based resilience into contemporary grief models.

Additionally, this study highlights the cultural relevance of attachment and personality constructs. In collectivist societies like Saudi Arabia, social expectations and religious beliefs can shape grief expression and coping mechanisms. Emotional restraint, spiritual acceptance, and family-centered mourning rituals may moderate the relationship between personality and grief severity. These cultural factors should be incorporated into theoretical models to ensure their cross-cultural validity. The current findings suggest that future attachment-grief frameworks should consider cultural values as mediating factors between personality traits and bereavement outcomes.

From a clinical perspective, the results have direct implications for grief counseling and psychotherapy. Assessing personality traits can help clinicians identify individuals at greater risk for prolonged grief disorder. For example, clients with high neuroticism may benefit from interventions targeting emotional regulation and cognitive restructuring, such as cognitive-behavioral therapy (CBT) or mindfulness-based therapy. Therapists can help these individuals reduce rumination, manage anxiety, and develop adaptive coping strategies to process the loss more effectively.

Conversely, clients with lower levels of extraversion or agreeableness may require therapeutic approaches that encourage social connection and emotional expression, such as group therapy or interpersonal psychotherapy (IPT). Clinicians can also leverage clients' strengths; for instance, highly conscientious individuals may respond well to structured treatment plans that emphasize gradual goal setting and behavioral activation.

Moreover, the findings underscore the importance of preventive assessment in clinical and community settings. Incorporating brief personality screening tools (such as the BFI) during intake sessions or in grief support programs can help practitioners anticipate potential complications in bereavement adjustment. By

understanding a client's personality profile, clinicians can tailor interventions that align with their coping style and attachment tendencies. This personalized approach aligns with the current shift toward integrative, person-centered therapy in clinical psychology.

Finally, the study's implications extend to public health and education. Training programs for grief counselors, psychologists, and mental health workers in Saudi Arabia could include modules on personality-informed assessment and culturally sensitive grief interventions. Given the emotional and social effects of the COVID-19 pandemic, such initiatives would promote early identification of at-risk individuals and foster more adaptive pathways to recovery.

Limitations and Future Research

This study is not without limitations. The sample size was relatively small and relied on convenience sampling, which restricts the generalizability of the findings to the wider population. Data were collected through self-report measures, which may have introduced response biases such as social desirability or recall error. Moreover, cultural and religious variables were not examined, though these factors may play a significant role in shaping grief expression, emotional regulation, and coping strategies. Future studies should recruit larger and more diverse samples to enhance external validity, employ longitudinal designs to capture changes over time, and include mediating variables such as social support, attachment style, and coping strategies to better understand the pathways linking personality and grief.

In addition, future research should explore the mediating role of attachment style between personality traits and grief outcomes using a mixed-methods design. Incorporating qualitative interviews would allow researchers to capture the deeper personal meaning attached to loss experiences—particularly within collectivist cultures where grief expression is shaped by family, community, and religious norms. Comparative studies between clinical and non-clinical populations would also help clarify whether certain personality traits predict pathological grief responses or simply reflect natural variations in emotional adjustment during bereavement. Such work would not only expand theoretical understanding but also contribute to the development of culturally sensitive and personality-informed grief interventions.

Conflicts of Interest

The authors declare no conflicts of interest regarding the publication of this paper.

References

- Ariapooran, S., Heidari, S., Asgari, M., Ashtarian, H., & Khezeli, M. (2018). Individualism-Collectivism, Social Support, Resilience and Suicidal Ideation among Women with the Experience of the Death of a Young Person. *International Journal of Community Based Nursing and Midwifery*, *6*, 250-259.
- Asselmann, E., & Specht, J. (2020). Till Death Do Us Part: Transactions between Losing One's Spouse and the Big Five Personality Traits. *Journal of Personality*, *88*, 659-675. <https://doi.org/10.1111/jopy.12517>

- Benet-Martínez, V., & John, O. P. (1998). Los Cinco Grandes across Cultures and Ethnic Groups: Multitrait-Multimethod Analyses of the Big Five in Spanish and English. *Journal of Personality and Social Psychology, 75*, 729-750. <https://doi.org/10.1037/0022-3514.75.3.729>
- Elsharkawy, N. B., Ramadan, O. M. E., Hafiz, A. H., Katooa, N. E., Abunar, A., Attallah, D. M. A. et al. (2025). Resilience in the Shadows of Loss: A Hermeneutic Phenomenological Study of Neonatal Intensive Care Nurses' Coping after Infant Loss in Saudi Arabia. *BMC Nursing, 24*, Article No. 822. <https://doi.org/10.1186/s12912-025-03509-8>
- Fraley, R. C., & Bonanno, G. A. (2004). Attachment and Loss: A Test of Three Competing Models on the Association between Attachment-Related Avoidance and Adaptation to Bereavement. *Personality and Social Psychology Bulletin, 30*, 878-890. <https://doi.org/10.1177/0146167204264289>
- Goveas, J. S., & Shear, M. K. (2020). Grief and the COVID-19 Pandemic in Older Adults. *The American Journal of Geriatric Psychiatry, 28*, 1119-1125. <https://doi.org/10.1016/j.jagp.2020.06.021>
- Hair, J. F., Babin, B. J., Anderson, R. E., & Black, W. C. (2019). *Multivariate Data Analysis* (8th ed.). Cengage Learning EMEA.
- Holmes, J. (1993). *John Bowlby and Attachment Theory*. Psychology Press.
- Huh, H. J., Kim, K. H., Lee, H., & Chae, J. (2020). Attachment Style, Complicated Grief and Post-Traumatic Growth in Traumatic Loss: The Role of Intrusive and Deliberate Rumination. *Psychiatry Investigation, 17*, 636-644. <https://doi.org/10.30773/pi.2019.0291>
- Khan, N., Fahad, S., Naushad, M., & Faisal, S. (2020). Critical Review of COVID-2019 in the World. *SSRN Electronic Journal*. <https://doi.org/10.2139/ssrn.3583925>
- Komischke-Konnerup, K. B., Zachariae, R., Johannsen, M., Nielsen, L. D., & O'Connor, M. (2021). Co-Occurrence of Prolonged Grief Symptoms and Symptoms of Depression, Anxiety, and Posttraumatic Stress in Bereaved Adults: A Systematic Review and Meta-Analysis. *Journal of Affective Disorders Reports, 4*, Article 100140. <https://doi.org/10.1016/j.jadr.2021.100140>
- Maccallum, F., & Bryant, R. A. (2018). Prolonged Grief and Attachment Security: A Latent Class Analysis. *Psychiatry Research, 268*, 297-302. <https://doi.org/10.1016/j.psychres.2018.07.038>
- Mancini, A. D., Robinaugh, D., Shear, K., & Bonanno, G. A. (2009). Does Attachment Avoidance Help People Cope with Loss? The Moderating Effects of Relationship Quality. *Journal of Clinical Psychology, 65*, 1127-1136. <https://doi.org/10.1002/jclp.20601>
- Melhem, N. M., Porta, G., Shamseddeen, W., Walker Payne, M., & Brent, D. A. (2011). Grief in Children and Adolescents Bereaved by Sudden Parental Death. *Archives of General Psychiatry, 68*, Article 911. <https://doi.org/10.1001/archgenpsychiatry.2011.101>
- Monteiro, A. P., & Miguel, F. K. (2025). Relationship between Emotional Intelligence, Personality, and Grief in Bereaved Mothers. *OMEGA—Journal of Death and Dying, 25*. <https://doi.org/10.1177/00302228251371768>
- Pai, M., & Carr, D. (2010). Do Personality Traits Moderate the Effect of Late-Life Spousal Loss on Psychological Distress? *Journal of Health and Social Behavior, 51*, 183-199. <https://doi.org/10.1177/0022146510368933>
- Prigerson, H. G., & Maciejewski, P. K. (2006). *Prolonged Grief Disorder (PG-13)*. Dana-Farber Cancer Institute.
- Rammstedt, B., & John, O. P. (2005). Kurzversion des Big Five Inventory (BFI-K): Entwicklung und validierung eines ökonomischen inventars zur erfassung der fünf faktoren der persönlichkeit. *Diagnostica, 51*, 195-206. <https://doi.org/10.1026/0012-1924.51.4.195>
- Roccas, S., Sagiv, L., Schwartz, S. H., & Knafo, A. (2002). The Big Five Personality Factors

- and Personal Values. *Personality and Social Psychology Bulletin*, 28, 789-801. <https://doi.org/10.1177/0146167202289008>
- Rosa-Mendes, M., Pires, R., & Ferreira, A. S. (2019). Personality Traits of the Alternative DSM-5 Model and the Attachment Dimensions in Portuguese Adults. *Personality and Individual Differences*, 143, 21-29. <https://doi.org/10.1016/j.paid.2019.02.007>
- Shear, K., & Shair, H. (2005). Attachment, Loss, and Complicated Grief. *Developmental Psychobiology*, 47, 253-267. <https://doi.org/10.1002/dev.20091>
- Specht, F., Vöhringer, M., Knaevelsrud, C., Wagner, B., Stammel, N., & Böttche, M. (2022). Prolonged Grief Disorder in Arabic-Speaking Treatment-Seeking Populations: Relationship with Socio-Demographic Aspects, Loss- and Trauma-Related Characteristics, and Mental Health Support. *Frontiers in Psychiatry*, 13, Article ID: 933848. <https://doi.org/10.3389/fpsy.2022.933848>
- Stroebe, M., Schut, H., & Stroebe, W. (2007). Health Outcomes of Bereavement. *The Lancet*, 370, 1960-1973. [https://doi.org/10.1016/s0140-6736\(07\)61816-9](https://doi.org/10.1016/s0140-6736(07)61816-9)
- Tamimi, N. A. (2009). *Predictors of Marital Satisfaction in Arranged Marriages in Saudi Arabia*.
- Weinberg, M., & Soffer, M. (2023). The Relationships between Personality Traits and Public Stigma Attached to Families Bereaved Due to Suicide. *OMEGA—Journal of Death and Dying*, 87, 872-883. <https://doi.org/10.1177/00302228211029147>
- Xu, W., Fu, Z., He, L., Schoebi, D., & Wang, J. (2015). Growing in Times of Grief: Attachment Modulates Bereaved Adults' Posttraumatic Growth after Losing a Family Member to Cancer. *Psychiatry Research*, 230, 108-115. <https://doi.org/10.1016/j.psychres.2015.08.035>