

# The Relationship between Complicated Grief and Post-Traumatic Growth in Emerging Adults Experiencing Parental Bereavement

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DOI: <https://doi.org/10.47772/IJRISS.2026.100500345>

Received: 03 May 2026; Accepted: 08 May 2026; Published: 01 June 2026

## ABSTRACT

This study examined the relationship between complicated grief and post-traumatic growth (PTG) in Indonesian emerging adults who experienced parental bereavement. Using a quantitative correlational design, data were collected from 102 participants aged 18 to 29 years who lost one or both parents within the preceding three years. Complicated grief was measured using a modified version of the Prolonged Grief Disorder-13 Revised (PG-13-R), while PTG was assessed using the Post-Traumatic Growth Inventory Short Form (PTGI-SF-10), both adapted into Indonesian and validated through expert judgment and pilot testing. Spearman's rho correlation analysis revealed a significant negative relationship between complicated grief and PTG ( $r = -0.398$ ,  $p < .001$ ), indicating that higher levels of complicated grief are associated with lower PTG. The majority of participants scored in the high range for both complicated grief (74.5%) and PTG (82.4%), reflecting the co-occurrence of maladaptive grief responses and positive growth. These findings are discussed in light of Tedeschi and Calhoun's (2004) PTG theoretical model and Zoellner and Maercker's (2006) Janus-Face Model, contributing empirical evidence from an Indonesian collectivistic cultural context.

**Keywords:** complicated grief, post-traumatic growth, parental bereavement, emerging adults

## INTRODUCTION

Parental bereavement is widely regarded as one of the most psychologically significant losses an individual can experience across the lifespan. In the context of developmental psychology, the death of a parent during emerging adulthood, defined by Arnett (In Angelica, 2023) as the period between 18 and 29 years of age, carries particularly complex consequences. This developmental phase is characterized by identity formation, the pursuit of autonomy, and transitions into new life roles. The continued emotional, financial, and instrumental support provided by parents during this period renders their loss especially disruptive to psychosocial development.

Parental death can precipitate a wide range of adverse outcomes, including mood disturbances, anxiety, insomnia, substance use, and increased risk for mental disorders and physical illness. These effects extend from adolescence into adulthood and underscore the importance of understanding how emerging adults respond to and adapt following such loss, (Farella Guzzo & Gobbi, 2023; Li et al., 2022)

Two theoretically distinct but empirically related responses to traumatic loss are post-traumatic growth (PTG) and complicated grief. PTG, as conceptualized by Tedeschi & Calhoun (2004), refers to positive psychological change resulting from the struggle with highly challenging life circumstances. It encompasses five domains: appreciation of life, relating to others, personal strength, new possibilities, and spiritual change. PTG does not preclude psychological distress; rather, it can co-occur with negative emotional consequences, (Kleim & Ehlers, 2009).

In contrast, complicated grief represents a maladaptive bereavement response characterized by intense and persistent yearning for the deceased, difficulty accepting the death, emotional pain, identity disruption, and functional impairment, (Prigerson et al., 1995). Unlike normative grief, complicated grief does not diminish over time and significantly interferes with daily functioning, (Savitri et al., 2019).

Preliminary qualitative findings with five Indonesian emerging adults who had experienced parental loss revealed that all participants exhibited symptoms of complicated grief alongside indicators of PTG, though with considerable individual variation. The co-occurrence of both phenomena, and the potential inhibitory relationship between them, warranted systematic empirical investigation.

Despite growing research on both constructs, studies specifically examining their relationship in the context of parental bereavement among Indonesian emerging adults remain scarce. Indonesia's collectivistic cultural context, strong family values, and high levels of religiosity may shape unique grief dynamics not fully captured by findings from Western populations. The present study addressed this gap by investigating the relationship between complicated grief and PTG in a sample of Indonesian emerging adults who experienced parental bereavement.

## LITERATURE REVIEW

### Post-Traumatic Growth

Post-traumatic growth (PTG) is defined as positive psychological change experienced as a result of the struggle with highly challenging life circumstances, (Tedeschi & Calhoun, 2004). The PTG model posits that traumatic events shatter individuals' core assumptions about the world (assumptive world), triggering a process of cognitive renegotiation. Initially characterized by intrusive rumination, this process gradually transitions to deliberate rumination, a more constructive form of reflection that enables individuals to reconstruct their worldview and integrate the traumatic experience into a new, meaningful life narrative.

Zoellner & Maercker (2006) proposed the Janus-Face Model of PTG, distinguishing between genuine, constructive growth and illusory growth that serves as a palliative coping mechanism. This model accommodates contradictory empirical findings by suggesting that reported PTG may reflect either authentic transformation or self-enhancement strategies, depending on the individual's stage of trauma processing.

Five dimensions of PTG have been identified: appreciation of life, relating to others, personal strength, new possibilities, and spiritual change, (Tedeschi & Calhoun, 2004). Key facilitators include deliberate cognitive processing, personality traits such as agreeableness and openness to experience, social support, and spirituality, (Henson et al., 2020).

### Complicated Grief

Complicated grief is conceptualized as a maladaptive, prolonged grief response that significantly impairs daily functioning. Prigerson et al., (1995) characterized it by disbelief about the death, anger, bitterness, intense preoccupation and yearning for the deceased, avoidance, social withdrawal, loneliness, difficulty accepting the loss, and perceptual disturbances related to the deceased. Five core symptom dimensions have been identified: yearning and loneliness, preoccupation and avoidance, identity disruption and loss of meaning, difficulty with acceptance, and emotional distress with reintegration difficulties, (Prigerson et al., 2021).

Factors associated with complicated grief include the closeness of the relationship with the deceased, the nature and circumstances of the death, and individual psychosocial characteristics such as gender, neuroticism, maladaptive coping styles, and prior mental health conditions, (Santos & Soares, 2024).

### The Relationship Between Complicated Grief and PTG

Theoretically, complicated grief is posited to inhibit PTG by disrupting the cognitive processing that facilitates growth. Individuals experiencing complicated grief tend to become trapped in intrusive rumination, which depletes the cognitive and emotional resources necessary for the deliberate reflection underlying PTG, (Tedeschi & Calhoun, 2004). Empirical support for a negative relationship between the two constructs was provided by Levi-Belz & Lev-Ari, (2019), who found a significant negative correlation ( $r = -0.34$ ,  $p < .001$ ) among 170 suicide-loss survivors. The present study extended this inquiry to the specific context of parental bereavement in Indonesia.

## METHOD

### Research Design and Participants

This study employed a quantitative correlational design. Participants were 102 Indonesian emerging adults (85 female, 17 male; age range 18 to 29 years; Mage approximately 21 to 22 years) who had experienced the death of one or both parents within the preceding three months to three years. The lower bound of three months was established to ensure participants had progressed beyond the acute grief phase, (Stroebe in Savitri et al., 2019), while the upper bound of three years captured individuals with potentially prolonged grief symptoms, (Prigerson et al., 1995). Participants were recruited through purposive sampling via social media platforms (TikTok and WhatsApp). The minimum required sample size of 96 was determined using the Lemeshow formula.

### Measures

Complicated grief was assessed using a modified version of the Prolonged Grief Disorder-13 Revised (PG-13-R; Prigerson et al., 2021). The original frequency-based response format was adapted to a 4-point suitability scale (1 = not suitable to 4 = very suitable) and items were translated and contextualized for the Indonesian population. From an initial pool of 18 items, 13 items were retained following pilot testing ( $n = 31$ ), with corrected item-total correlations ranging from .305 to .782. Internal consistency was acceptable (Cronbach's  $\alpha = .716$ ).

Post-traumatic growth was measured using the Post-Traumatic Growth Inventory Short Form (PTGI-SF-10; Cann et al., 2010). Items were translated into Indonesian, contextualized for parental bereavement, and the original 6-point scale was modified to a 4-point suitability scale. Of 13 initial items, 10 were retained following pilot testing, with corrected item-total correlations ranging from .382 to .745. Internal consistency was good (Cronbach's  $\alpha = .853$ ).

Both instruments were validated through expert judgment by three psychology experts, with item-level content validity indices of 1.00 for all retained items (Polit & Beck, 2006) followed by construct validity testing via pilot study.

### Data Analysis

Data were analyzed using JASP (version 0.19.3.0). Normality was assessed via the Kolmogorov-Smirnov test. Because PTG scores violated the normality assumption ( $p = .014$ ), Spearman's rho was employed for the correlational analysis. Linearity was confirmed ( $p < .001$ ). Descriptive statistics and between-group comparisons based on demographic characteristics were also conducted.

## RESULTS

### Participant Characteristics

Table 1 presents the demographic profile of participants.

Table 1. Demographic Profile of Participants (N = 102)

| Characteristic     | n  | %    |
|--------------------|----|------|
| <b>Gender</b>      |    |      |
| Female             | 85 | 83.3 |
| Male               | 17 | 16.7 |
| <b>Age (years)</b> |    |      |

|                        |    |      |
|------------------------|----|------|
| 18                     | 3  | 2.9  |
| 19                     | 3  | 2.9  |
| 20                     | 19 | 18.6 |
| 21                     | 26 | 25.5 |
| 22                     | 23 | 22.5 |
| 23                     | 13 | 12.7 |
| 24                     | 7  | 6.9  |
| 25                     | 6  | 5.9  |
| 29                     | 2  | 2.0  |
| <b>Time Since Loss</b> |    |      |
| Less than 1 year       | 5  | 4.9  |
| 1 year                 | 36 | 35.3 |
| 2 years                | 25 | 24.5 |
| 3 years                | 36 | 35.3 |
| <b>Deceased Parent</b> |    |      |
| Father                 | 39 | 38.2 |
| Mother                 | 27 | 26.5 |
| Both parents           | 10 | 9.8  |
| Not reported           | 26 | 25.5 |

### Descriptive Statistics

Descriptive statistics for both variables are presented in Table 2. The mean score for complicated grief was 36.28 (SD = 4.84), and for PTG was 31.57 (SD = 4.85). Categorization of scores revealed that 74.5% of participants fell in the high category for complicated grief and 82.4% in the high category for PTG.

Table 2. Descriptive Statistics and Score Categorization

| Variable              | Mean  | SD   | Low (%) | Moderate (%) | High (%) |
|-----------------------|-------|------|---------|--------------|----------|
| Complicated Grief     | 36.28 | 4.84 | 9.8     | 15.7         | 74.5     |
| Post-Traumatic Growth | 31.57 | 4.85 | 6.9     | 10.7         | 82.4     |

### Demographic Differences

Significant gender differences were found for both complicated grief ( $p = .004$ ) and PTG ( $p = .046$ ). Female participants reported higher complicated grief scores ( $M = 36.89$ ,  $SD = 4.23$ ) than male participants ( $M = 33.24$ ,  $SD = 6.47$ ), while male participants reported higher PTG scores ( $M = 33.71$ ,  $SD = 4.73$ ) than female participants ( $M = 31.14$ ,  $SD = 4.78$ ). No significant differences were found for age group. Time since loss was significantly associated with PTG ( $p = .023$ ) but not with complicated grief ( $p = .328$ ); participants bereaved for less than one year reported the lowest PTG scores ( $M = 27.80$ ).

### Correlation Analysis

Spearman's rho correlation analysis revealed a statistically significant negative relationship between complicated grief and PTG ( $r = -0.398$ ,  $p < .001$ ), indicating that higher levels of complicated grief were associated with lower levels of post-traumatic growth. The alternative hypothesis was therefore supported.

Table 3. Spearman's Rho Correlation Results

| Variables                                   | Spearman's rho | p-value |
|---------------------------------------------|----------------|---------|
| Complicated Grief and Post-Traumatic Growth | -0.398         | < .001  |

## DISCUSSION

The present study found a significant negative relationship between complicated grief and PTG ( $r = -0.398$ ,  $p < .001$ ) among Indonesian emerging adults who experienced parental bereavement, supporting the proposed hypothesis. This finding is consistent with Tedeschi & Calhoun (2004) theoretical model, which posits that PTG emerges through the gradual transition from intrusive to deliberate rumination. When an individual is burdened by complicated grief, marked by persistent yearning, identity disruption, and emotional distress, cognitive resources are consumed by distress management rather than meaning reconstruction. Consequently, the deliberate reflective processes that underpin PTG are impeded.

The magnitude of the correlation obtained ( $r = -0.398$ ) was slightly larger than that reported by Levi-Belz & Lev-Ari (2019;  $r = -.034$ ), who studied suicide-loss survivors. This difference may reflect the particular psychological salience of parental loss during emerging adulthood: the death of a parent disrupts a primary attachment figure and destabilizes the foundational sense of security and identity characteristic of this developmental period. The intensified relational disruption may therefore amplify the inhibitory effect of complicated grief on PTG.

A notable finding was that the majority of participants scored in the high category for both complicated grief (74.5%) and PTG (82.4%), indicating substantial co-occurrence of maladaptive grief and positive growth. This pattern is consistent with Zoellner & Maercker (2006) Janus-Face Model, which distinguishes between genuine PTG and illusory growth functioning as a palliative coping mechanism. Given that most participants also reported high complicated grief, it is plausible that some of the reported PTG reflects an illusory component functioning as a self-regulation strategy to counterbalance ongoing negative affect rather than authentic psychological transformation.

The significant association between time since loss and PTG ( $p = .023$ ) supports meaning-making model: over time, individuals may increasingly integrate the loss into their broader meaning system, facilitating PTG even when complicated grief persists. The absence of a significant association between time since loss and complicated grief suggests that, for some individuals, maladaptive grief responses remain relatively stable across the three-year window examined.

Gender differences were observed for both variables, with female participants reporting higher complicated grief and lower PTG compared to male participants. This aligns with Santos & Soares (2024), who identified gender as a risk factor for complicated grief, and with broader literature indicating that women tend to exhibit greater emotional expressivity and rumination in bereavement contexts. The pronounced gender imbalance in the present sample (83.3% female), however, limits the generalizability of these findings.

From a cultural perspective, Indonesia's collectivistic orientation and high religiosity may simultaneously heighten vulnerability to complicated grief, through strong familial attachment and perceived disruption of social roles, and facilitate PTG through communal support and spiritual meaning-making resources. Future research should explicitly examine the moderating role of cultural and religious factors in the grief and PTG relationship within this population.

### Limitations

Several limitations should be acknowledged. First, the cross-sectional correlational design precludes causal inference. Second, online recruitment via social media may have introduced selection bias, potentially overrepresenting younger and more digitally active individuals. Third, the pronounced gender imbalance (83.3% female) limits the representativeness of the sample. Fourth, the reliance on self-report measures is subject to response bias. Future studies should employ longitudinal designs, probability-based sampling strategies, and more gender-balanced samples to address these limitations. Exploration of potential mediating or moderating variables, such as social support, resilience, and spirituality, would also contribute to a more comprehensive understanding of the mechanisms linking complicated grief and PTG.

### CONCLUSION

This study demonstrated a significant negative relationship between complicated grief and post-traumatic growth among Indonesian emerging adults who experienced parental bereavement ( $r = -0.398$ ,  $p < .001$ ). Higher levels of complicated grief were associated with lower PTG, consistent with the theoretical proposition that maladaptive grief responses hinder the cognitive processing necessary for positive psychological transformation. The high prevalence of complicated grief in this sample reflects the particular vulnerability of emerging adults who lose a parent, a period during which individuals are actively constructing their identities and the parental figure serves as a primary attachment base.

Although the majority of participants also reported high PTG, this finding warrants critical interpretation. The co-occurrence of high complicated grief and high PTG suggests that a portion of the reported growth may be illusory in nature, representing an adaptive self-regulation strategy in the context of ongoing distress rather than authentic transformation. Genuine post-traumatic growth appears to require the resolution of complicated grief as a prerequisite: as long as maladaptive grief dominates, psychological resources are directed toward surviving distress rather than constructing new meaning from loss.

These findings have practical implications for grief counseling and psychoeducation in Indonesian clinical and community settings. Clinicians and counselors are encouraged to prioritize interventions that facilitate adaptive grief processing, such as grief-focused therapy and acceptance-based approaches, before supporting bereaved individuals toward post-traumatic growth. Emerging adults experiencing parental loss should be encouraged to recognize early signs of complicated grief and to seek professional support, as adaptive resolution of bereavement is the key to enabling genuine positive growth.

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