Special Issue: Psychology, Global Threats, Social Challenge, and the COVID-19 Pandemic: European Perspectives Original Articles and Reviews



Emotional and Behavioral Responses to COVID-19

Explanations From Three Key Models of Personality

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Abstract: This review appraises evidence for the role of personality in COVID-19 related emotions and behaviors. Three key models of personality are considered: the Five-factor Model, HEXACO model, and Reinforcement Sensitivity Theory (RST). In line with personality research, more generally, most studies focus on the Five-Factor model. Key findings are that neuroticism is most associated with poor mental health, and extraversion is associated with a reluctance to socially isolate. Conscientiousness predicts compliance with safety guidelines but also with fewer prosocial behaviors, particularly stockpiling. Research within the HEXACO framework largely confirms these findings, especially for emotionality and mental health. The additional HEXACO Honesty-Humility factor is found to be associated with prosocial views and abstention from panic buying. Studies based on the Reinforcement Sensitivity Theory of personality indicate emotional conflict as people wish to stay safe while maintaining a sense of normality. Behavioral compliance is driven by activation in the Fight-Flight-Freeze System (FFFS; fear-related) and the Behavioral Inhibition System (BIS; anxiety-related). The Behavioral Approach System (BAS) is implicated in approach-driven behaviors such as avoiding infection. These findings have implications for health communications and post-pandemic support.

Keywords: Reinforcement Sensitivity Theory, Five-Factor model, HEXACO, COVID-19, mental health

Personality is one of the most widely studied aspects of psychology. Broadly speaking, personality traits reflect characteristic patterns of thoughts, feelings, and behavior (Funder, 2001). They are partly heritable, with genetic factors interacting with environmental circumstances, including early life experiences (Vukasović & Bratko, 2015). Although personality traits are malleable to a degree, particularly in the context of major life changes, individual differences remain fairly stable over the adult lifespan (Denissen et al., 2019).

Taylor (2019) identified personality as a key vulnerability factor in pandemic-related outcomes, particularly traits typified by susceptibility to stress, anxiety, and fear. Negative emotionality and stressful life events are associated with suppressed immunity, thus increasing the likelihood of infection (Cohen et al., 2012; Irwin & Slavich, 2017; Taylor, 2019). Moreover, immune responses to vaccination can be dampened in individuals experiencing distress (Kiecolt-Glaser, 2009). The COVID-19 pandemic and associated social restrictions have resulted in concerning levels of stress (Taylor et al., 2020), fear (Ahorsu et al., 2020), and anxiety (Lee, 2020). Brooks et al. (2020) review reported

a range of additional negative psychological effects, including post-traumatic stress symptoms, confusion, and anger. Stressors include longer quarantine duration, infection fears, frustration, boredom, inadequate essential supplies, inadequate information, and financial loss. If the pandemic is to be managed effectively and the virus eradicated, it is vital to understand individual differences in emotional reactance and compliance with government safety regulations.

This review examines some of the recent findings that help explain how personality influences virus-related emotions and behaviors and focuses on research-based on three well-established, validated, and widely used models of personality: The Five-Factor Model, HEXACO Factor Model, and Reinforcement Sensitivity Theory (RST). The literature included was sourced from two databases, PsycINFO and PubMed, using the search term "COVID", together with terms to represent the three theories of interest (Five-factor model; Big Five; reinforcement sensitivity; HEXACO). According to the PRISMA model, this search strategy yielded a total of 81 hits. We conducted a further search on Google Scholar using the same terms, which yielded

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600 hits. We selected 48 articles for the review. The rest could not be used because either they were not published in English, were not available to the authors in full-text form, were replica entries in the databases, were unpublished student theses or, on closer examination, were found not to be relevant to our main focus. Articles for inclusion were agreed upon among the four authors. It is acknowledged that many more articles will have been published since this review was developed in early 2021.

The Five-Factor Model

The Five-Factor Model (Costa & McCrae, 2006) is arguably the most widely used in personality research generally and COVID-19 research specifically. It comprises five traits: openness to experience (creative, receptive to new ideas/ change, independent); extraversion (outgoing sociable, confident); agreeableness (trusting, helpful, warm-hearted); conscientiousness (self-controlled, goal-oriented, determined); and neuroticism (tendency to psychological distress, maladaptive coping; Costa & McCrae, 2006). Most studies employ short questionnaires which yield global scores on the five superordinate traits only, as these are quickly administered and generally free to use. The five traits are found to have predictive utility across a wide range of applied settings (Ozer & Benet-Martínez, 2006), with high conscientiousness and low neuroticism having the strongest associations with mental and physical health (Bogg & Roberts, 2013; Friedman & Kern 2014; Heilmayr & Friedman, 2020; Lahey, 2009; Strickhouser et al., 2017).

Individuals high in neuroticism may be particularly vulnerable in a pandemic (Taylor, 2019). They present with above-average levels of health anxiety in general (Asmundson et al., 2001), and this is known to be associated with COVID-19 specific anxiety (Jungmann & Witthöft, 2020). Neuroticism is associated with generally high levels of emotional reactivity, a perception of the world as threatening, and poor and maladaptive coping with stress (e.g., emotion rather than problem-based). Furthermore, individuals high in this trait can become easily bored and lack purpose, which has been linked to fear of COVID-19 (Caci et al., 2020). This effect is greater when individuals are also involved in negative fantasy - a well-documented form of maladaptive coping, which leads to detachment from, and denial of everyday problems (Plante et al., 2017). A further challenge is uncertainty. Frequently changing and sometimes ambiguous social guidelines together with unpredictable progress in terms of vaccine development have made the COVID-19 pandemic an intrinsically uncertain time. Individuals differ in their responses to uncertainty, and these differences have been linked to neuroticism (Hirsh & Inzlicht, 2008). Combined with a predisposition to health anxiety generally (Asmundson et al., 2001), this creates a recipe for high levels of illness uncertainty, a cognitive stressor associated with the feeling of having no control. This can lead to perceptions of greater symptom severity, psychological distress, poor coping, and reduced quality of life (Wright et al., 2009).

Unsurprisingly, several studies have found associations between neuroticism scores and mental health during the pandemic, and some have highlighted interesting aspects of behavior that also suggest that individuals high in neuroticism experience more negative affect and higher affective variability (i.e., mood swings) compared to individuals lower in the trait. In addition, those individuals paid more attention to COVID-19-related information and experienced more negative affect in their daily lives during the pandemic (Kroencke et al., 2020). While this may be linked to health anxiety more widely, it is notable that repeated media exposure cannot only increase anxiety but may also result in misplaced and resource-intensive health-protective and help-seeking behaviors (Garfin et al., 2020). The incessant flow of largely negative news and social media reports about the pandemic may particularly impact people high in neuroticism.

Neuroticism has been associated with pandemic-related behaviors as well as anxieties. Asselmann et al. (2020) examined behaviors in German students at the start of the pandemic in March/April 2020. They found that those who were less emotionally stable (i.e., higher in neuroticism) felt insecure in public places, used public transport less often, and hoarded supplies (see also Abdelrahman, 2020, who reports similar results in Qatar). This may be attributable to the anxiety-provoked vigilance often linked to high neuroticism (Friedman & Kern, 2014). Interestingly, however, a US study conducted around the same time found differently. Aschwanden et al. (2020) collected personality data in January/February 2020, before the World Health Organisation declared the COVID-19 outbreak a global pandemic. At this time, though most US citizens were aware of COVID-19, most were less cognizant of its spread and seriousness. Aschwanden et al. subsequently examined whether personality scores predicted behaviors in March 2020 after Americans were requested to follow social restrictions designed to slow the spread. They found that while higher neuroticism was associated with higher COVID-related anxiety and an expectation that the pandemic would last a long time, it was also associated with fewer pandemic-related precautions (such as handwashing and avoiding close contact with others) and unrelated to preparatory behaviors, such as stocking up on food. Both these findings are in direct contrast to those of Asselmann et al. (2020). Aschwanden et al. (2020) used a measure of personality to examine individual subfacets of each trait.

On further examination, they found the observed effects were driven by one facet of neuroticism, depression. They attribute their findings to maladaptive coping linked to poor mental health, which was previously been reported in association with higher neuroticism (e.g., Cooper et al., 2000). Other research has also suggested that neuroticism is a strong predictor of less adaptive psychological functioning, both directly and through diminished resilience during the pandemic (Kocjana et al., 2020). While Aschwanden et al. (2020) highlight the importance of comprehensive measures of personality, which allow for fine-grained analysis, it also suggests that participants in Asselmann et al. (2020) and Abdelrahman's (2020) research were not so depressed, despite high neuroticism. Hook and Rose Markus (2020) have discussed how some US cultural narratives contribute towards health-related stress and worry. Cultural differences and variations in how the pandemic was publicized and managed across nations may account for the disparity in results. Furthermore, an investigation incorporating data from 55 countries concluded that when government guidelines are perceived as stringent, neuroticism is a less strong predictor of precautionary behavior (Götz et al., 2021). At the beginning of the pandemic, neuroticism may have been relevant in determining behavior but decreased in importance once governmental intervention transformed the adoption of precautionary behaviors from individual decisions to enforced regulations and subsequently new social norms (Götz et al., 2021).

There is also evidence for the influence of other Five-Factor traits, particularly compliance with pandemic-related restrictions. Extraversion predicts a lack of engagement with containment measures such as social distancing (Carvalho et al., 2020). Schmiedeberg and Thönnissen (2021) also found that extroverts had a negative perception of social restrictions, but only if they were single. Those with a romantic partner showed no such effect. Extraversion is intrinsically linked to sociability; extraverted individuals may find it difficult to refrain from being close to others, even though they show a willingness to engage with other recommendations such as hand washing. Conversely, more conscientious individuals are most likely to comply with social restrictions (Krupić et al., 2021). Conscientiousness is also linked with preparatory behaviors before lockdown, including stockpiling goods and changing travel plans in advance (Aschwanden et al., 2020). Qualitative research by Benker (2020) suggested that the procurement of additional goods may be a resilience strategy. Conscientiousness is also known to be associated with emotional resilience (Oshio et al., 2018), with resilience mediating the relationship between conscientiousness and anxiety at stressful times (Shi et al., 2015).

Individual differences in how people perceive the pandemic situation may interact with personality traits in determining behavior. The pandemic is an example of a "strong situation" (Cooper & Withey, 2009; Snyder & Ickes, 1985) - this hypothesis suggests that in certain contexts, situational cues can overpower personality dispositions and, therefore, personality may be a less powerful predictor of behavior than it might otherwise be. This question motivated research by Zajenkowski et al. (2020) on compliance with COVID-19 related social restrictions. These researchers measured Five-Factor traits and how the COVID-19 pandemic is perceived using the DIAMONDS (i.e., Duty, Intellect, Adversity, Mating, Positivity, Negativity, Deception, and Sociality) framework (Rauthmann & Sherman, 2016), a taxonomy of measurable dimensions of situational perceptions. Participants who perceived the pandemic regulations as characterized by duty and negativity were most likely to comply with the restrictions. These perceptions explained more variance in behavior than the Five-Factor traits, even neuroticism. Zajenkowski et al. (2020) suggest that a sense of moral obligation may be an important quality to convey in attempts to persuade the population to comply with safety guidelines. In their study, the only Five-Factor trait directly associated with compliance was agreeableness, generally typified by helpfulness and altruism. Neuroticism was unsurprisingly associated with generally unfavorable perceptions of the situation (i.e., high adversity and negativity along with low positivity and mating), which is consistent with the characteristic of this trait (Jonason & Sherman, 2020).

Nikčević and Spada (2020) identified an anxiety syndrome specifically related to COVID-19, characterized by avoidance, worrying, and threat monitoring. Nikčević et al. (2020) further examined the relationship between health anxiety, Five-Factor traits, and established general anxiety and depression measures. Perhaps unsurprisingly again, neuroticism was positively and directly associated with generalized anxiety and depression symptoms, while agreeableness was negatively associated. In terms of the other traits, however, anxiety about COVID-19 mediated the effects. Extraversion, agreeableness, and conscientiousness were negatively associated with COVID-19 anxiety, which, in turn, was positively associated with generalized anxiety and depression symptoms. Extraversion was negatively associated with the COVID-19 anxiety syndrome, while openness was positively associated, suggesting that the two traits are likely to have protective versus vulnerability-inducing, effects respectively. Nikčević et al. (2020) concluded that generalised anxiety and depression symptoms assessed during the pandemic are associated with personality traits and the tendency towards health anxiety and psychological distress specifically related to the COVID-19 situation.

The majority of research has necessarily been crosssectional, but Liu et al. (2021) attempted to address the limitations of this by asking their participants to report their perceived stress levels before the pandemic began, as well as at the time of the study. They found that higher neuroticism and extroversion were associated with higher levels of stress during the pandemic and a greater increase in stress levels than before. They further reported that the perceived threat of COVID-19 and self-efficacy for following government guidelines significantly mediated the relationship between neuroticism and stress, suggesting that individuals with higher neuroticism experienced higher levels of stress due to higher levels of the perceived threat and lower levels of efficacy. There was, however, no mediating effect on the relationship between stress and extraversion. Liu et al. (2021) suggest that for extroverts, stress comes from sources other than a health threat, possibly from enforced social isolation, a state alien to the intrinsic nature of that trait.

Anglim and Horwood (2021) compared data collected during the pandemic with measures taken pre-COVID-19. Contrary to expectations, the association between personality and well-being did not seem to change substantially. In contrast to the conclusions of Nikčević et al. (2020), Anglim and Horwood (2021) suggest that negative well-being observed during the pandemic is driven by personality because the effects are additive. In other words, if an individual has high neuroticism, low extraversion, and low conscientiousness, they are likely to have lower well-being. COVID-19 related effects are negative irrespective of personality however when added to existing levels of wellbeing, the overall effect is more severe for people with this trait profile. One change they did observe was that the effect of extraversion on well-being was reduced when measured during, as opposed to before, the pandemic. Further evidence that lockdown conditions are likely to have deprived extroverts in particular of a primary source of well-being. Anglim and Horwood (2021) also highlight that factors such as unemployment, increased financial insecurity, and suffering from COVID-19 also influence well-being, but are independent of personality. In the US, Sutin et al. (2020) tested participants in January-February 2020 as details of the virus emerged, and again in March 2020 after the pandemic was confirmed and behavioral guidelines were in place. Neuroticism decreased, particularly the facets of Anxiety and Depression, while other traits scores did not change. Like Anglim and Horwood, Sutin et al. suggested that anxiety and distress may be attributed more to the pandemic than to personality. Their study supports the much-debated theoretical standpoint that FFM traits are stable, even in the face of extreme, non-normative life events and stressors.

Finally, Sahni et al. (2020) offered insight into betweengroup effects of personality on resilience during the pandemic. They found extraversion, conscientiousness, and low neuroticism to positively correlate with emotional resilience in working adults, whereas resilience was associated with conscientiousness and openness to experience. For a sample of "homemakers" (all adult women), agreeableness was the significant factor for students. Sahni et al. (2020) interpret these results in terms of perceived characteristics of these groups: working adults being outgoing, energetic, dependable, and self-confident, students being active learners, are considered to be organized, imaginative and divergent thinkers, while homemakers are highly prosocial. These characterizations may appear to be based on stereotypes and might be culturally specific (the study was conducted in India); however, they concur with the results of a pre-COVID-19 meta-analysis (Oshio et al., 2018) which reported that resilience was positively associated with agreeableness, extraversion, conscientiousness and openness, and negatively associated with neuroticism. They also indicate the importance of considering social group differences for the understanding of pandemic-related effects.

HEXACO

The HEXACO (Honesty-Humility, Emotionality, EXtraversion, Agreeableness, Conscientiousness, and Openness to Experience; Ashton & Lee, 2007) framework was developed to extend the Five-Factor model. It adds a sixth factor, honesty-humility, reflecting a tendency to be fair and genuine in dealing with others, and emotionality replaces neuroticism but remains the same construct. HEXACO is suggested to be a useful ecological model of behavioral and emotional responses to risk situations (Modersitzki et al., 2020; Volk et al., 2021).

Studies employing the HEXACO framework in COVID-19 are fewer than the Five-Factor model, and results have tended to replicate. For instance, emotionality is associated with worry and anxiety and higher levels of conscientiousness with behavioral compliance and the likelihood of stockpiling goods (Bentall et al., 2021; Oljača et al., 2020; Zettler et al., 2021). Emotionality is linked to stronger perceptions of COVID-related threat and, indirectly, to stockpiling behavior as individuals attempt to ameliorate their fear. This effect, and the relationship between high conscientiousness and stockpiling, as measured according to the HEXACO model, is reported robust across North American and European samples (Garbe et al., 2020). Given that stockpiling is objectively unrelated to saving lives or jobs during a health crisis, it is suggested that goods such as toilet paper function as purely subjective symbols of safety (Garbe et al., 2020).

The Honesty-Humility (HH) component is more interesting, associated with prosocial behavior even at personal

cost. Where significant effects are reported, they have mostly focused on stockpiling with HH positively associated with refraining from stockpiling behaviors (Columbus, 2020; Garbe et al., 2020). Although individuals can see the potential personal benefit, higher HH presents them with a social dilemma: between their own needs and those of wider society. They may refrain from stockpiling because they are motivated to maximize societal outcomes and willing to forego their welfare maximization (Columbus, 2020). Furthermore, HH is associated with the perception of social cohesion in fighting COVID-19 (Zettler et al., 2021). This is interesting in the light of earlier work which has found that HH correlates negatively with inequality related worldviews, such as social dominance orientation (Lee et al., 2010) and with a desire to obtain luxury goods or high social status (Ashton & Lee, 2007). This implies a lower motivation for competitiveness to acquire social or material advantages, which may explain abstention from stockpiling under pandemic conditions.

Branovački et al. (2021) surveyed a range of emotional and behavioral adjustment factors over two months during the official state of emergency in Serbia. They identified three clusters of responses that presented differing HEXACO personality profiles. The Adaptive cluster tended to comply with government guidelines and constraints. They showed higher scores on Honesty/Humility, Extraversion, Agreeableness, and Conscientiousness compared to the other clusters and lower emotionality. Given that high Honesty promotes justness, modesty, and avoidance of greed, individuals in the Adapted cluster may be able to postpone personal goals and activities with minimal frustration and feelings of deprivation. Comparatively, both the Antagonized and Passive clusters presented lower scores in Honesty, Extraversion, Agreeableness, and Conscientiousness. What distinguishes between these is emotionality. The Antagonized were found to be emotionally stable and showed no fear of infection. Low honesty-humility can be associated with enhanced self-evaluation, and when combined with low scores on Agreeableness and Conscientiousness, this is suggested to promote the low adherence to pandemic-related constraints observed in this group. The Passive group presented higher emotionality scores, and it is suggested that they may internalize their emotions, with fear promoting greater compliance, though not necessarily with the magnanimity apparent in the Adapted group.

Other research has considered HEXACO traits in terms of coping and resilience. From data collected at the start of the pandemic, Gojković et al. (2021) identified three HEXACO personality profiles which they termed Resilient (high extraversion and conscientiousness), Under controlled (low conscientiousness), and Overcontrolled (high emotionality and conscientiousness, low extraversion).

Resistant individuals used problem-focused strategies such as planning as well as emotion-focussed strategies such as social support seeking. Both other groups used more maladaptive strategies such as substance use and avoidance.

During lockdown restrictions in Canada, Volk et al. (2021) also examined the associations between HEXACO traits and coping strategies, however finding that seeking socio-emotional support is associated with higher emotionality and extraversion. These results explain the insecurity and low mood typical of emotionality triggering attachment behaviors, while extroverts generally crave interaction to maintain well-being. Banerjee and Rai (2020) have highlighted the negative effects of loneliness during the lockdown and social isolation. Individuals high in emotionality or extraversion, though outwardly presenting very different personality profiles, may both use social contact as a coping strategy. Volk et al. (2021) also report that individuals high in emotionality use problem-focussed coping strategies that promote safety, as do those higher in conscientiousness where a tendency to planning and forethought may support precaution behavior. Volk et al. suggest that a tendency to planning and forethought associated with conscientiousness may support precaution behaviors. Orderliness has been associated with less panic fear during the pandemic (Trzebiński et al., 2020). However, lower levels of honesty-humility and conscientiousness were associated with maladaptive coping, including rule breaking and substance use, in link with their characteristic propensity for risk-taking (Ashton & Lee, 2007). Overall, Volk et al. (2021, p. 4) suggest that "a personality profile of being socially involved, socially sensitive and thoughtful/careful" is associated with healthier responses. This seems to contradict the well-documented evidence that high neuroticism (the FFM version of emotionality) is associated with poor health and health behaviors, in part linked to maladaptive coping (Lahey, 2009). Volk et al. (2021) highlight the dearth of coping research based on the HEXACO model and espouse its value over the FFM in assessing coping responses. They assume that emotional support seeking is adaptive, which can be if it features constructive help to deal with negative feelings. It forms part of the battery of strategies adopted by the resilient individuals identified above by Gojković et al. (2021). However, often, emotionfocussed coping allows individuals to dwell on their negative feelings and delay addressing them. A detailed discussion of coping theory is beyond the scope of this review, however coping literature frequently shows emotionfocussed coping with being unhelpful (Penley et al., 2002). Gojković et al. (2021) describe how the key emotion driving this strategy is fear. The specific and novel contextual demands intrinsic to the COVID-19 pandemic may influence how coping strategies are used, both in general and over time as social circumstances change.

Reinforcement Sensitivity Theory

Reinforcement Sensitivity Theory (RST) is a prominent neuropsychological theory of personality that emphasizes emotion, motivation, and learning. The original conceptualization (Gray, 1982) focussed on two systems that underpin individual differences in personality and psychopathology. The behavioral approach system (BAS) was defined as sensitive to conditioned appetitive stimuli and motivating goaldirected approach behaviors. Activation of this system was said to lead to the experience of hopeful excitement, drive persistence to reach desired goals, and elation when they have been attained. Conversely, the behavioral inhibition system (BIS) was responsive to conditioned aversive stimuli. Its activation was said to motivate passive avoidance behaviors and contribute to risk assessment and rumination, which can eventuate in the experience of anxiety. In sum, whereas the BAS is related to the experience of positive affect, the BIS relates to the experience of negative affect (Corr, 2008).

Revision of the original RST model presents a more detailed understanding of the motivational systems. Gray and McNaughton (2000) separated the avoidance mechanism into two components, a Fight-Flight-Freeze System (FFFS), which mediates reactions to all aversive stimuli (conditioned or otherwise), leading to avoidance and escape behaviors, and a BIS which is activated by goal conflict and occurs when there is equal activation of the fight-flight-freeze and BAS. As such, Gray and McNaughton (2000) characterized the BIS as responsible for detecting and resolving this conflict rather than being sensitive to punishing stimuli per se. This separation is now widely recognized, in conceptual and psychometric terms (Corr & Cooper, 2016; Gray & McNaughton, 2000; Perkins et al., 2007).

Most recently, the BAS has also been elaborated. The primary function of this system is to move an organism along a Spatio-temporal gradient towards a final biological reinforcer. In order to achieve this goal, there are a number of distinct but related BAS processes. "Reward Interest" and "Goal-Drive persistence" that characterize the early stages of approach can be distinguished from "Reward Reactivity" and "Impulsivity" as the final reinforcer is approached and captured (Corr & Cooper, 2016; Corr & Krupić, 2017, 2020). In terms of RST, anxiety and worry are future-focussed, concerning thoughts about an uncertain future and what may, or may not, happen, and are linked to the BIS. On the other hand, fear is a response to an imminent threat linked to the FFFS, which is responsible for triggering action to move the organism away from that immediate threat (Corr & Cooper, 2016; Gray & McNaughton, 2000). BIS hypersensitivity is a common factor in depression and anxiety (Katz et al., 2020), while BAS hyposensitivity is modestly linked to depression only (Bijttebier et al., 2009).

Despite the importance of motivational factors to behavioral compliance, few COVID-19 related studies to date have considered RST. In the early stage of the pandemic, Bacon and Corr (2020a) examined how RST traits were associated with COVID-19 health and safety concerns and intention to self-isolate, which was not mandatory in the UK at that time. After controlling for general negative health attitudes, most concerned respondents scored highly on behavioral activation-related Reward Reactivity, suggesting that they were motivated to take protective action of some kind despite prevailing worry/anxiety. Since reward reactivity is important in the neural processing of emotional stimuli (DePascalis et al., 2017), negative emotions around COVID-19 may trigger displacement activity, such as hoarding and panic buying. Such behaviors may alleviate concern by maintaining a sense that a semblance of a normal lifestyle can be maintained, even though no government restrictions on social behavior were in place at the time of this study. Benker (2020) has suggested that procurement of additional goods may be a resilience strategy in COVID-19. Furthermore, individuals higher in fightflight-freeze traits often attend most to negative aspects of their environment. As such, they may be more susceptible to fear contagion, internalizing the negative emotions and behaviors around them and perceiving them as social norms. Bacon and Corr (2020a) also found that personal safety concerns were highest in those who also scored most highly on fight-flight-freeze, which reflects fear/avoidance. They suggested that participants were experiencing psychological conflict: between the urge to stay safe (fight-flightfreeze related) and the desire to maintain a normal, pleasurable (BAS-related reward reactivity) life. Ways of ameliorating conflict may include behaviors such as panic buying, reflecting reward-related displacement activity. Intention to voluntarily self-isolate was associated with FFFS scores and low scores on the BIS, which relates to anxiety.

In later work, Bacon and Corr (2020b) showed how RST traits could act alongside elements of the behavioral immune system in triggering pandemic-related behavior. The term behavioral immune system defines how unconscious psychological responses, linked to an evolved disgust response, act as the first line of defense against potential pathogens (Murray & Schaller, 2012; Schaller & Park, 2011). Unlike the reactive physiological immune system, the behavioral immune system is proactive, facilitating behavioral avoidance before the organism becomes infected and triggering a perception of personal vulnerability to disease in any given context. In Bacon and Corr's (2020b) study, this perception was related to the RST system fight-flight-freeze, reflecting that people prone to

experiencing fear see themselves as most vulnerable. Fear has been related to higher levels of health compliance (Harper et al., 2020; Pakpour & Griffiths, 2020) contributing to distress and lower mental health in general. However, perceived vulnerability to disease comprises two components, germ aversion and perceived infectability, which can be measured separately (Duncan et al., 2009). Bacon and Corr (2020b) found that germ-aversion was related to goal-driven persistence and the BIS, as defined within RST. Germ aversion represents distress in situations where the disease might potentially be transmitted. Proactive goal-drives may trigger preventative action, such as mask-wearing. However, the RST BIS was also activated, which suggests that even germ-averse individuals experience some level of dissonance - a cognitive conflict between an urge to stay safe and a wish to preserve normality.

RST traits are also linked to coping under stress, highly relevant to the pandemic situation. Over a three-wave study, Katz and Yovel (2020) showed that BIS activation predicted depression and anxiety in the context of COVID-19, but this occurred indirectly via rumination. Behavioral approach system activation, on the other hand, was related to an adaptive cognitive coping strategy, reappraisal, which reflects the ability to think about a situation in a more positive light and negatively to depression and anxiety. These results suggest not only that the relationship between these RST traits and negative affect is mediated by emotion regulation strategies but also that these strategies may be related to each revised RST system.

General Discussion

Table 1 summarizes the relationship between personality traits and distinct emotional and behavioral responses to COVID-19 in terms of the three models discussed.

The nature of the circumstances has meant that most research is necessarily cross-sectional, and this could be argued to limit the extent to which conclusions can be drawn about the extent to which reported effects are due to the pandemic. Some research is concerned with factors that are intrinsically COVID-19 related (e.g., attitudes to COVID-19 vaccinations, strategies for coping with lockdown, etc.), and many of these issues are known from earlier research to trigger given outcomes. For instance, enforced lockdown resulted in greater social isolation for many people, a factor associated with loneliness, decreased mental and physical well-being, and even early mortality (Holt-Lunstad et al., 2015). In terms of personality, social distancing and lockdown policies affect extroverts more negatively than introverts because extroverts tend to have more social interaction. When this intrinsic part of their personality is curtailed, they may feel exceptionally burdened by loneliness (Gubler et al., 2020). Liu et al. (2021) drew similar conclusions from cross-sectional data where participants were asked to recall how they were feeling before the pandemic, in addition to the time of the study. Of course, this approach may be limited by reliance on memories of pre-COVID-19 times, which may be viewed through somewhat rose-tinted glasses. Sibley et al. (2020) compared matched samples of New Zealanders assessed before and during the first 18 days of lockdown. Although they did not measure personality directly, they report higher institutional trust, patriotism, and mental distress post lockdown. All can be related to personality differences. The one study that compare well-being before and during the pandemic (Anglim & Horwood, 2021) highlights how social factors related to employment or strained relationships, for instance, have affected almost everyone, irrespective of their personal characteristics. However, they also report that the generally positive relationship between extraversion and well-being was significantly attenuated during lockdown when extroverts could not socialize in the way they were accustomed to. This suggests that emotional and behavioral changes may arise from an interaction between certain personality traits and pandemic-related factors, with some personalities affected more than others.

Finally, while consideration of social and personal factors, such as age, ethnicity, or country of residence, are beyond the scope of a review focused on personality, it is notable that the vast majority of the research cited here was conducted in western cultures, particularly the UK, Europe, and the US. While COVID-19 related research has been conducted elsewhere, for instance in China, it has not focused on personality. Further, as Taylor (2019) has commented, understanding effects on well-being in developing countries is lacking, and further research to this end is needed.

Personality and Public-Health Communications

There are some practical implications for health and risk communications. Such communication aims to provide the public with the information they need to make appropriate behavioral choices while also allaying fears. Although fear has been related to a higher level of health compliance in a few studies (e.g., Harper et al., 2020; Pakpour & Griffiths, 2020), it also contributes to a higher level of distress and lower mental health in general. For this reason, health messages must be designed in such a way to produce better health compliance while at the same time not adding to existing levels of fear, anxiety, and depression. Ideally, such messages should include more than simple instructions, but also guidance and ideas for coping and building

Table 1. Summary table of relationship between personality traits and distinct emotional and behavioral responses to COVID-19

	Emotional response to COVID-19				Behavioral response to COVID-19		
	Distress (anxiety, depression)	Worry	Resilience	Well-being	Social distancing	Protective behavior (washing hands, wearing masks, germ aversion etc.)	Stock pilling
Five-factor traits							
Extraversion	_		+	+	_	+	
Agreeableness	_		+				
Conscientiousness	_		+	+	+	+	+
Neuroticism/Emotionality	+	+	_	-	+/-	+	
Openness			+				
HEXACO							
Honesty-Humility							_
RST							
BAS Reward Interest							
BAS Goal-Drive Persistence					+	+	
BAS Reward Reactivity		+			+		
BAS Impulsivity							
Behavioral Approach System	+				_	+	
Fight-Flight-Freeze	+	+			+		

Note. RST = Reinforcement Sensitivity Theory; BIS = Behavioral Inhibition System; + = positive correlation; - = negative correlation; +/- = mixed findings. Empty cell indicates either lack of data or zero effects. The summary for the same-name Five-factor and HEXACO traits are presented together under the same row.

resilience, alongside psychoeducational material on grief, anxiety, depression, helplessness, apathy, frustration, and anger – all emotions which can be triggered by the public health situation and living under lockdown conditions (Shultz et al., 2015; Taylor, 2019).

Research following the swine flu epidemic in 2009 showed that communications could be effective if: (a) the public believes the situation to be severe and the recommendations effective; (b) they believe themselves to be susceptible; (c) they trust the authorities issuing the guidelines, and; (d) there are few barriers to implementing the guidelines for them personally (Kanadiya & Sallar, 2011; Taylor, 2019). One approach is to enhance perceptions of selfefficacy. This, in turn, should elicit positive outcome expectancies and subsequently increase the desired behavior. However, as the review above indicates, personality can differentially affect perceptions. Individuals high in neuroticism, for instance, may feel concerned and susceptible but often lack trust (Evans & Revelle, 2008). Their propensity to low mood may also present a psychological barrier to proactive behavior and predispose them to maladaptive coping behaviors. On the other hand, extroverts are more trusting but may be less likely to obey social-distancing rules unless situational cues and concerns are strong enough to outweigh their natural predisposition and the psychological toll that comes with lack of social engagement. Blagov (2021) showed that agreeableness and conscientiousness predicted the appeal of compassionate public health messages (e.g., protecting vulnerable people), while conscientiousness also predicted messages encouraging personal responsibility. High neuroticism was linked to the appeal of disease avoidance messages. One possible explanation of the mechanism linking these traits and adaptive responses to the pandemic may increase susceptibility to public health messages.

In terms of RST, people in a psychological goal conflict (related to the BIS) may attempt to relieve anxiety through approach behaviors, such as panic buying. Effective communication will need to target the anxiety which underlies behavior. Generally speaking, gain-framed health messages are more effective when targeting prevention behaviors (such as handwashing) than loss messages (e.g., the consequences of not handwashing). RST systems influence perceptions of persuasive health messages, with emotions related to BASs (including anger) receptive to gain messages. Conversely, BIS emotions (fear, end emotional conflict) make people more receptive to the loss messages (Yan et al., 2012). Behavioral approach system activation is inherently approach-motivated, and the system moves individuals towards the desired goal (not catching the virus as an example of an active avoidance). On the other hand, behavioral inhibition is more concerned with avoidance or moving away from an undesired situation. This interpretation presents an explanation for Yan et al.'s (2012) results. They suggested that for televised communications, gain messages should be aired after programs highlighting perceived injustice, value-inconsistent behavior, or obstacles to goal achievement. Yan et al. (2012) propose that these may induce a sense of anger, which can trigger the BAS. Conversely, fear-inducing programs, such as many TV dramas, may activate the BIS and should, therefore, precede loss-framed communications. Their research did not concern health specifically, though they discuss how health-related issues may elicit fear (if the recipient feels vulnerable) or sadness (if the recipient empathizes with the plight of others). Both emotions can stimulate the BIS, enhancing receptivity to loss-framed appeals (Yan et al., 2010, 2012).

A few studies have suggested that compliance can be achieved by promoting proactive or positive goals and targeting the BAS. For example, Bacon and Corr (2020a) found that reward reactivity tendencies (i.e., the measure of how strongly one is experiencing the reward), alongside fear-related tendencies, are important in accounting for compliance. In their follow-up study, Bacon and Corr (2020b) reported a role for a further behavioral approach component, goal-driven persistence (perseverance to accomplish long-term goals), in the prediction of COVID-19 related health compliance. A comparable finding was reported by Krupić et al. (2021), the effect of both reward reactivity and goal-driven on health compliance was replicated with different psychometric measures and in a different culture (Croatia vs. the UK). These findings suggest that it would be more effective (and/or less costly) if the public health messages were reframed to evoke motivation and behavior rather than eliciting negative emotions.

Post-Pandemic Implications

Finally, there are implications of personality in a post-pandemic world. Research following previous pandemics and serious disease outbreaks highlights the importance of psychological factors (Taylor, 2019). Following the SARS outbreak of 2003, many people experienced ongoing post-traumatic distress, even 4 years afterward (Hong et al., 2009). Following COVID-19, Taylor and Asmundson (2020) estimate that 10% of people, maybe many more, will develop severe psychological problems, such as mood disorders, anxiety disorders, or posttraumatic stress disorder. Alongside the vestigial effects of the pandemic itself (both psychological and medical) and the trauma of witnessing severe ill-health and death, many people will be experiencing ongoing personal difficulties with finance, employment, or education.

Furthermore, evidence suggests that some people have developed what has been termed COVID-19 Stress Syndrome, characterized by fear of infection, touching surfaces or objects that might be contaminated, xenophobia (fear that foreigners might be infected), and traumatic stress symptoms (e.g., COVID-19 related intrusive thoughts and nightmares). However, people with this extreme stress response also seem to have predisposing psychopathology,

particularly related to health anxiety (Taylor et al., 2020). The symptoms may abate with time, but it is possible that they may translate into a chronic stress disorder (Taylor & Asmundson, 2020). In sum, mental health is likely to be an ongoing concern for psychologists.

Our review above clearly suggests that a one-size-fits-all approach will not be effective. The potential burden on already stretched health services in providing mental health support will be extensive. As such, there is a need for lowcost and easily administered interventions, especially for those with more mild-moderate symptoms, and which can also take into account individual differences. The internet presents an especially fruitful platform for the delivery of psychological care, with the potential to get many people to access to self-help services and therapy sessions costeffectively. It has been suggested that the pandemic may be a turning point in the wider application of e-mental health (Wind et al., 2020). An example recently trialed is COVID-19 Confidential, an online resource for public healthcare workers in the UK (Bennett et al., 2020). The website offers a safe and anonymous space for people to tell their COVID-19 stories verbally and express their emotions. Such activities provide psychological benefits (Bennett et al., 2020).

Our review suggests the importance of individualized support, taking into account personal circumstances, perceptions, and barriers, as well as personality. Several COVID-19 specific measurement scales have been developed during the pandemic, all of which are short and very quick, and simple to administer (e.g., Ahorsu et al., 2020; Lee, 2020; Taylor et al., 2020). These have potential utility as screening tools to offer a more bespoke approach. Understanding how personality traits are associated with scores on these measures will allow for further individualization and potentially more effective outcomes. Another issue to consider is who will take up these intervention opportunities. Individuals high in neuroticism or RST-defined BIS sensitivity may feel too anxious or helpless to participate, whereas such a proactive activity may appeal to those with a sensitive BAS or those open to new experiences. Further research looking specifically at the lived experiences of the pandemic and involving members of the public and patients in the development of interventions is desirable

Directions for Future Research

The COVID-19 pandemic has thrown into stark relief several issues that should be addressed in ongoing research, particularly given that the virus may never be fully eradicated (Phillips, 2021). A major priority will be developing effective and reliable screening procedures to identify those most at risk of ongoing mental health difficulties, including PTSD (Taylor, 2019; Taylor & Asmundson, 2020).

Screening and treatment procedures need to account for individual differences in personality to recognize divergences in how people respond to COVID-19 related stress and how they cope with it. The psychological impacts of long-COVID-19 should also be addressed.

Another important topic is obtaining a better understanding of attitudes to vaccination. Vaccination hesitancy is frequently associated with belief in negative conspiracy theories, such as vaccines facilitating government control or profits for Big Pharma. However, recent research has indicated that while this may be the case for some individuals, in many cases COVID-19 related hesitancy is due to concerns about safety, particularly because the vaccines were developed so rapidly (Bacon & Taylor, 2021). This is also likely to be the case in future pandemics, so understanding more about how best to alleviate such concerns is imperative. The role of personality traits in vaccination hesitancy remains an under-researched topic. While individuals high in trait neuroticism will be particularly worried, other traits contribute to concerns in such extreme and novel circumstances. Bacon and Corr (2020a) went some way to examine this in terms of RST but did not consider vaccination hesitancy specifically. Personality research may, for instance, focus on how to engender trust and an internal locus of control (the feeling that one can control one's life outcomes). Similarly, a continued emphasis on personal hygiene measures, such as handwashing, will be important in keeping the virus at bay, and these traits are likely important in this respect. People are most likely to comply if they feel their actions make a difference in protecting themselves and their community.

To end on a positive note, there is evidence that some people are not only resilient but can find a silver lining in serious negative life events, such as improved personal relationships, a greater appreciation for life, personal inner strength, and changes in life philosophy (Bride et al., 2008). Research might usefully consider this in the context of COVID-19, examining how personality traits contribute to posttraumatic growth and how these insights can inform interventions.

Conclusions

The research reviewed has illustrated the importance of considering individual differences in personality traits in understanding COVID-19 related emotions and behaviors. Evidence relating to the Five-Factor model, HEXACO model, and the RST of personality conceptualize traits in different ways, however, there is considerable agreement in terms of the type of personality profile most at risk, particularly in terms of mental health – psychological distress is related to the dispositional tendency to fear, anxiety and

poor coping. Conscientiousness and HEXACO trait honesty-humility are linked to behavioral compliance. RST examines personality from a motivational perspective, which is important in terms of poor mental health (tendency to behavioral inhibition/fight-flight-freeze) and how behavior may be predicted by different components of the BAS (see Table 1).

Additionally, physical health effects should also be considered as they may linger for a considerable time after the pandemic is over (Del Rio et al., 2020), not least in terms of long-COVID-19, continued illness in people who have either recovered from COVID-19 but are still reporting lasting effects of the infection, or have had the usual symptoms for far longer than would be expected (Mahase, 2020). Generally speaking, there are three main pathways between personality and physical health outcomes; reduced immunity, through behavior which in the case of COVID-19, includes ignoring government guidelines, and when personality changes because of ill-health or medication (Heilmayr & Friedman, 2020). Research to date has not considered how dispositional factors may influence these pathways in terms of COVID-19. Overall, the lingering effects of COVID-19 itself and its social and emotional correlates provide fertile ground for insightful research, including the opportunity for more longitudinal studies.

This review is not exhaustive; indeed, new research is emerging at such a pace that this would be extremely difficult to achieve but has considered research conducted within the framework of arguably the three most widelyused models of personality, but there are other trait characteristics that do not cleanly fit into the Big Five/Six or RST typologies, for instance, the so-called dark triad of narcissism, psychopathy, and Machiavellianism (e.g., Nowak et al., 2020), among others. A larger-scale systematic review is recommended to inform evidence-based initiatives post-pandemic. Additionally, recommended actions such as social distancing and mask-wearing can be considered health behaviors, and the extensive literature on this should not be disregarded. Overall, personality is a potentially important factor in the aetiology and maintenance of ill-health, physical and psychological. To understand COVID-19 from a truly biopsychosocial perspective, these individual differences cannot be ignored.

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Received January 21, 2021 Revision received June 17, 2021 Accepted August 4, 2021 Published online January 5, 2022

Conflicts of Interest

The authors have no funding sources or conflicts of interest to disclose.

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