



Article

Lingering Shadows and New Horizons: The Complex Legacy of the COVID-19 Lockdown in Greece

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Abstract: The COVID-19 pandemic caused unprecedented global disruptions, profoundly impacting mental health and social well-being. While significant research has addressed the negative health consequences of social isolation, little is known about the post-pandemic experience, particularly in Greece. This qualitative study investigates the lasting effects of social isolation during the COVID-19 lockdowns on individuals in Greece, exploring both the negative and positive consequences in the post-pandemic context. One-on-one interviews were conducted with fifteen participants, and the data were analyzed using a thematic analysis. The findings revealed that the lockdown had a profound and enduring impact. Many participants reported heightened social anxiety, a sense of disconnection, and lingering fear about re-engaging in normal social interactions. Nostalgia for prepandemic life, characterized by greater social connection and freedom, was a recurring theme. Despite these challenges, the study also highlighted positive outcomes. Some participants viewed enforced solitude as an opportunity for self-reflection and growth, discovering new interests or deepening their understanding of personal values and goals. These findings underscore the complex and enduring effects of social isolation. The study calls for targeted interventions to foster social connectedness and mental health resources, ensuring support as society transitions to a post-pandemic reality. Continued attention from policymakers and public health professionals is crucial.

Keywords: social isolation; COVID-19; lockdown; post-pandemic; mental health; qualitative research



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1. Introduction

Isolation is conceptualized as a multidimensional construct representing an insufficient quantity and/or quality of social interactions. As outlined by Weiss [1], isolation encompasses two interrelated aspects: social and emotional. Social isolation denotes the tangible absence of social connections, whereas emotional isolation, often termed loneliness, describes the adverse subjective experience stemming from lacking or unsatisfactory social bonds [1]. The COVID-19 pandemic was a critical period that escalated the experience of social isolation and the feeling of loneliness. Governments worldwide implemented non-pharmacological measures such as social distancing and lockdowns to curb the spread of the virus [2]. Despite Greece not witnessing a surge in cases akin to other countries such as China or Italy, its populace dealt with challenges such as self-isolation, leading to psychological stress and heightened vulnerability to mental health issues [3,4]. More specifically, in a sample of 4216 Greek people, it was found that psychosomatic disorders and changes in sleep habits were prominent [5]. In an additional study among 650 Greek

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adults, respondents presented high levels of anxiety, depression, stress, and trauma-related distress, with younger adults being more vulnerable to adverse mental health outcomes [6].

Recognizing the significance of loneliness and social isolation is crucial, as these conditions have been linked to adverse physical and mental health outcomes. Research has shown that social isolation can have detrimental effects on cardiovascular health, contributing to conditions such as high blood pressure and lung disease [7,8], particularly among vulnerable populations such as the elderly, minorities, and those facing socioeconomic challenges [9,10]. In addition to the physiological consequences, social isolation exerts a negative impact on mental well-being, exacerbating symptoms of depression, anxiety, and suicidal thoughts [10–12]. Furthermore, loneliness has been associated with future mental health issues up to nine years later [13] and to high mortality rates [14]. Notably, the duration of loneliness has been identified as a predictor of future mental health problems [10–14]. Considering the widespread experience of social isolation resulting from pandemic-related measures, it is imperative to investigate individuals' experiences and the resulting consequences in the post-pandemic era.

In recent years, the prevailing focus of social, developmental, and clinical psychology literature has predominantly centered on the adverse effects of social isolation. However, a burgeoning body of research has emerged, shedding light on the potential benefits of solitude. An exemplary investigation by Ost Mor et al. [15] examined this phenomenon through interviews conducted with older adults and their adult caregivers. This study elucidated advantages associated with solitude, discernible across various life stages. Notably, older adults reported heightened levels of tranquility and a deepened connection with nature, often characterized by engagement in recreational pursuits, hobbies, or personal rituals, distinguishing their experiences from those of middle-aged counterparts. Furthermore, supplementary qualitative inquiries unveiled a prevailing sentiment of inner peace during solitary moments, accentuated by a perceived detachment from social pressures and a heightened sense of autonomy, fostering opportunities for self-reflection, self-efficacy, and personal growth [16].

The framework of Self-Determination Theory (SDT; [17,18]) offers valuable insights into the examination of the benefits during solitary experiences. Research informed by SDT suggests that the benefits of social isolation are more pronounced when it is motivated by intrinsic factors, such as personal interests and values, rather than internal pressures or demands [19,20]. This aligns with the study's aim to explore how individuals in Greece experienced solitude during the pandemic—whether it facilitated autonomy, self-reflection, and personal growth or led to distress and maladaptive coping. Unlike previous studies that primarily emphasized the negative consequences of isolation, this research provides a novel perspective by investigating both the adverse and potentially positive effects of social isolation in a post-pandemic Greek context, guided by SDT.

Quantitative research in Greece during the post-pandemic period has demonstrated that the pandemic has contributed to heightened psychological distress, coupled with the use of maladaptive coping strategies [21]. However, qualitative research on post-pandemic social isolation remains scarce. Furthermore, despite the extensive literature detailing the adverse implications of social isolation on both physical and mental health, there exists a dearth of studies specifically on the Greek population. Consequently, it becomes paramount to investigate the impact of social isolation on individuals within this demographic context, with a concerted effort to elucidate the consequences of solitary experiences and to tailor appropriate therapeutic support. This study aims to examine the following research questions: (1) how has social isolation during COVID-19 affected individuals' lives? And (2) what negative or positive consequences have they experienced?

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2. Materials and Methods

2.1. Participants and Procedures

After obtaining ethics approval for the study from the first researcher's university ethics committee (protocol code: 1007698035 and date of approval: 21 November 2023, an advertisement outlining the objectives and inclusion criteria was posted on the primary researcher's social media platform. Convenience sampling was used to recruit individuals who met the following criteria: (1) Greek adults and (2) no clinical diagnosis or ongoing treatment. Potential participants who contacted the primary researcher received an information sheet, and any queries they had were addressed by the researcher. Fifteen participants, consisting of twelve females and three males, between the ages of 20 and 35, took part in the interviews (see Table 1). The sample size was deemed appropriate and consistent with previous recommendations [22,23]. All participants provided written informed consent prior to the interview.

Table 1. Participants' demographics.

Pseudonym	Age	Gender	Occupation
Dimitris	24	Male	Security Officer
Katerina	28	Female	Barwoman
Giannis	31	Male	Chef
Eleni	20	Female	Unemployed
Maria	30	Female	Programmer
Sophia	27	Female	Unemployed
Ioanna	31	Female	Personal Trainer
Alexander	35	Male	Teacher
Zoe	22	Female	College Student
Katerina	21	Female	College Student
Georgia	21	Female	Unemployed
Irene	29	Female	Secretary
Daphne	33	Female	Personal Assistant
Christina	28	Female	Social Worker
Janet	32	Female	Lawyer

Between November and December 2023, in-person interviews lasting between 20 and 40 min were conducted using a semi-structured interview schedule. Open-ended questions that guided the interviews related to the (1) experiences of social isolation, (2) feelings and thoughts during social withdrawal, and (3) perceived negative and positive outcomes of social isolation. The interview guide was developed based on key themes identified in the existing literature on COVID-19 and mental health. While it was not formally piloted or reviewed by external experts, it was designed to allow flexibility in responses, with prompts used to elicit further information when needed. Interviews were audio recorded using a password-protected USB recorder. All data were anonymized and stored securely on a GDPR-compliant platform accessible only to the researchers. At the end of the interviews, all participants received a debrief form which confirmed that their responses would be kept confidential and that they could withdraw from the study at any time. Given the potentially sensitive nature of the research topic on social isolation, participants were also provided with information about mental health charities and helplines.

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2.2. Data Analysis

A reflexive thematic analysis, following the guidelines of Braun and Clarke [24,25], was employed to analyze the dataset. Interview audio recordings were transcribed verbatim by the primary researcher. The analytical approach adopted a reflexive stance, emphasizing the subjective expertise of the coders and facilitating an open and organic coding process, rendering considerations of reliability and inter-rater agreement less pertinent, as advocated by Braun and Clarke [23]. Through this reflexive thematic analysis, a systematic interpretation of the data was achieved, unraveling patterns of shared meaning across the interviews. The transcripts underwent iterative readings for familiarization, accompanied by note-taking. Subsequent to familiarization, transcripts were meticulously reviewed and coded multiple times to ensure the thorough exploration and appropriate categorization of participants' perspectives. Codes, both latent and semantic, were systematically generated and categorized, ensuring the thorough exploration of participant perspectives. These were refined through ongoing discussions and reflexive engagement. Theme validation was approached through independent coding by both researchers before engaging in consensus discussions to reconcile themes and interpretations. This process ensured that themes were not only representative of the dataset but also critically examined from multiple perspectives. The identified themes were carefully named, defined, and scrutinized alongside excerpts from the dataset to substantiate conceptualizations [24,25]. Two main themes, each encompassing two sub-themes, were identified.

To ensure the reliability of the findings, meticulous records were maintained throughout the analysis phase, documenting interview transcripts, field notes, and coding procedures. Credibility was enhanced through independent coding by both researchers, followed by consensus discussions to reconcile identified themes and interpretations. Confirmability was enhanced by incorporating relevant quotes to illustrate emerging themes. Throughout the study, continuous reflexivity was employed, with the researchers documenting reflections considering that they also underwent a period of imposed social isolation due to the pandemic and had constructed their own experiences. By openly acknowledging biases and consciously setting them aside during data collection and analysis, we sought to bolster the objectivity and trustworthiness of our findings. Additionally, peer debriefing sessions played a crucial role in fostering critical discussions about interpretations and decisions, thereby enhancing the rigor of the research process.

3. Results

3.1. COVID-19 and Imposed Social Distancing

3.1.1. Fear and Nostalgia

All participants described the pandemic as an "unprecedented experience" accompanied by a pervasive sense of fear perpetuated by the media, as well as a feeling of obligation to safeguard themselves and their loved ones. This newfound apprehension significantly influenced their decision to take more protective measures such as prolonging their social withdrawal even after the lockdowns were lifted in fear of getting contaminated. Daphne likened her social isolation experience to "teetering on the edge of calamity". Participants also expressed longing and nostalgia for the life they had before the pandemic. They noted a heightened sense of impact due to the loss of autonomy, which deepened their reflection on their circumstances. Feeling confined within their homes without opportunities for expansion, they experienced profound frustration. Some participants found solace in the realization that their experiences were shared universally, understanding that they were not alone in their struggles:

"I experienced first-hand the widespread impact of the isolation measures and the halting of work... However, a silver lining emerged when I realized I wasn't alone in facing these COVID **2025**, 5, 23 5 of 10

challenges...it was a global phenomenon. It was a pandemic...an unavoidable reality affecting everyone". (Irene, 29)

3.1.2. Internet Abuse

Participants unanimously described the internet's pivotal role during social isolation, emphasizing its function as a primary medium for diversion and escapism, extending well beyond conventional social media or entertainment platforms. They delineated a striking increase in their online activity, ranging from 4–5 h to 10–15 h per day, attributing this surge to a desire to "evade reality" and immerse themselves in an idealized digital realm. This inclination towards online engagement was characterized as a form of temporary respite, akin to a "painkiller offering momentary relief from life's challenges". However, this heavy reliance on the internet during lockdowns had lingering effects, which participants reported still experiencing even after restrictions were lifted. Many described an ongoing dependence on online platforms, often finding it challenging to reintegrate into in-person activities. For some, the online world has become a "comfort zone" that is hard to escape, leading to a preference for virtual interactions over physical ones. In contrast, a few participants mentioned that they were actively trying to reduce their internet use, recognizing the need to recalibrate their social habits and regain a sense of control over their digital consumption.

"It's just easier to chat online where there's less pressure. I'm really trying to cut back on my screen time. It's tough, but I know I need to find a healthier balance between being online and being present in real life". (Dimitris, 24)

3.2. Social Isolation Consequences

3.2.1. Social Anxiety

Participants shared their feelings of loneliness and alienation during their experience of social isolation. They described it as akin to being trapped in "darkness", comparing it to a challenging cycle where the more they withdrew, the harder it became to reconnect. Two participants likened their tendency to isolate themselves to a drug. Dimitris, for instance, expressed, "It's like a drug; the more you do it, the more you want, and the harder it is to get out of it". Many participants found it challenging to meet new people after lockdowns were lifted, citing ongoing fears and stress from the pandemic as barriers. Additionally, participants expressed concerns about the negative impacts social isolation had on their well-being. Feelings of disconnection from the real world, social anxiety in physical settings, and difficulty maintaining meaningful in-person relationships were commonly mentioned. As Christina reflected, "I just couldn't connect with people the same way anymore. It felt like I didn't know how to talk to them or what to say". This sentiment was echoed by others who felt a profound shift in their interactions post-pandemic. Some felt like they were enduring social distancing for an eternity, struggling with lingering worries about being around others. Alexander described, "Even after things opened up, it was like a part of me still didn't trust being close to anyone. I'd catch myself thinking, 'Are we supposed to be this close?". They expressed feeling alone and disconnected, even when around others, as life didn't feel the same anymore, and everyone seemed to be scared:

"And then, when we came out of this, there were people in my circle who were troubled. Would it be crowded there now? Shouldn't we go? Is it dangerous? So, it was a little weird. You were with people but you also felt alone. Because things had changed". (Zoe, 22)

3.2.2. Uncovering Positive Outcomes

In the exploration of positive outcomes amidst social isolation, individuals perceived shifts in their cognitive processes. Janet described transitioning from dichotomous thinking to a more holistic perspective: "Before, I always saw things in black and white, but now I try to

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see the bigger picture. It's like a shift in how I approach problems—I feel more open-minded, like I can see all sides of a situation". Furthermore, this period of solitude prompted individuals to set meaningful goals for themselves. Individuals capitalized on the plethora of online resources available during this time. As Giannis shared, "It was like I had the time to think about what I really wanted to do. It wasn't just about getting through the day, but setting goals for myself, things I had been putting off for years". They seized the opportunity to learn new skills, such as acquiring proficiency in a new language through online courses. They utilized the solitude as an opportunity for introspection and personal growth, emphasizing the importance of self-reflection and self-improvement. Maria mentioned "participating in seminars aimed at self-empowerment", showcasing a proactive approach towards personal development. Additionally, the period of social isolation facilitated positive lifestyle changes for some individuals. For instance, some individuals reported cessation of smoking and alcohol consumption, while others initiated regular exercise routines:

"I quit smoking, which I couldn't do while interacting socially with the world because I was a social smoker. I earned a foreign language degree . . .I also became more energetic in terms of incorporating exercise into my life". (Georgia, 21)

Acknowledging the transformative effects of social isolation, a few participants perceived a process of personal fortification during this period. They delineated a journey towards heightened autonomy and emotional self-reliance, noting a newfound ease in embracing solitude. This newfound comfort rendered them less dependent on social interactions for validation or companionship, fostering a deeper acceptance of self:

"I became more autonomous, more independent emotionally...being alone will no longer scare me, spending time alone...even if I don't go out for two weeks. I don't care that much. So, on a personal level I think I became more independent if I can say so. I'm a bit more ok with myself". (Katerina, 21)

4. Discussion

The aim of this study was to explore the lived experiences of social isolation during the pandemic and its consequences in the post pandemic period. Understanding this phenomenon is crucial, given the multitude of factors that can exacerbate feelings of loneliness, as well as the various positive and negative impacts of this experience. Through a qualitative analysis of semi-structured interviews conducted with adults in Greece, two key themes were identified: (1) COVID-19 and imposed social distancing and (2) social isolation consequences. The findings suggest that the imposed lockdown and loss of in-person interaction had a negative impact on people, resembling a dark phase. Despite evidence indicating that Greece did not experience the same levels of mortality and infection rates as other countries [3,4], participants expressed intense fear of potential contamination and felt obligated to prolong their social isolation, taking extra measures to protect themselves and their loved ones. While previous studies have established a link between the fear of COVID-19 and feelings of loneliness [25,26], it appears that this fear persisted even after lockdowns, continuing to impact individuals' mental well-being. Some participants emphasized a perceived shift in their experience of life compared to the pre-COVID-19 era, describing how even when in the presence of others, they still felt disconnected, stressed, and lonely, or how they were still hesitant to socially interact. These findings indicate that the psychological impact of COVID-19 extends beyond the period of lockdowns. Even after the restrictions were lifted, individuals continued to experience loneliness and fear, which could potentially urge them to socially withdraw.

The findings further reveal that the COVID-19 pandemic impacted participants' social lives and emotional well-being. Many described their experience as being trapped in "darkness", a vivid metaphor reflecting the cyclical nature of social withdrawal. This aligns with

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existing psychological studies [27,28] suggesting that avoidance behaviors can reinforce and perpetuate social anxiety, creating significant barriers to re-engagement. Dimitris's analogy of isolation as a "drug" underscores how withdrawal becomes self-perpetuating—an initial coping mechanism that ultimately entrenches feelings of disconnection. These findings are consistent with prior research [29,30] highlighting the relationship between prolonged social isolation and heightened social anxiety (e.g., difficulties reconnecting with others, fear of crowded spaces, and hypervigilance about health risks). However, this study adds a nuanced perspective by focusing on the Greek context, where strong cultural norms of social interaction and community, such as a high value placed on close-knit family ties, frequent social gatherings, and communal support [31], may have amplified the emotional toll of isolation. Unlike more individualistic societies, where solitude may be more normalized or even sought after, Greek cultural norms emphasize strong social ties and an active public life, making social withdrawal feel more alienating. Participants' concerns about lingering fears of physical proximity and discomfort in social settings suggest that post-pandemic social reintegration is far from universal or automatic.

Our findings additionally shed light on the nature of coping during social isolation. The daily routines of participants revealed an increased reliance on the internet during their periods of social isolation. Overall, a consistent theme emerged wherein online activity, including social media browsing, served as a distraction strategy for individuals to create a different reality, alleviating challenging feelings. While a meta-analysis has demonstrated that distraction is among the most effective strategies for coping with negative emotions [32], our findings suggest that internet usage was perceived as a means to an end rather than a satisfactory alternative to in-person interaction. Further, participants' accounts reveal that the internet remains a preferred space for social engagement, perceived as safer than in-person interactions. This preference may inadvertently reinforce prolonged social withdrawal and heighten anxiety associated with face-to-face interactions in the post-pandemic era. While the internet served as a valuable support during COVID-19, its problematic use has been associated with worsening social isolation and impairing individuals' overall functionality in social contexts [33–35].

Nevertheless, our findings also highlight positive outcomes stemming from periods of solitude. Participants reported personal development through self-reflection, acquisition of new skills, goal setting, smoking cessation, and engaging in exercise. Additionally, participants viewed learning to live alone, overcoming fear of loneliness, and fostering autonomy as positive aspects of their experience. These findings confirm the existing literature suggesting positive outcomes from social isolation [15,16]. In contrast to research informed by SDT suggesting that social isolation may have benefits when driven by intrinsic factors [19,20], our study illustrates that even when imposed by external factors such as the pandemic, social isolation can foster personal growth as individuals seek ways to navigate their circumstances. Within the Greek context, where interpersonal relationships are central to identity and well-being, individuals may have been motivated to reframe their isolation positively as a means of adapting to the unavoidable circumstances imposed by the pandemic.

Limitations and Future Directions

To the best of our knowledge, this is the first qualitative investigation in Greece to thoroughly explore social isolation and its aftermath in the post-pandemic era. However, some limitations of this study warrant consideration. Firstly, all participants were within the age group of 20–35 and of Greek nationality, which may have restricted the generalizability of the findings. Different age groups and cultural backgrounds could offer varied experiences of social isolation, potentially limiting the transferability of our

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results. Additionally, the inherent small sample size in qualitative research further limits the breadth of these findings. While this study provides valuable insights into the impact of social isolation during and after the pandemic, further research is needed to examine these dynamics across more diverse populations. Future studies could also investigate the resilience factors and protective mechanisms that help mitigate the negative effects of social isolation and encourage opportunities for self-development during periods of social withdrawal. Additionally, interdisciplinary research could explore targeted mental health interventions and community-based programs to support individuals struggling with prolonged social isolation. Understanding how different cultural contexts influence coping mechanisms may further inform tailored intervention strategies

5. Conclusions

This study reveals that the COVID-19 lockdown had a profound and lasting impact on individuals' lives, with many still dealing with social anxiety, disconnection from others, and a lingering sense of fear. Even as life returns to normal, a sense of nostalgia for the prepandemic era persists, underscoring the psychological scars left by the prolonged isolation. However, the study also highlights that some individuals experienced personal growth during the lockdown, finding new avenues for self-development amidst the challenges. These mixed outcomes emphasize the complexity of the pandemic's influence, reinforcing the urgent need for sustained attention to the mental health of those affected. The practical implications of these findings suggest the need for comprehensive mental health support strategies. Mental health professionals should prioritize interventions addressing post-pandemic social anxiety, such as cognitive-behavioral therapy (CBT) and structured exposure therapy to help individuals gradually rebuild social confidence. Public health initiatives could focus on promoting community-based activities that encourage gradual reintegration into social life, particularly in cultures where social bonds are deeply valued. Policymakers should also consider implementing workplace and educational policies that support hybrid social models, allowing individuals to transition back to in-person interactions at a comfortable pace. Furthermore, digital mental health interventions, such as online counseling and peer support groups, could help bridge the gap for those who continue to struggle with social re-engagement. As the effects of the lockdown continue to shape people's lives today, it is crucial for public health policies to prioritize ongoing support, social reconnection efforts, and mental health interventions. The lasting psychological impacts of COVID-19 must not be underestimated, and there remains a critical need to foster resilience and ensure accessible, long-term mental health care for all.

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References

- 1. Weiss, R.S. Loneliness: The Experience of Emotional and Social Isolation; The MIT Press: Cambridge, MA, USA, 1973.
- 2. Cowling, B.J.; Ali, S.T.; Ng, T.W.Y.; Tsang, T.K.; Li, J.C.M.; Fong, M.W.; Liao, Q.; Kwan, M.Y.; Lee, S.L.; Chiu, S.S.; et al. Impact assessment of non-pharmaceutical interventions against coronavirus disease 2019 and influenza in Hong Kong: An observational study. *Lancet Public Health* 2020, 5, e279–e288. [CrossRef] [PubMed]
- 3. Giannouli, V.; Tragantzopoulou, P. Creativity is Not Related to Higher Cognitive Functioning: An Exploration Among Healthcare Professionals and Students During the COVID-19 Omicron Wave. SVOA Neurol. 2023, 4, 71–78. [CrossRef]
- 4. Zimeras, S.; Chardalias, K.; Diomidous, M. Epidemiological Analysis of the COVID-19 Epidemic in Greece. *Stud. Health Technol. Inform.* **2020**, 272, 21–23.
- 5. Anastasiou, E.; Duquenne, M.-N. What about the "Social Aspect of COVID"? Exploring the Determinants of Social Isolation on the Greek Population during the COVID-19 Lockdown. *Soc. Sci.* **2021**, *10*, 27. [CrossRef]
- 6. Liozidou, A.; Varela, V.; Vlastos, D.; Giogkaraki, E.; Alzueta, E.; Perrin, P.; Ramos-Usuga, D.; Arango-Lasprilla, J. Forced social isolation and lockdown during the COVID-19 pandemic: Depression, anxiety, trauma-distress and coping mechanisms of a Greek sample. *J. Public. Health* **2023**, *13*, 1261–1270. [CrossRef]
- 7. Shankar, A.; McMunn, A.; Demakakos, P.; Hamer, M.; Steptoe, A. Social Isolation and Loneliness: Prospective Associations With Functional Status in Older Adults. *Health Psychol.* **2017**, *36*, 179–187. [CrossRef]
- 8. Leigh-Hunt, N.; Bagguley, D.; Bash, K.; Turner, V.; Turnbull, S.; Valtorta, N.; Caan, W. An overview of systematic reviews on the public health consequences of social isolation and loneliness. *Public Health* 2017, 152, 157–171. [CrossRef]
- 9. Ryff, C.D.; Singer, B. Emotion, Social Relationships, and Health; Oxford University Press: Oxford, UK, 2001.
- 10. Tragantzopoulou, P.; Giannouli, V. Social isolation and loneliness in old age: Exploring their role in mental and physical health. *Psychiatriki* **2021**, 32, 59–66. [CrossRef]
- 11. Fichter, M.M.; Kohlboeck, G.; Quadflieg, N.; Wyschkon, A.; Esser, G. From childhood to adult age: 18-year longitudinal results and prediction of the course of mental disorders in the community. *Soc. Psychiatry Psychiatr. Epidemiol.* **2009**, *44*, 792–803. [CrossRef]
- 12. Evans, M.; Fisher, E.B. Social Isolation and Mental Health: The Role of Nondirective and Directive Social Support. *Community Ment. Health J.* **2022**, *58*, 20–40. [CrossRef]
- Loades, M.E.; Chatburn, E.; Higson-Sweeney, N.; Reynolds, S.; Shafran, R.; Brigden, A.; Linney, C.; McManus, M.N.; Borwick, C.; Crawley, E. Rapid Systematic Review: The Impact of Social Isolation and Loneliness on the Mental Health of Children and Adolescents in the Context of COVID-19. J. Am. Acad. Child. Adolesc. Psychiatry 2020, 59, 1218–1239.e3. [CrossRef] [PubMed]
- 14. Yu, B.; Steptoe, A.; Chen, Y. Social isolation, loneliness, and all-cause mortality: A cohort study of 35,254 Chinese older adults. *J. Am. Geriatr. Soc.* **2022**, *70*, 1717–1725. [CrossRef] [PubMed]
- 15. Ost Mor, S.; Palgi, Y.; Segel-Karpas, D. The Definition and Categories of Positive Solitude: Older and Younger Adults' Perspectives on Spending Time by Themselves. *Int. J. Aging Hum. Dev.* **2021**, *93*, 943–962. [CrossRef] [PubMed]
- 16. Weinstein, N.; Nguyen, T.; Hansen, H. What Time Alone Offers: Narratives of Solitude From Adolescence to Older Adulthood. *Front. Psychol.* **2021**, *12*, 714518. [CrossRef] [PubMed]
- 17. Ryan, R.M.; Deci, E.L. Intrinsic and Extrinsic Motivations: Classic Definitions and New Directions. *Contemp. Educ. Psychol.* **2000**, 25, 54–67. [CrossRef]
- 18. Ryan, R.M.; Deci, E.L. Self-Determination Theory and the Facilitation of Intrinsic Motivation, Social Development, and Well-Being. *Am. Psychol.* **2000**, *55*, 68–78. [CrossRef]
- 19. Thomas, V.; Azmitia, M. Motivation matters: Development and validation of the Motivation for Solitude Scale—Short Form (MSS-SF). *J. Adolesc.* **2019**, *70*, 33–42. [CrossRef]
- 20. Nguyen, T.T.; Ryan, R.M.; Deci, E.L. Solitude as an Approach to Affective Self-Regulation. *Pers. Soc. Psychol. Bull.* **2018**, *44*, 92–106. [CrossRef]
- 21. Paschali, A.; Karademas, E.C. Immunity, Self-Regulation, and COVID-Related Distress Two Years Following the Outburst of the Pandemic. *Psychol. J. Hell. Psychol. Soc.* **2024**, 29, 424–437. [CrossRef]
- Olivera, J.; Braun, M.; Gómez Penedo, J.M.; Roussos, A. A Qualitative Investigation of Former Clients' Perception of Change, Reasons for Consultation, Therapeutic Relationship, and Termination. *Psychotherapy* 2013, 50, 505–516. [CrossRef]
- 23. Braun, V.; Clarke, V. To saturate or not to saturate? Questioning data saturation as a useful concept for thematic analysis and sample-size rationales. *Qual. Res. Sport. Exerc. Health* **2021**, *13*, 201–216. [CrossRef]
- 24. Braun, V.; Clarke, V. Using thematic analysis in psychology. Qual. Res. Psychol. 2006, 3, 77–101. [CrossRef]
- 25. Braun, V.; Clarke, V. Reflecting on reflexive thematic analysis. Qual. Res. Sport. Exerc. Health 2019, 11, 589–597. [CrossRef]
- 26. Kilic, D.; Aslan, G.; Ata, G.; Bakan, A.B.S. Relationship between the fear of COVID-19 and social isolation and depression in elderly individuals. *Psychogeriatrics* **2023**, *23*, 222–229. [CrossRef]
- 27. Richaud, M.C.; Muzio, R.N.; Lemos, V.; Urquijo, S.; Carlo, G. Editorial: Psychosocial effects of isolation and fear of contagion of COVID-19 on the mental health of different population groups. *Front. Psychol.* **2022**, *13*, 1011028. [CrossRef]

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28. Mowrer, O.H. A stimulus-response analysis of anxiety and its role as a reinforcing agent. *Psychol. Rev.* **1939**, 46, 553–565. [CrossRef]

- 29. Mowrer, O.H. "Sin": The lesser of two evils. Am. Psychol. 1960, 15, 301–304. [CrossRef]
- 30. Teo, A.R.; Lerrigo, R.; Rogers, M.A. The role of social isolation in social anxiety disorder: A systematic review and meta-analysis. *J. Anxiety Disord.* **2013**, 27, 353–364. [CrossRef]
- 31. Wilkialis, L.; Rodrigues, N.B.; Cha, D.S.; Siegel, A.; Majeed, A.; Lui, L.M.W.; Tamura, J.K.; Gill, B.; Teopiz, K.; McIntyre, R.S. Social isolation, loneliness, and generalized anxiety: Implications and associations during the COVID-19 quarantine. *Brain Sci.* **2021**, *11*, 1620. [CrossRef]
- 32. Papadopoulos, T. "Family", State, and Social Policy for Children in Greece. In *Child and Family Research and Policy*; O'Brien, J.B., Ed.; Falmer Press: London, UK, 2002.
- 33. Augustine, A.A.; Hemenover, S.H. On the relative effectiveness of affect regulation strategies: A meta-analysis. *Cogn. Emot.* **2009**, 23, 1181–1220. [CrossRef]
- 34. McNicol, M.L.; Thorsteinsson, E.B. Internet addiction, psychological distress, and coping responses among adolescents and adults. *Cyberpsychology Behav. Soc. Netw.* **2017**, 20, 296–304. [CrossRef]
- 35. Machimbarrena, J.M.; Calvete, E.; Fernández-González, L.; Álvarez-Bardón, A.; Álvarez-Fernández, L.; González-Cabrera, J. Internet risks: An overview of victimization in cyberbullying, cyber dating abuse, sexting, online grooming, and problematic internet use. *Int. J. Environ. Res. Public. Health* **2018**, *15*, 2471. [CrossRef]

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