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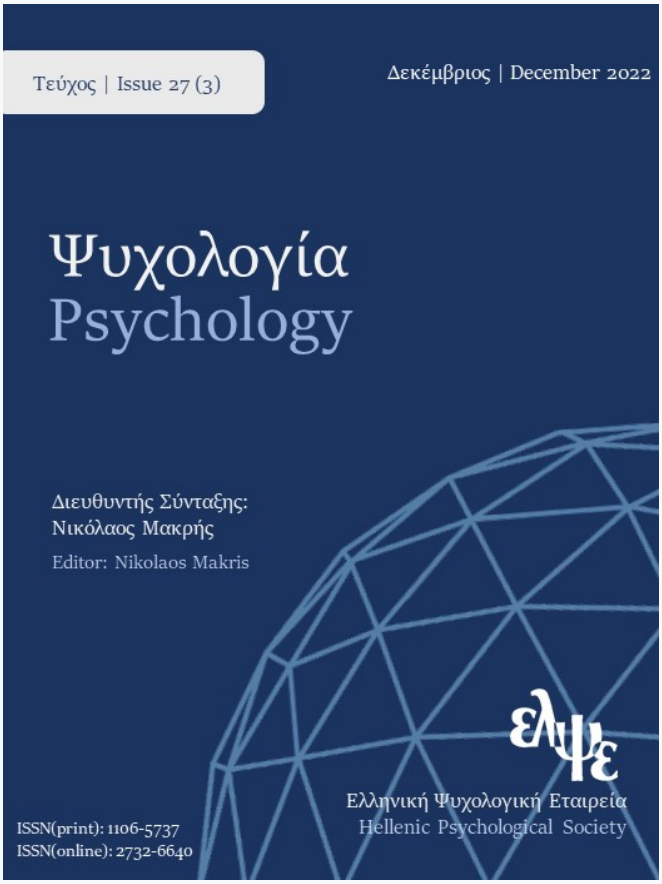

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ΕΜΠΕΙΡΙΚΗ ΕΡΓΑΣΙΑ | RESEARCH PAPER

Patterns of adjustment during the Covid-19 pandemic in Greece: the Resilient, the Rebels and the Internalizers

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KEYWORDS

Covid-19,
quarantine,
psychological distress,
patterns of adjustment,
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ABSTRACT

This study explored the patterns of adjustment to the quarantine restrictions imposed during the first Covid-19 wave in Greece. The sample comprised 1377 respondents from all geographical districts, mostly women (78.9%), with university degrees (80.7%) and an age range between 18-81. The Quarantine Adjustment Questionnaire was designed to assess the reactions of the general population to the lockdown restrictions and three diverse patterns emerged from the analyses: positive adjustment (the Resilient), confinement stress (the Rebels) and introspection (the Internalizers), which served as the dependent variables in this study. Multiple linear regressions revealed that each profile consisted of characteristic childhood backgrounds, personal attributes, fears and concerns regarding the Covid-19 pandemic. Economic distress and negative childhood experiences differentiated the psychological effects of quarantine restrictions and determined to a large extent the adjustment pattern employed by each group. Women presented the most resilient profile but also the most vulnerable one, depending on the social and personal resources at their disposal. Young people were the most reactive group to the quarantine restrictions, but also the most unprotected to current and future adversity. Implications regarding the impact of sociocultural factors on patterns of adjustment and the need for new policies to support the vulnerable population are discussed.

Introduction

The outbreak of the Covid-19 pandemic necessitated the implementation of extreme measures, such as social distancing and quarantine, to prevent the spread of the disease. Prolonged quarantines have mostly negative consequences (Chu et al., 2020) with confinement, loss of usual routine, and reduced social and physical contact with others leading to considerable distress and frustration in quarantined individuals (Brooks et al., 2020; Serafini et al., 2020). Indeed, most studies on the psychosocial impact of Covid-19 in various countries (Rajkumar, 2020; Vindegaard & Benros, 2020) focused on the mental distress and psychiatric symptoms present in the general population as a result of the Covid-19 pandemic and reported high levels of anxiety, depression and PTSS (COVID-19 Mental Disorders Collaborators, 2021; Fountoulakis et al., 2021; Parlapani et al., 2020; Skapinakis et al., 2020).

Other studies, however, have found, parallel to mental distress, more positive adjustment patterns in the general population, such as high levels of wellbeing (Valiente et al., 2021), optimism (Fisher et al. 2020) and self-efficacy (Robles-Bello et al., 2020). As past research suggests (Keyes, 2005), mental health and mental distress constitute separate correlated unipolar dimensions and both may be present during a crisis period.

Resilience and vulnerability to stress are also implicated in the process of adaptation to a stressful situation. According to current conceptualizations, resilience is construed as a process, not as an individual trait (Egeland et al., 1993; Curtis & Cicchetti, 2003; Kalisch et al., 2019; Luthar, 2006), a process that draws on individual, family and social resources (Bonanno et al., 2015; Luthar & Cicchetti, 2000; Masten, 2001). It has also been

suggested that questionnaires focusing on resilience are not adequate measures of this phenomenon (Windle et al., 2011); instead, resilience is best studied by employing multiple criteria to determine successful outcome, as well as multiple measurement points in time (Werner, 2005).

Based on the developmental psychopathology paradigm (Sroufe & Rutter, 1984; Cicchetti, 2006), the findings of several prospective studies (Cicchetti & Rogosch, 1997; Cowen et al., 1997; Werner & Smith, 1977) have shown that early childhood experiences lay the foundation for adult resilience or psychopathology and various forms of childhood maltreatment (physical, sexual, or emotional abuse and physical and emotional neglect) have been identified as a fundamental adversity in children's lives. Childhood maltreatment has consistently been shown to affect both physical and mental health in adult life (Felitti et al., 1998; Spertus et al., 2003; Spinazzola et al., 2014). In contrast, factors fostering resilience include good health, an agreeable and engaging temperament, intellectual and academic competence, an internal locus of control, a positive self-concept, the ability to plan ahead, a strong religious faith or sense of coherence, a positive relationship with an adult and family support (Werner, 2005).

How Greeks reacted during the first wave of the Covid-19 pandemic

Greece has been one of the first countries in Europe to implement early measures against Covid-19. During the period March 23- May 4, 2020 severe restrictions on the mobility of all citizens were imposed with some exceptions to cover basic necessities for a total of 42 days. Because of the timely measures and the overall compliance of the general population the spread of the coronavirus was successfully contained. By April 14, 2020, the date this research was launched, there were only a total of 2.170 reported infections and 101 deaths[1], mostly of the elderly, a very limited number of casualties compared to other countries.

According to nationwide polls that took place in April 2020 to assess the populations' reactions to the quarantine, only 23.7% endorsed the fear of infection with Covid-19 for themselves; however, their fear escalated to 62% for close members of the family. A rather high percentage of 46% stated that the risk to be infected with Covid-19 was slight or non-existent (Georgakopoulos, 2020). During the quarantine period, most Greeks (64.4%) spent more time with their family and only one out of 10 Greeks (10.9%) spent the confinement period alone (Georgakopoulos, 2020). These findings indicate that the fear regarding infection with Covid-19 was rather low (Vousoura et al., 2021) and family ties were strong to sustain Greek during this difficult period.

The impact of the 2009 economic crisis in Greece

During the quarantine many businesses closed down and Greeks clearly stated that their dominant fear (80%) was the upcoming increase of unemployment and poverty in Greece as a result of the pandemic, while 59% believed that the financial crisis ensuing from the pandemic would be as deep as the crisis of 2009 (Kapa Research, April 2020). Similar concerns have been reported in other countries (Maekelae et al., 2020; Rodriguez-Rey et al., 2020; Valiente et al., 2021).

Following the global financial crisis of 2008, Greece faced a severe debt crisis resulting in a drop of the gross domestic product (GPD) of Greece by 25% during the period 2008-2016, a decline equivalent to a war period and a steep increase in unemployment, poverty and brain drain (Mavridis, 2018). Severe and long-lasting economic crises have a toll on the mental health of individuals (Chaves et al. 2018; Gili et al, 2014; Uutela, 2010). Therefore, it is very likely that many Greeks entered the lockdown period carrying residual and/ or ongoing distress from the past 9 years of economic hardship.

Despite the fact that 6 out of 10 respondents felt that they had no control on important aspects of their lives and/or felt cut off from others (Kapa Research, April 2020), optimism was the affect selected mostly (40%) in April 2020 and more than half of the respondents stated that the Covid-19 pandemic would have a positive effect on solidarity (66,8%) and family relations (52,3%) (Georgakopoulos, 2020).

In summary, the picture that emerges from the two nationwide polls is a complex one, and is mediated by endemic economic (sovereign debt crisis) and sociocultural (strong family ties) factors. Therefore, it is important to investigate the actual experience of the population during the quarantine period and the effect of specific sociocultural and economic factors on the distress experienced in each country (Rajkumar, 2020).

[1] https://covid19.gov.gr/covid19-live-analytics

The present paper, which is part of a wider project, focuses on the way Greeks experienced and adapted to the restrictions of the quarantine during the first wave of the pandemic (April 14- May 6, 2020). We hypothesized that:

- H1: fears regarding the pandemic would negatively associate with participants' positive adjustment during quarantine.
- H2: participants' concerns regarding quarantine experience would affect positive or negative adjustment to quarantine confinement.
- H3: participants affected by the 2009 economic crisis would experience more fear and distress during quarantine.
- H4: personal attributes (i.e. positive attachment, sense of accomplishment) and social factors (i.e. financial stability) associated with resilience would have a buffering effect on quarantine stress.
- H5: childhood adversity would affect stress vulnerability.

Method

The methodology employed in this study was mainly exploratory, implementing a culturally sensitive (Somerfield & McCrae, 2000), bottom-up (Skinner et al., 2003) perspective on coping and psychological adjustment, which is more flexible and suitable for exploratory research. Although long, multiple-item standardized questionnaires represent the state of the art in psychometrics (Netemeyer et al., 2003; Nunnally & Bernstein, 1994), they may take up a lot of space in a survey, leaving many interesting areas unexplored (Fuchs & Diamantopoulos, 2009) and may result in respondent fatigue (Sharp & Frankel, 1983; Wanous et al., 1997).

Additionally, multiple-item scales have been criticized on the grounds of having multiple similar questions in order to increase their internal consistency. This redundancy may foster resentment in the responders and a reduced willingness to provide accurate responses (Wanous et al., 1997) and a greater likelihood to engage in "mindless response behavior" (Drolet & Morrison, 2001), ultimately undermining the validity of the study.

Single items have been proposed as an alternative because they are easier to interpret and have greater face validity (Metz et al., 2007). Single items have been successfully employed as valid and reliable measures in the areas of organization (Fisher et al., 2016), health (Bowling, 2005) and personality research (Konstabel et al., 2017), and guidelines for their use have been suggested (Fuchs & Diamantopoulos, 2009). Specifically, the specificity, concreteness and unambiguousness of a construct renders it suitable for a single item measure (Bergkvist & Rossiter 2007, 2009; Rossiter, 2002; Sackett & Larson, 1990). Therefore, single items constructed in this study were as straightforward and concrete as possible.

The specificity strategy proposed by Costa et al. (1996) was also taken into account in the methodology of this project. According to this perspective (a) questions should be phrased in a way that represents the specificity of the stressful situation and (b) coping items are better examined individually. In particular, Costa et al. (1996) argued that by focusing on the association of individual items interesting relationships may emerge that might otherwise be obscured when items are clustered in a few broad categories. This strategy may also be useful in other areas of psychological investigation beyond the scope of coping.

Therefore, given the exploratory nature of this project and in order to cover as many topics pertinent to the pandemic as possible, without undue burdening of the respondents, we elected to base our methodology on the construction and analysis of specific items, or single items selected from standardized questionnaires, to best investigate this unprecedented situation facing the country at the time.

Procedure

The survey was designed during the first phase of the quarantine and a pilot study was conducted prior to its delivery. All participants were at least 18 years old, and instructions explicated the aim of the project, the conditions of anonymity and their right to withdraw their participation at any time. The anonymous online survey comprised a total of 100 queries, utilized Google forms and was distributed on social media on April 14, 2020. The survey was approved by the Ethics Committee of a major university.

Participants

From a total of 1487 questionnaires received, 110 (7.39%) were excluded, because they were insufficiently completed. The final sample comprised 1377 respondents from all geographical districts (56.9% Northern

Greece, 28.6% Central Greece, 11% Southern Greece and 3.4% Western Greece), mostly women (78.9%), with university degrees (80.7%) and an age range between 18-81 (*M*= 40.10, *SD*= 13.50). Occupations included public (24.9%) and private sector employees (22.4%) and free lancers (16%); also university students (16%) and the long- term unemployed (5.8%). Six out of 10 (58.8%) were living in Athens and Thessaloniki, the two largest cities in Greece.

Measures

Quarantine Adjustment Questionnaire (QAQ)

A questionnaire was designed to assess the reactions of the general population to the lockdown restrictions. It comprised 22 items based on positive and negative comments which were often communicated by people during this period. Responses were provided on a 5-point frequency scale (1= *never* to 5= *very often*). Means and frequencies of responses to QAQ are presented in Table 1. Results of the exploratory factor analysis of the QAQ are presented in the results section.

Table 1

Quarantine Adjustment Questionnaire item frequencies (%)

Quarantine variables	Never %	A few times %	Several times %	Often %	Very often %
I cannot stand the yelling and tension in the house	33.5	26	18.2	10.6	11.6
It is suffocating for me to spend so many days indoors	21.3	32.3	20.2	13.3	12.9
I violate the lockdown rules	79.3	14.8	3.1	1.2	1.6
I cannot stand the loneliness / I cannot bear loneliness	43.1	31.6	12.9	6.7	5.7
I catch myself wondering what day it is	33.7	31.9	16.8	9.9	7.7
I wear the same clothes for many days	36.6	30	16.4	9.2	7.7
I miss my personal space and time	49.8	25	11.3	7.3	6.5
I miss physical contact	30.5	24	17.3	14.3	13.9
I miss going out with friends as I used to	5.2	16.8	21.5	21.5	35
I have come face to face with my problems	14.8	35.3	25.6	14.2	10.2
I have realized many things about myself	11.2	30	26.5	19.1	13.2
I realized that I am not as strong as I thought	50.7	30.3	9.9	5.4	3.6
I'm trying to understand what is happening to me at this time	22.2	25.8	25.4	16	10.6
I can take care of myself like used to	1.9	6.5	17.5	25	49
I can take care of my house like before	2.8	7.9	15	22.5	51.8
I've come closer to my own people	6.6	18.3	29.7	22.6	22.8
I now have time to do things I did not manage to do before	8.9	15.3	22.7	22.5	30.6
I feel good that my life has a slower pace	12.9	21.9	23.2	18.6	23.5
I use alternative ways to communicate with my loved ones	3.8	11.9	23	23.7	37.5
I've discovered new and interesting things to do to fill up my day	13.2	24.5	22.3	20	20.1
It is easy for me to stay at home	6.9	14.5	21.8	24.2	32.6

Covid-19 Fear items

Five items were formulated specifically for this study to assess fears regarding the negative impact of coronavirus on respondent's health, well-being and future plans (i.e., *I am very afraid of being infected with the coronavirus; I am afraid that a close relative of mine will be infected with the coronavirus; I am afraid that I will not be able to realize what I was planning for my future because of this crisis; I am afraid that something could happen to me that I won't be able to control; I am afraid that the coronavirus crisis will be the final blow to me after the psychological and financial exhaustion after the 2009 crisis).* Respondents were asked to rate the

frequency of their fear on a 5-point Likert scale ranging from 1= *never* to 5= *very often*. Although reliability for the five items was satisfactory (Cronbach's alpha= .77) these items were analyzed separately in order to differentiate the impact of the types of fear experienced on the dependent variables.

Concerns regarding the impact of the pandemic

Seven items were constructed as a response to the statement: "What I take with me from the experience of quarantine is……". The constructed items assessed different aspects of life (i.e., *How close I can get to illness and death; Employment and financial insecurity which will continue in Greece; I have no control over my life and future; How important it is to support each other during difficult periods; The restrictions on individual freedom; The fear that restrictions on individual freedoms would be retained beyond their original scope in the future*. Respondents were asked to rate their agreement on a 3-point scale (1= *Agree*, 2= *Disagree*, 3= *I don't know/I am not sure*). These items were entered individually in the statistical analysis in order to differentiate the impact of each concern on the dependent variables.

The 2009 Economic Crisis Experience Checklist

This checklist comprised 26 items specifically constructed for this study in order to assess: (1) the number of adverse (i.e., *I mostly worked part time during the crisis; I let my bills and loans go unpaid; I worked, but my earnings were very low*) or favourable (i.e., *my work flourished despite the crisis; my income was satisfactory for most of the 2009 crisis*) economic circumstances in respondents' lives during the economic crisis of 2009, (2) the positive (i.e., *I learned to live on less income during the crisis; Thanks to the economic crisis, I appraised things differently and set other priorities in my life*) and negative (i.e., *I went through periods of depression and resignation during the crisis; It was hard for me to adjust to the austerity imposed by the economic crisis of 2009*) adjustment of the respondents during the 2009 economic crisis. The response format for all items was 1=*Yes*, 2=*No*, 3= *I don't know/don't answer*.

A total of four scores were computed, for negative events (M = 2.21, SD = 2.36), for positive events (M = .45, SD =.69), for positive adjustment (M = 1.28, SD = .77) and for negative adjustment (M = 3.41, SD = 2.51) to the 2009 economic crisis. These computed variables were entered as predictors in the statistical analyses.

Adverse Childhood Experience items

Fourteen items were constructed to describe early experiences while growing up to the age of 18, similar to the methodology employed by Felitti et al. (1998) in the Adverse Childhood Experiences study. The experiences included physical (i.e., *I have been physically abused*), sexual (i.e., *I have been sexually abused*) and emotional abuse (i.e., *The adults were lashing out on me*), and neglect (i.e., *Nobody paid attention to me)*, family role reversal (i.e., *I provided emotional support to my parents*), witnessing violence (i.e., *There were many fights at home*) and a positive item frequently encountered in resilient children (i.e., *Someone had faith in me and my abilities*). It also included two variables pertaining to the use of alcohol or gambling in the family. Respondents rated the frequency of their early experiences on a 5-point Likert scale ranging from 1= *never* to 5= *very often*. Items were used individually in the statistical analysis in order to differentiate the impact of different types of maltreatment on the dependent variables.

Personal attributes and life orientation items

Eleven self-descriptive items were compiled to investigate personal attributes and attitudes towards life. These items covered many diverse areas and the single item approach was employed to minimize respondent burden. The items were phrased in as clear and unambiguous way as possible and included: secure attachment (i.e., *I have a special relationship with someone who is precious to me*), spiritual orientation (i.e., *I believe in God or some other superior power*) sense of accomplishment (i.e., *I have accomplished a lot in my life despite many difficulties*), self-restraint (i.e., *I can show self-restraint even if I want something very much*), practical orientation (i.e., *I often tell myself: whatever happened, happened.. let's see what we can do from now on…*), fatalism (i.e*., I believe that if it is your fate to suffer something bad, you cannot escape it, no matter how hard you may try to prevent it*), cynicism (i.e., *I believe that life is unfair*. The following items have been adapted from the *Sense of Coherence Scale* (Soc-13; Antonovsky, 1993): "*My life had clear objectives till now*" and from

the *Internal locus of Control Scale* (Rotter, 1966): "*Success is more the outcome of hard work rather than luck*" and "*My failures were often the result of my own mistakes*". Respondents were asked to rate their agreement on a 5-point Likert scale ranging from 1= *strongly disagree* to 5= *strongly agree*. Items were analyzed individually to delineate their differential impact on the dependent variables.

Control variables

Three items assessed Covid-19 related areas: being oneself or a family member at high-risk for being infected with Covid-19 (pregnant, over 65 years old, chronically ill) and worry regarding the number of Covid-19 infections in area of residence. Nine items assessed participants' health, psychological and relationship problems, financial condition, exhaustion due to the prior 2009 financial crisis, and optimism as of February 2020.

Statistical analysis

First, an exploratory factor analysis was conducted on QAQ to extract the factors depicting major patterns of adjustment to quarantine with the Statistical Package for Social Sciences, version 25. Next, three regression analyses were conducted with Positive Adjustment, Confinement Stress and Introspection as the dependent variables.

All the model prerequisites regarding linearity, homoscedasticity and multicollinearity were assessed for these regression models and no serious evidence was available to support a departure from these assumptions. The scatterplots of the residuals revealed that the data points were equally distributed, meeting the assumption of homoscedasticity; correlations were below .45 and VIF values for each predictor were below 2.5 for the first two models, meeting the assumption of no-multicollinearity. The only exception was the correlation of .75 between two of the Childhood Adversity items in the third model of 'Introspection', leading to a VIF values of 7.60 and 4.49 respectively, while the remaining VIF values were all below 3.72. These are variables from the same questionnaire and their association can be characterized as medium to high; however, considering the fact that in practice a common cut-off point for correlation is .80 and for VIF is 10, we chose to keep them both in the model. Furthermore, the q-q plots supported the normality assumption. Regarding outliers, the residual plots had no values falling dramatically outside the cloud of points, allowing us to continue without taking further action.

The adopted model selection strategy was the following; initially we assessed the impact of the 58 independent predictors on the dependent variables in univariate regression analyses in an effort to investigate the prognostic value of each one of these variables on its own, with the p-value cut-off set at 0.10. The next step was to include the significant ones in a backwards stepwise regression strategy, with a cut-off p-value= .05. The analysis was performed using the R project for statistical computing, version 3.6.3 (https://www.r-project.org/).

Results

Exploratory Factor Analysis

Initially, the factorability of the questionnaire was examined with the following criteria: 21 of the 22 items were correlated at least .3 with another item, showing reasonable factorability (see table 2); the Kaiser-Meyer-Olkin measure of sampling adequacy was .82; the Bartlett's test of sphericity was significant ($x2$ (231) =7616.2, $p < .001$); the diagonals of the anti-image correlation matrix were also all over .5; the communalities were all above .3 except the variable "*I violate the lockdown rules*" which was excluded, confirming that each item shared common variance with other items.

Principal components analysis was used in order to identify and compute composite scores for the factors underlying the quarantine questionnaire. The examination of the initial eigen values, parallel analysis, residuals and scree plot, showed six factors explaining 59% of the variance. The six factors explained respectively, 13%, 13%, 11%, 8%, 8% and 6% of the variance. Solutions for the six factors were examined using varimax rotation because the factors were not highly correlated to each other.

During the final stage, a principal components factor analysis for the 21 items using varimax rotation was conducted excluding the item "I violate lockdown rule" after an initial factor analysis revealed that the item communities were below .3, with six factors explaining 62% of the variance. The Kaiser-Meyer-Olkin measure of

sampling adequacy was .82 and the Bartlett's test of sphericity was significant (x2(210) = 7552.44, $p < .001$). An orthogonal rotation provided the best-defined factor structure. Four items had a cross-loading close to .3, however these items had other strong primary loadings. The first factor explained 14%, the second 13%, the third 11%, the fourth 9%, the fifth 8% and the sixth 7% of the variance.

The internal consistency for each of the factors was examined using Cronbach's alpha yielding .79 for the first factor labeled Positive Adjustment (5 items) and .74 for the third factor labeled Introspection (4 items). The initial low reliability of .41 in the second factor labeled Confinement stress (5 items) was elevated to .74 after eliminating the item "it is easy for me to stay at home". Only the first three factors were retained because they explained a higher proportion of the variance, had satisfactory reliability and at least 4 items each.

The total score of each of those factors was computed and three new variables emerged which were the dependent variables in this study: Positive adjustment (M = 21.11, SD = 5.13), Confinement Stress (M = 10.86, SD = 3.83), Introspection (M = 10.09, SD = 3.55). Factor loadings for QAQ are presented in Table 2. The final factor structure for Positive Adjustment, Confinement Stress, and Introspection is presented in Table 3.

Table 2

Factor loadings and communalities based on principal component analysis with varimax rotation for 21 items from the Quarantine questionnaire

Variables	Factors						Communality
	1	2	3	4	5	6	
QAQ_17	.80						.67
QAQ_20	.77						.65
QAQ_16	.71						.53
QAQ_19	.65						.48
QAQ_18	.63	.40					.64
QAQ_9		.77					.65
QAQ_2		.70					.64
QAQ_21		-.64		.30		.30	.68
QAQ_4		.60					.54
QAQ_8		.55					.47
QAQ_10			.80				.71
QAQ_11			.78				.69
QAQ_13			.69				.52
QAQ_12			.65				.51
QAQ_14				.88			.85
QAQ_15				.85			.82
QAQ_22					.83		.70
QAQ_1					.64		.53
QAQ_7		.33			.61		.57
QAQ_6						.80	.68
QAQ_5						.56	.49

**Note.* Factor loadings < .3 are suppressed

Table 3

Final factor structure, with factor names, variables paired to each factor, and respective Cronbach's Alpha, Means, and Standard Deviations

Number	Factor Name	Variables paired to the Factor	Cronbach's Alpha	Mean (SD)
1	Positive Adjustment	QAQ_17, QAQ_20, QAQ_16, QAQ_19, QAQ_18	.79	21.11 (5.13)
2	Confinement Stress	QAQ_9, QAQ_2, QAQ_21, QAQ_4, QAQ_8	.74	10.86 (3.83)
3	Introspection	QAQ_10, QAQ_11, QAQ_13, QAQ_12	.74	10.09 (3.55)

Multiple Regression Results

The first multiple regression analysis was conducted with Positive Adjustment as the dependent variable. It was found that 18 predictors significantly predicted Positive Adjustment: F (57, 1161) = 8.77, p < .001. The final R^2 was .30, while the adjusted R^2 was .27.

Higher Positive Adjustment was associated with responders who adjusted well during the 2009 economic crisis (β =.79, p <0.001) and believed in the importance of interpersonal support (β =1.80, p < .001). It was also associated with: occupation (p = .001) with university students and unemployed responders having lower scores; respondents who reported that their family had faith in them (p = .039); having to provide emotional support to their parents (p = .002); not having received adequate attention while growing up (p = .043), and having plenty of food for them to eat (p < .001). In terms of their personal attributes, participants high in Positive Adjustment had a sense of accomplishment (p < .001), a strong relationship with a significant other (p < .001), a practical orientation to life's problems (p < .001), trusted others (p = .044), believed in God (p = .040) and espoused the view that success is the result of hard work rather than good luck (p = .010). The size of their residential area (p = .041) was also significant with responders coming from Thessaloniki, cities with over 100.000 inhabitants and villages or islands with less than 5.000 inhabitants scoring higher in Positive Adjustment.

Lower Positive Adjustment was associated with male responders (β = -1.64, p < .001), psychological problems (β = -.76, p = .038), poor financial situation in February 2020 (β = -.81, p = .002) and having experienced quarantine as infringement of personal freedom (β = -.88, p = .002).

The second multiple regression analysis was conducted with Confinement Stress as the dependent variable. In a similar approach, 11 variables significantly predicted Confinement, with F (36, 1184) =12.64, p < .001. The final R^2 was .28, while the adjusted R^2 was .26.

High Confinement Stress scores were positively associated with having psychological problems prior to the pandemic (β = .67, p < .001), the concern that individual freedoms have been restricted during the lockdown (β = 1.62, p < .001) and the fear that this infringement would continue after the pandemic was over (β = .79, p < .001).

Regarding their fears higher Confinement Stress scores were positively associated with fear that loved ones would be infected (p = .041), that their future plans would be thwarted (p = .002), and that this would be the final stroke to them after the 2009 crisis (p < .001). Regarding their personal attributes, believing that life is unfair (p = 0.042), endorsing fatalism (p = .049) and having experienced many fights at home while growing up were also positively associated with Confinement Stress (p = .008). Confinement Stress was inversely associated to age (p < .001) with younger ages experiencing higher levels of stress and the fear of something uncontrollable happening to them (p = .020).

The final regression analysis conducted had Introspection as the dependent variable. In this regression 19 predictors were included in the final model, with F (52, 1164) =8.31, p < .001. The final R^2 was .27, while the adjusted R^2 was .24. Higher introspection scores were positively associated to relationship problems (β = 1.21, p < .001), psychological problems (β = .59, p = .033), having adjusted positively to the austerity measures during the 2009 economic crisis (β = .42, p < .001 feeling vulnerable to getting infected and dying (β = .68, p < .001), placing high value on their freedom (β = .63, p = .002) and believing in solidarity (β = 1.07, p = .001). Furthermore, living in Northern Greece (p = .024) and being a student or unemployed (p < .001) predicted Introspection. On the other hand, belonging to a high-risk group (β = -.52, p = .038) and being male (β = -.71, p = .002) were inversely associated to Introspection.

There were also positive associations between Introspection and several adverse childhood conditions, i.e., having experienced physical abuse (p = .008), or sexual abuse (p = .019), not having received adequate attention as a child (p = .029), having adults lash out on them (p = .040), having to provide emotional support to their parents (p = .012). However, adults speaking badly to them (p = .021), and not having enough food to eat (p = .006) were inversely associated with Introspection. Multiple regression results are presented in Tables 4, 5 and 6.

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Table 4

Multiple linear regression with Positive Adjustment as dependent variable

	Estimates	***CI*** ***LB – UB***	***p***		***Estimates***	***CI*** ***LB – UB***	***P***
FE20_ Psychiatr	-.76	-1.48 – -.04	.038	CHILD_ Reversal [2]	-.72	-1.40 – -.04	.002*
FE20_ Good_ Finance	.81	.30 – 1.33	.002	CHILD_ Reversal [3]	-.05	-.81 – .70	
sexgroup [2]	-1.64	-2.28 – -1.00	< .001	CHILD_ Reversal [4]	.07	-.87 – 1.02	
City [2]	-.25	-.93 – 0.44	.041*	CHILD_ Reversal [5]	1.06	.10 – 2.03	
City [3]	.73	-.31 – 1.77		LESSON_ Freedom	-.89	-1.44 – -.33	.002
City [4]	-.22	-.91 – .47		LESSON_ Support	1.80	.87 – 2.74	< .001
City [5]	-1.05	-2.07 – -.02		Accompl [2]	1.86	-1.21 – 4.93	< .001*
City [6]	.81	-.20 – 1.82		Accompl [3]	4.34	1.87 – 6.82	
occupgroup [2]	-.88	-1.75 – -.01	.001*	Accompl [4]	4.42	2.02 – 6.82	
occupgroup [3]	.31	-.63 – 1.26		Accompl [5]	5.14	2.77 – 7.52	
occupgroup [4]	-.02	-1.01 – .98		ATTACH_ Resil [2]	.99	-.65 – 2.64	< .001*
occupgroup [5]	-1.21	-2.18 – -.24		ATTACH_ Resil [3]	1.29	.08 – 2.50	
occupgroup [6]	-1.11	-2.35 – .14		ATTACH_ Resil [4]	1.33	.14 – 2.52	
occupgroup [7]	-1.24	-2.21 – -.27		ATTACH_ Resil [5]	2.59	1.50 – 3.68	
EMOT_ POSITIVE	.79	.44 – 1.14	< 0.001	CYN_5 [2]	-.57	-1.22 – .09	.044*
CHILD_ Att [2]	-.14	-.85 – .57	.043*	CYN_5 [3]	-.66	-1.39 – .07	
CHILD_ Att [3]	-.76	-1.81 – .29		CYN_5 [4]	-1.17	-1.96 – -.38	
CHILD_ Att [4]	.63	-.99 – 2.25		CYN_5 [5]	-.68	-1.85 – .49	
CHILD_ Att [5]	3.19	.58 – 5.79		External_Orientation_1 [2]	1.96	.49 – 3.42	< .001*
CHILD_ Faith [2]	.47	-.68 – 1.62	.039*	External_ Orientation_1[3]	.53	-.88 – 1.93	
CHILD_ Faith [3]	.56	-.56 – 1.67		External_ Orientation_1 [4]	1.33	.03 – 2.63	
CHILD_ Faith [4]	.74	-.34 – 1.82		External_ Orientation_1 [5]	1.95	.67 – 3.24	
CHILD_ Faith [5]	1.33	.32 – 2.34		God [2]	.29	-.87 – 1.44	
CHILD_ Food [2]	-1.30	-2.51 – -.09	< .001*	God [3]	-.33	-1.26 – .59	
CHILD_ Food [3]	-.46	-3.42 – 2.50		God [4]	.26	-.60 – 1.11	
CHILD_ Food [4]	-4.86	-9.36 – -.36		God [5]	.78	.04 – 1.53	.040*
CHILD_ Food [5]	-4.96	-7.62 – -2.30		Internal_ Control_1 [2]	.26	-1.89 – 2.41	.010*
				Internal_ Control_1 [3]	.55	-1.56 – 2.66	
				Internal_ Control_1 [4]	-.32	-2.40 – 1.76	
				Internal_ Control_1 [5]	.75	-1.33 – 2.83	

**Note.*R2 / R2 adjusted: 0.301/0.267, based on generalized likelihood ratio test on the specific degrees of freedom per variable

Table 5

Multiple linear regression with Introspection as dependent variable

	Estimates	$\frac{CI}{LB - UB}$	***P***		***Estimates***	$\frac{CI}{LB - UB}$	***P***
FE20_Rel	1.12	.65 – 1.60	< .001	CHILD_Att [2]	.45	-.07 – .97	.029*
FE20_Psychiatr	.59	.05 – 1.13	.033	CHILD_Att [3]	.28	-.50 – 1.06	
High_Risk_Self	-.52	-1.00 – -.03	.038	CHILD_Att [4]	.91	-.30 – 2.11	
sexgroup [2]	-.71	-1.16 – -.27	.002	CHILD_Att [5]	2.77	.81 – 4.72	
Greece [2]	-.14	-.55 – .27	.024	CHILD_Sex [2]	-2.25	-4.05 – -.45	.019*
Greece [3]	-.53	-1.56 – .50		CHILD_Sex [3]	2.65	-.20 – 5.50	
Greece [4]	-.86	-1.44 – -.28		CHILD_Sex [4]	.24	-4.19 – 4.68	
occupgroup [2]	.05	-.57 – .67	< .001*	CHILD_Talk [2]	.01	-.52 – .53	.021*
occupgroup [3]	.62	-.05 – 1.29		CHILD_Talk [3]	-.17	-1.10 – .77	
occupgroup [4]	.07	-.64 – .77		CHILD_Talk [4]	-.29	-1.73 – 1.15	
occupgroup [5]	1.11	.42 – 1.79		CHILD_Talk [5]	-3.22	-5.21 – -1.22	
occupgroup [6]	.36	-.52 – 1.25		CHILD_Food [2]	-.50	-1.35 – .35	.007*
occupgroup [7]	-.34	-1.04 – .36		CHILD_Food [3]	-.47	-2.51 – 1.57	
EMOT_POSITIVE	.42	.17 – .66	.001	CHILD_Food [4]	-1.10	-4.29 – 2.10	
FEAR_No_Control [2]	.34	-.18 – .87	< .001*	CHILD_Food [5]	3.25	1.35 – 5.16	
FEAR_No_Control [3]	.53	-.08 – 1.14		CHILD_Outbearst [2]	-.20	-.70 – .31	.040*
FEAR_No_Control [4]	.43	-.32 – 1.19		CHILD_Outbearst [3]	.96	.05 – 1.86	
FEAR_No_Control [5]	1.91	1.03 – 2.78		CHILD_Outbearst [4]	.82	-.87 – 2.51	
FEAR_Knock_Out [2]	.93	.48 – 1.38	< .001*	CHILD_Outbearst [5]	1.76	.22 – 3.29	
FEAR_Knock_Out [3]	1.49	.88 – 2.09		CHILD_Reversal [2]	-.10	-.58 – .38	.012*
FEAR_Knock_Out [4]	1.25	.47 – 2.04		CHILD_Reversal [3]	.38	-.15 – .91	
FEAR_Knock_Out [5]	2.35	1.39 – 3.30		CHILD_Reversal [4]	.63	-.04 – 1.29	
CHILD_Physical [2]	.19	-.38 – .76	.013*	CHILD_Reversal [5]	.85	.15 – 1.54	
CHILD_Physical [3]	.09	-1.07 – 1.25		LESSON_Vulnerable	.68	.31 – 1.05	< .001
CHILD_Physical [4]	-.86	-2.31 – .59		LESSON_Freedom	.63	.23 – 1.02	.002
CHILD_Physical [5]	3.35	1.20 – 5.49		LESSON_Support	1.07	.42 – 1.73	.001

**Note. R2* / *R2* adjusted: 0.271/0.223, Based on generalized likelihood ratio test on the specific degrees of freedom per variable

Table 6

Multiple linear regression with Confinement as dependent variable

	Estimates	*CI* $\overline{LB - UB}$	*P*		*Estimates*	*CI* $\overline{LB - UB}$	*P*
FE20_Psychiatr	.67	.13 – 1.21	.015	FEAR_Knock_Out [2]	.44	-.05 – .93	
agegroups [2]	-1.31	-1.94 – -.69		FEAR_Knock_Out [3]	1.46	.79 – 2.13	< .001*
agegroups [3]	-2.05	-2.65 – -1.44		FEAR_Knock_Out [4]	.66	-.19 – 1.51	
agegroups [4]	-2.56	-3.20 – -1.92	< .001*	FEAR_Knock_Out [5]	1.28	.22 – 2.34	
agegroups [5]	-1.93	-2.66 – -1.19		CHILD_Fight [2]	.61	.15 – 1.07	
agegroups [6]	-3.38	-4.65 – -2.10		CHILD_Fight [3]	.69	.12 – 1.25	.008*
FEAR_Other_Harm [2]	-.58	-1.57 – .40		CHILD_Fight [4]	1.22	.45 – 2.00	
FEAR_Other_Harm [3]	-.13	-1.14 – .88		CHILD_Fight [5]	.59	-.21 – 1.40	
FEAR_Other_Harm [4]	.14	-.91 – 1.18	.041*	LESSON_Freedom	1.62	1.16 – 2.08	< .001
FEAR_Other_Harm [5]	.29	-.77 – 1.36		LESSON_Infrigement	.79	.37 – 1.21	< .001
FEAR_No_Future [2]	.39	-.30 – 1.08		Unfair_Life [2]	.25	-.42 – .93	
FEAR_No_Future [3]	.68	-.05 – 1.41		Unfair_Life [3]	.50	-.07 – 1.08	.042*
FEAR_No_Future [4]	1.11	.37 – 1.84	.002*	Unfair_Life [4]	.62	.01 – 1.23	
FEAR_No_Future [5]	1.44	.66 – 2.22		Unfair_Life [5]	1.10	.36 – 1.84	
FEAR_No_Control [2]	-.38	-.96 – .21		Fatalism [2]	.50	-.09 – 1.10	
FEAR_No_Control [3]	.28	-.40 – .97		Fatalism [3]	.79	.23 – 1.35	.049*
FEAR_No_Control [4]	-.57	-1.40 – .26	.019	Fatalism [4]	.25	-.34 – .84	
FEAR_No_Control [5]	-.71	-1.71 – .29		Fatalism [5]	.66	-.04 – 1.36	

**Note. R2 / R2* adjusted: 0.278/0.256, Based on generalized likelihood ratio test on the specific degrees of freedom per variable

Discussion

This study explored the patterns of adjustment to the quarantine restrictions imposed during the first Covid-19 wave in Greece. Our initial hypotheses were confirmed with (i) fears related to the pandemic being negatively associated to respondents' adaptation during confinement; (ii) concerns related to the pandemic having a differential impact on the dependent variables; (iii) respondents who had a negative adjustment during the 2009 economic crisis experiencing more fear during the quarantine period; (iv) factors associated with resilience and practical orientation in life having a buffering effect on quarantine stress; (v) childhood adversity items having a high association with Introspection.

The three major patterns of adjustment: the Resilient, the Rebels and the Internalizers

The Resilient

In the Positive Adjustment group, we find mostly women who work in the public sector and are educators. They report a good financial situation and no psychological problems prior to the pandemic. Apparently, the lockdown has affected neither their employment status nor their income. They were not particularly hurt by the 2009 economic crisis and managed to redefine their life goals and to live on less income during the austerity period. Financial stability is a factor that often underlies higher levels of wellbeing (Goldman et al., 2018), also evinced in other Covid-19 studies (Gonzalez-Sanguino et al., 2020; Valiente et al., 2021) and corroborated in this study as well.

Regarding their childhood experiences, this is the only group reporting that someone had faith in them and their abilities while they were growing up; establishing a strong relationship with a trusted adult is one of the hallmarks of resilience according to the early longitudinal studies (Werner & Smith, 1977). In terms of their personal and life orientation attributes, participants reported a sense of accomplishment despite many difficulties, highly valued relationships in their lives, faith in God or other superior power and internal locus of control and trust towards other people. So, in this group we encounter many facets of resilience, a concept that involves both personal and social resources which help individuals cope and bounce back from an adverse situation (Luthar & Cicchetti, 2000; Windle et al., 2011). In addition, they display a propensity to look for practical solutions when things go wrong, instead of reflecting and/or ruminating about the reason behind this negative development. Though it may be useful and effective as a short-term strategy, coping only with the external aspects of a problem may create adverse effects later on if not accompanied by self-reflection and affect recognition and regulation (Taylor et al., 1999).

This is the only group who do not endorse fears of being infected with Covid-19, their future being thwarted, or having to face uncontrollable situations in the future. In most Covid-19 studies women report greater fear and anxiety (Mazza et al., 2020; Rodriguez-Rey et al., 2020; Varshney et al., 2020; Wang et al., 2020) and various sociological and biological reasons have been suggested to explain this phenomenon (McLean & Anderson, 2009; Zahn-Wexler, et al., 2000). However, in this sample we have found that the personal and social resources available to women can make a substantial difference on their mental distress. Specifically, women with adequate financial, social and personal assets have a better adaptation and low levels of Covid-19 related anxiety, indicating that women tend to be more resilient in adverse situations (Werner, 2005), but women with fewer economic resources, a more problematic family background, who are more emotionally insecure, do seem to be more vulnerable and fearful during the Covid-19 pandemic.

The fact that positive adjustment and wellbeing during the lockdown have also been reported in Spain (Gonzalez-Sanguino et al., 2020; Robles-Bello et al., 2020; Valiente et al., 2021), a country which, in contrast to Greece, was greatly affected by Covid-19 morbidity and mortality rates during the same period, indicates that it is not just the better epidemiological picture that determines positive adjustment. Past and present internal and external resources play a significant part in the way individuals weather a crisis. The ability to find meaning in major life challenges may also play a role, as evinced in the higher degree of resilience found in families with one or more members with special educational needs and disability (Tsibidaki, 2022).

Positive adjustment scores were low in males, university students and the long-term unemployed. A finding that needs to be replicated is that adjustment was worse in towns with 5.000-10.000 inhabitants and better in towns with 100-150.000 inhabitants.

The Rebels

The second group comprises both men and women who present with high levels of stress due to the lockdown confinement and the ensuing lack of physical and social contact with others. Age emerged as one of the strongest predictors of confinement stress; particularly the age group of 18-24 years (and to a lesser degree the age group of 25-44 years) presented with the highest levels of stress.

Most studies worldwide have also reported that young people are more vulnerable to the stress caused by the Covid-19 pandemic (Glowacz & Schmits, 2020; Rodriguez-Rey et al., 2020; Valiente et al., 2021; Wang et al., 2020). Greek studies of the same period showed that participants aged 18-27 had lower scores in active coping (Antoniou et al., 2022) and university students presented with high levels of anxiety and depression (Kaparounaki et al., 2020). These findings were corroborated in this study as well; two types of vulnerability emerged, the social one, fostered by past and current economic adversity and the delay or cancellation of future plans and the psychological one, which stems from early childhood experiences and lack of personal resources. As children, the Rebels reported having witnessed many fights at home, a situation that is toxic to a child (Sternberg et al., 2006) leading to higher levels of low self-esteem, depression, anxiety and aggression (Edleson, 1999). Moreover, this group did not endorse the item that someone had faith in them and their abilities while growing up, missing out on a major source of building resilience (Luthar, 2006). Unsurprisingly, they do not report having a secure attachment in adult life either.

In this group personal freedom seems to be a priority: The Rebels are very concerned not only about the restrictions imposed on their freedom during the quarantine, but also about the continuation of these restrictions after the end of the pandemic. They seem to have a high degree of psychological reactance, originally defined as a "motivational state directed toward the reestablishment of [a] threatened or eliminated freedom" (Brehm, 1966, p. 15). Recently, reactance has been conceptualized as an amalgam of anger (affective component) and counterarguments (cognitive component) in response to a threat to freedom (Dillard & Shen, 2005; Rains, 2013; Steindl et al., 2015). Reactant individuals tend to be more interested in being themselves than accommodating to the expectations of others (Dowd et al., 1994).

The Rebels are a mixed group comprising both the very young (18-24), who see their future plans thwarted and the young to middle age individuals (25-45) who have faced adversity upon adversity in the past because of the severe austerity measures of the 2009 crisis; therefore, they fear that the economic adversity ensuing from the pandemic will be the final stroke to them. Both age groups experience the fear that something uncontrollable may happen again and that their loved ones may be infected. The only fear not endorsed is that they themselves may get infected with Covid-19.

In terms of their life orientation, they strongly believe that life is unfair and espouse a fatalistic attitude to their problems. Previous research in Greece (Malkoutzis, 2011) indicates that the generation that came to age during the 2009 economic crisis period reported that their life was at an impasse and their future plans up in the air. The present study shows that the setbacks faced by the group of 25-44 years old during the 2009 economic crisis left them with no sense of accomplishment and no clear goals in their lives, research items not endorsed by this group.

In summary, the Rebels entered the pandemic crisis with residual economic and psychological stress from the past and low levels of resilience; they do not seem to have psychological resources to sustain them in adversity, and present many fears regarding their future. Possible infection with Covid-19 is not a concern for them; they are demanding their right to a better future feeling that life has treated them unfairly.

The Internalizers

The third group comprises mostly women, who are university students as well as free lancers or long-term unemployed. They tried to adjust to the austerity period and to redefine their life goals but reported psychological and relationship problems prior to the pandemic.

In terms of their childhood, they describe physical and emotional neglect: they felt that nobody had paid attention to them and frequently there was not enough food available for them to eat. Physical and emotional abuse was also present with adults lashing out on them and being physically punished. Like the Resilient, they had to support emotionally their parents. Strangely, they report no verbal abuse in their family of origin. They also intimate sexual abuse, but very few individuals endorsed this item in our sample, possibly because of desirability bias as the frequencies reported on all childhood maltreatment items were very low to moderate compared to other

studies on various forms of abuse in Greece (Antonopoulou et al., 2017). Nonetheless, adverse childhood experiences have been known to increase the risk of mental health problems (Chapman et al., 2004; Muniz et al., 2019).

Their dominant fears focus on the pandemic being the final stroke in their lives or something out of control happening once again. Though they do not identify as a high-risk group, they see themselves as physically vulnerable, feeling that they had come close to illness and death during the quarantine. They also believe in solidarity and dislike the restrictions on their personal freedom.

Overall, the ability of these women to reflect on their experiences does not seem to work well for them. Although introspection is generally a sign of mature thinking, once problems become internalized, introspection may take the form of counterproductive rumination or self-blame regarding events that have led to failure and loss (Luthar, 2006). Females tend to ruminate more than males and rumination predicts future depression (Nolen-Hoeksema & Girgus, 1994). Research has shown that female sex is the strongest risk factor for internalizing problems (Zahn-Wexler et al., 2000). The finding that more Internalizers were residing in Northern Greece may be attributed to the fact that the largest percentage of our sample lived in Northern Greece.

The groups of both the Rebels and Internalizers present with more fears, primarily of something uncontrollable taking place once again. This fits in the Dianeosis poll that 6 out of 10 respondents felt that they had no control on important aspects of their lives, and 37% that life was moving on while they had to stay behind. In contrast, the Resilient do not report any fears, most likely because of feeling sustained by resources from positive family experiences and the security of their jobs and adult attachments. Resilience has been negatively associated with Covid-19 related anxiety in another study of the same period in Greece (Vousoura et al., 2021) as in other countries (Fernandez et al., 2020; Ran et al., 2020).

Strengths and limitations of the study and recommendations for further research

This study highlights the significance of multiple layers of investigation, not only related to current aspects of the life and personal attributes of the respondents, but also including a developmental/historical perspective, i.e., early family background and prior life crises (Bonanno et al., 2015; Luthar & Cicchetti, 2000).

The single item, bottom-up approach in our methodology helped us identify the diverse impact of each type of fear, concern, childhood experience and personal attribute on the different patterns of adjustment and develop more nuanced profiles of adaptation to the lockdown. In accordance with the relevant literature (Chen & Bonanno, 2020; Masten, 2019), resilience emerged as a composite of multiple factors encompassing both individual, family and social assets. It was also clear that the foundations for a more resilient attitude were laid in childhood: the Resilient indicated that in childhood someone had faith in them and their abilities; as adults they reported a positive adjustment during the 2009 economic crisis, having managed to redefine their goals and to live on less income; and finally a resilient attitude emerged again during the quarantine of 2020 as the ability to create favorable conditions during the confinement. A similar timeline can be found for vulnerability to stress, most evident in the group of Internalizers, again having as a starting point adverse childhood experiences. It is clear that more research is warranted to further explore these findings.

The adjustment patterns formed on the basis of statistical analysis in this study should be interpreted with caution. They reflect clusters of attributes regarding demographics, reactions to the Covid-19 pandemic and a number of life experiences and personal attributes that emerged during the first phase of the pandemic and may not be indicative of more stable forms of behavior. Further research is warranted regarding this issue. Moreover, during the time lapsed, the high numbers of vaccination of the general population, the anti-Covid medication available for the infected, and the fact that the future course of the pandemic still remains unpredictable (Werneke et al., 2022) may have changed the dynamics evident during the first phase of the pandemic.

The specific sociocultural factors impacting the population under study were also taken into account, i.e. the prominent role of the family in Greece. Historically, the Greek family has been very supportive in terms of the physical and material needs of their offspring, maintaining close ties and frequent communication (Georgas et al., 1997; Giotsa, 2015). However, parents can also undermine the psychological scaffolding of the child by failing to attend the emotional needs of their offspring or help the adult children individuate (Spinazzola et al., 2014). More specifically the finding endorsed by Resilient and Internalizers that as children they had to provide emotional support to their parents should be further investigated to find out whether it refers to enmeshment (Minuchin, 1974), role reversal (MacFie et al., 2015) or a more benign communication pattern (Green & Werner, 1996). Assuming the caretaker role early in life, initially appearing as false maturity, has been found to be

detrimental to the child's emotional development (Hammen, 2003; Hetherington & Elmore, 2003). Childhood experiences need to be further explored, focusing mostly on specific patterns of positive and negative parental behavior evinced in Greek families.

Although not representative in a strict sense, this study included an adequate number of responses from all geographical sections in Greece, from both urban and rural areas. The sample was balanced regarding age groups, living conditions and the inclusion of several occupations. Unfortunately, despite our best efforts, we were not able to recruit more males, individuals with lower education and occupations that were hit hard economically during the pandemic. This may be related to the observation that online surveys on mental health appeal more to women and those of a higher level of education who display a higher mental health literacy level and are more motivated to fill out online surveys related to those issues (Cotton et al, 2006; Jorm et al., 1997). Therefore, our results are only generalizable to the specific demographic attributes of the particular sample.

The finding that young people in Greece are the ones mostly affected by the adversity of the Covid-19 pandemic on top of the previous economic crisis should be seriously considered by authorities and policy-makers. Resources should be made available to this group to help them weather the frustration and resignation inflicted on their generation. Work adversities create economic pressures which in turn generate intrapersonal distress and interpersonal conflicts (Conger et al., 2000). Moreover, economic adversity affects children through the mechanisms of adult emotional distress, marital conflict and disrupted parenting (Donnellan et al., 2009). Therefore, the negative repercussions of the economic adversity, past and present, can have multiple impact and may leave deep and long-lasting scars on individuals, families and social groups. The Covid-19 pandemic has revealed the weaknesses in our social system and it seems that many people will need help as they have neither the social resources nor the cognitive and affective skills to deal with them on their own.

Conclusions

In this project three distinct profiles of psychological adjustment to the quarantine restrictions emerged: The Resilient, the Rebels and the Internalizers. Each profile consisted of characteristic childhood backgrounds, personal attributes and fears and concerns regarding the Covid-19 pandemic. Women presented the most resilient profile but also the most vulnerable one, depending on the social and personal resources at their disposal. Young people were the most reactive to the quarantine restrictions, but also the most vulnerable to current and future adversity. Economic distress and negative childhood experiences differentiated the psychological effects of quarantine restrictions and determined to a large extent the coping employed by each group.

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ΕΜΠΕΙΡΙΚΗ ΕΡΓΑΣΙΑ | RESEARCH PAPER

Μοτίβα προσαρμογής στην πανδημία Covid-19 στην Ελλάδα: οι Ανθεκτικοί, οι Επαναστάτες και οι Εσωστρεφείς

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Covid-19,
καραντίνα,
μοτίβα προσαρμογής στην καραντίνα,
ψυχική ανθεκτικότητα,
εμπειρίες παιδικής ηλικίας

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ΠΕΡΙΛΗΨΗ

Η παρούσα μελέτη διερεύνησε τα μοτίβα προσαρμογής στους περιορισμούς της καραντίνας κατά τη διάρκεια του πρώτου κύματος της πανδημίας Covid-19 στην Ελλάδα. Στο δείγμα συμμετείχαν 1377 άτομα από όλες τις γεωγραφικές περιοχές της Ελλάδας, κατά κύριο λόγο γυναίκες (78.9%), με πανεπιστημιακή μόρφωση (80.7%) και ηλικία 18-81 ετών. Δημιουργήθηκε το Quarantine Adjustment Questionnaire για να καταγράψει τις αντιδράσεις του γενικού πληθυσμού στους περιορισμούς του εγκλεισμού και οι στατιστικές αναλύσεις ανέδειξαν τρία διαφορετικά μοτίβα προσαρμογής: τη θετική προσαρμογή (οι Ανθεκτικοί), το υψηλό στρες λόγω του εγκλεισμού (οι Επαναστάτες) και την τάση για ενδοσκόπηση (οι Εσωστρεφείς), τα οποία χρησιμοποιήθηκαν ως εξαρτημένες μεταβλητές. Η στατιστική ανάλυση βασίστηκε σε πολλαπλές γραμμικές παλινδρομήσεις και τα αποτελέσματα έδειξαν ότι κάθε προφίλ είχε τα δικά του προσωπικά χαρακτηριστικά, συνθήκες ανατροφής κατά την παιδική ηλικία, φόβους και ανησυχίες σχετικά με την πανδημία Covid-19. Η οικονομική δυσπραγία κατά την κρίση του 2009 και οι αρνητικές εμπειρίες στην παιδική ηλικία διαφοροποίησαν τις ψυχολογικές επιδράσεις της καραντίνας και καθόρισαν σε μεγάλο βαθμό το μοτίβο προσαρμογής που χρησιμοποίησε η κάθε ομάδα. Οι γυναίκες εμφάνισαν τη μεγαλύτερη ανθεκτικότητα αλλά και τη μεγαλύτερη ευαλωτότητα ανάλογα με τους προσωπικούς και κοινωνικούς πόρους που είχαν στη διάθεσή τους. Τα άτομα μικρότερης ηλικίας ήταν η πιο αντιδραστική ομάδα στους περιορισμούς της καραντίνας, αλλά και η πλέον απροστάτευτη στις αντιξοότητες, τρέχουσες και μελλοντικές. Στη συζήτηση αναφέρεται η επίδραση των κοινωνικοπολιτισμικών παραγόντων στον τρόπο προσαρμογής στην καραντίνα και η αναγκαιότητα καθιέρωσης νέων πολιτικών για την υποστήριξη των ευάλωτων ομάδων.