

The lasting impact of COVID-19. How the pandemic reshaped human behaviour

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Abstract. *The COVID-19 pandemic has had a profound impact on human behaviour, resulting in enduring effects on societal norms, economic structures, and psychological well-being. This investigation delves into the multifarious repercussions of the pandemic, with a particular emphasis on its enduring impacts on cognitive functioning, social dynamics, and mental health. We have identified critical behavioural patterns, including collective trauma, increased hypervigilance, and social withdrawal, that continue to influence the responses of individuals and communities, through an examination of empirical data and literature. The neurological implications of the "long COVID" phenomenon are examined in conjunction with the broader societal challenges of economic insecurity and disrupted social norms. Moreover, the paper examines the cultural and psychological obstacles that impede the resolution of mental health issues related to the pandemic and suggests practical strategies to promote recovery and resilience. These results emphasize the necessity of recognizing the interconnected psychological, social, and economic dimensions of post-pandemic recovery, and advocating for comprehensive policies and interventions to reduce long-term effects.*

Keywords: COVID-19, long COVID, social behaviour, economic impact, resilience.

JEL Classification: I12.

1. Introduction

The COVID-19 epidemic, which began in 2020, has had a severe psychological impact on people around the world. The peculiar nature of the crisis, which included health concerns, social isolation, economic insecurity, and disruption of daily routines, had a substantial impact on mental health across a wide range of communities.

One of the most significant psychological effects was an increase in anxiety and stress levels. Fear of infection, concern for loved ones, and uncertainty about the future all contributed to widespread anxiety (Torales et al., 2020). The public's continual exposure to pandemic-related news and misinformation contributed to increased stress and uncertainty.

Social isolation caused by lockdowns and physical separating approaches resulted in emotions of loneliness and depression. The decline in face-to-face encounters impacted social support systems, which are critical for mental health (Loades et al., 2020). This isolation proved especially difficult for people who lived alone or have pre-existing mental health issues.

Economic consequences such as job loss and financial insecurity intensified psychological stress. Financial stress is strongly linked to mental health issues as depression and anxiety disorders (Pfefferbaum, North, 2020). The epidemic disproportionately affected vulnerable populations, like as low-income families and marginalized groups, increasing existing inequality.

Healthcare professionals experienced severe psychological difficulties because of rising workloads, infection risks, and ethical issues over resource allocation. According to studies, medical professionals experience high levels of burnout, anxiety, depression, and post-traumatic stress symptoms (Lai et al., 2020).

School closures disrupted children and teenagers' education and social development. In young individuals, emotional and behavioural issues developed by the absence of a consistent routine, reduced physical activity, and limited social interaction (Lee, 2020). The transition to online learning also showed the disparities in access to technology and supportive learning environments.

Older individuals were more sensitive to the pandemic's psychological effects. Concerns about increasing susceptibility to severe illness, combined with isolation from family and community networks, resulted in increased anxiety and depression among the elderly (Armitage, Nellums, 2020).

Access to mental health services was disrupted while healthcare systems prioritized COVID-19 responses. While telemedicine arose as an option, its usefulness was limited for some people due to factors such as technology literacy and internet access (Moreno et al, 2020).

2. Literature review

Even today, the psychological consequences of the COVID-19 pandemic are still felt by individuals and communities across the globe. Even though the acute phase of the pandemic has since passed, its enduring effects on cognitive functioning, mental health, and overall

psychological well-being continue. These effects are observed in a variety of demographics and are influenced by a combination of biological, social, and economic factors.

One of the enduring effects of the pandemic is the phenomenon of long COVID, which is characterized by cognitive impairments referred to as "brain fog." This condition can persist for months or even years following infection, and it includes memory issues, concentration difficulties, and reduced cognitive flexibility. The virus's neuroinflammation and alterations in brain function are often cited as the cause of these impairments. Research has demonstrated that even individuals with moderate COVID-19 symptoms may encounter substantial cognitive challenges, which can significantly impact their quality of life and capacity to complete daily tasks (Douaud et al., 2022).

Anxiety, depression, and post-traumatic stress disorder (PTSD) are among the most prevalent mental health issues worldwide, which have been increased by the pandemic. Many individuals have been psychologically affected by the prolonged periods of isolation, uncertainty, and sorrow that have occurred during the pandemic. Healthcare professionals have encountered extraordinary stress, as they have reported high levels of burnout because of the ethical dilemmas surrounding patient care and the increased responsibilities. Numerous individuals in this group are still struggling with their mental health, emphasizing the importance of continued support (Pfefferbaum, North, 2020).

During the pandemic, children and adolescents have encountered distinctive obstacles. Their mental health and development have been significantly impacted by school closures, disrupted routines, and reduced social interactions. Symptoms of depression, anxiety, and behavioural issues have become increasingly common. In addition, research indicates that there has been an increase in disciplinary issues in schools, which is indicative of the more extensive psychological stress that this demographic experienced. The long-term consequences on their emotional and educational development continue to be a pressing concern (Lee, 2020).

Economic stress is another component contributing to the pandemic's long-term psychological impact. A significant number of individuals have experienced increased tension and anxiety because of job losses, financial instability, and the increasing cost of living. Economic uncertainty, heightened by fears of future pandemics or crises, continues to have a negative impact on global mental health (Moreno et al., 2020).

Recent research suggests that even mild COVID-19 infections can result in prolonged cognitive impairments. The University of São Paulo conducted a study that revealed that memory loss and attention deficits persisted for up to 18 months following infection, indicating that the virus may induce long-term neurological changes (Ziegler, 2024).

The investigation comprised 302 participants who were diagnosed with mild, moderate, or severe COVID-19. Cognitive functions, such as attention, memory, processing speed, and intelligence, were evaluated at least 18 months following infection. The results suggested that cognitive impairments were present in all groups, with the severity of these impairments following the intensity of the initial infection. It is important to note that even 11.7% of individuals with moderate symptoms reported ongoing cognitive issues (Serafim et al., 2024).

These results highlight the necessity of acknowledging and addressing the persistent cognitive repercussions of COVID-19, even in cases that were initially regarded as mild. The research encourages the continuous monitoring and support of individuals who are recovering from COVID-19 to improve their cognitive health and overall quality of life.

3. Analysis of the neuropathways in the behaviour of the individual

This section may be divided by subheadings. It should provide a concise and precise description of the experimental results, their interpretation, as well as the experimental conclusions that can be drawn.

Additionally, there is emerging evidence that the virus has the capacity to infiltrate the central nervous system (CNS) through numerous pathways. One proposed mechanism involves the virus entering the brain through the olfactory nerve, resulting in anosmia (loss of scent), a common early symptom of COVID-19. SARS-CoV-2 has the potential for direct neuro-invasion, as evidenced by the detection of viral particles in the cerebrospinal fluid and brain tissue of infected individuals (Meinhardt et al., 2021).

Sustained neuroinflammation is one of the primary factors contributing to the extended effects of COVID-19. The immune system's excessive response to the virus, which is often referred to as a "cytokine storm," results in the release of elevated levels of pro-inflammatory molecules, like interleukins and tumour necrosis factors. Chronic inflammation in the brain can result from the ability of these cytokines to penetrate the blood-brain barrier. This inflammation disrupts typical brain function and is associated with long-term symptoms, including cognitive impairments, fatigue, and memory loss (Ellul et al., 2020; Hess et al., 2020).

Respiratory distress and hypoxia, which are symptoms of severe COVID-19, can have a detrimental impact on brain function. Neuronal damage can be induced by hypoxia, particularly in regions of the brain that are susceptible to oxygen deprivation. Furthermore, SARS-CoV-2 has been linked to vascular complications, such as micro-vascular damage and blood clot formation, which can result in strokes or other cerebrovascular events, further compromising brain health (Mazza et al., 2023).

COVID-19 has been associated with prolonged neurological and psychological complications, which are collectively known as "long COVID." Symptoms such as impaired concentration, memory loss, and brain fog persist for months following recovery, as reported by patients. These symptoms are suspected to be the result of a combination of persistent neuroinflammation, residual hypoxic damage, and potential autoimmune reactions that are induced by the virus (Smith, 2024).

Evidence of structural brain alterations in individuals recovering from COVID-19 has been obtained through neuroimaging studies. In individuals who had experienced even mild COVID-19, research conducted by the UK Biobank revealed substantial reductions in grey matter in brain regions associated with memory and olfaction. Such changes were observed months following the acute phase, which implies that the virus had lasting impacts on brain structure and function (Douaud et al., 2022; WHO, 2021).

In certain individuals, the brain's plasticity, or its capacity to reorganize and recover after injury, may be slower. The recovery from neuroinflammation, hypoxic damage, or vascular insults is contingent upon factors such as age, pre-existing conditions, and overall health. Symptoms may persist for months or years because of this delayed recovery.

The pandemic's psychological toll, along with the systemic effects of long-lasting illness (such as fatigue and stress), might worsen long COVID symptoms. Cognitive and emotional impairments can result from persistent stress and anxiety, which develops a feedback loop that perpetuates the symptoms over time (Pfefferbaum, North, 2020).

A study conducted by the British Psychological Society has demonstrated that individuals with long COVID-19 symptoms often suffer from psychological distress, including depressive and anxiety symptoms, which are frequently not immediately associated with their previous COVID-19 infection (British Psychological Society, 2021). It can be difficult for individuals to identify the underlying cause of their symptoms due to the overlap between long COVID symptoms and general day to day psychological distress.

According to the Center for Disease Control and Prevention (CDC) [16], the wide range of symptoms associated with long COVID might be mistaken for other health concerns, resulting in underdiagnosis and mismanagement. This emphasizes the necessity of raising public awareness regarding the potential psychological consequences of prolonged COVID-19 to guarantee prompt identification and treatment.

A study published in *The British Journal of Psychiatry* in 2023 investigated the psychological repercussions of long COVID-19, with a particular emphasis on anxiety and depressive symptoms. The researchers discovered that individuals frequently misinterpreted these symptoms as ordinary everyday stress, rather than attributing them to their previous COVID-19 infection. This misattribution was associated with a lack of awareness regarding the psychological consequences of long COVID, which results in delayed treatment and support (Mazza et al., 2023).

Similarly, a 2024 article in *Psychology Today* described the difficulties patients encounter in recognizing psychiatric problems connected with long COVID. The article highlighted the fact that symptoms such as anxiety, depression, and brain fog are frequently misdiagnosed as routine stressors, resulting in inadequate management and underdiagnosis (Smith, 2024). These results accentuate the importance of heightened public education and healthcare provider awareness regarding the psychological effects of long COVID.

4. The Evolution of COVID-influenced societies

The broader societal patterns in responding to traumatic events, such as the COVID-19 pandemic, can be linked in the collective unawareness of the psychological consequences of long COVID. These patterns are indicative of collective coping mechanisms, gaps in mental health literacy, and sociocultural attitudes toward trauma, which often overlook or minimize the psychological aspects of crises.

Global pandemics and other traumatic events frequently cause a variety of individual and group reactions, ranging from avoidance and denial to overreaction and hypervigilance.

Collective denial is a particularly prominent characteristic. Sociologists have claimed that societies, like individuals, may minimize or disregard the psycho-logical consequences of a crisis to preserve a sense of control and normalcy (Alexander, 2020). Although initially protective, this coping mechanism can result in long-term unaddressed consequences, such as the mental health effects of long COVID.

The general absence of mental health literacy adds still another element causing this unawareness. Many people are unaware of the symptoms of psychological discomfort or the connection between mental health and physical illness. Symptoms such as anxiety, depression, and brain fog may be viewed as unconnected to the infection in cases with long-term COVID, which contributes to a collective underestimation of their importance (Pfefferbaum, North, 2020). During the pandemic, public health messages gave physical safety and infection control priority while comparatively less attention was focused on mental health, thereby potentially resulting in a lack of awareness.

Collective reactions to trauma also reflect cultural views regarding mental health. Acknowledging emotional distress is stigmatized in many countries, especially when it relates to an incident seen as a shared, "external" threat rather than a personal one. This stigma serves to limit the collective awareness of psychological consequences by discouraging individuals from overtly discussing their symptoms or seeking help (Brewin et al., 2020).

Furthermore, societal narratives typically emphasize resilience and recovery following crises, urging the importance of "bouncing back" rather than recognizing the multifaceted and extended nature of trauma recovery. These narratives could force individuals and groups to minimize or overlook residual psychological effects (Bonanno et al., 2011).

Similar collective underestimation of psychological impacts is demonstrated by historical examples of pandemics and other traumatic events. For example, despite considerable psychological suffering during the 1918 influenza pandemic and the post-war era, mental health received minimal attention. These patterns demonstrate how society's focus quickly shifts to recovery and rebuilding frequently leaving the psychological aftermath untreated and unaddressed (Honigsbaum, 2020).

The collective lack of ability or reluctance to address the psychological aftermath of COVID-19 has had a significant impact on people's behaviour today, often in subtle but pervasive ways, as evidenced by the normalization of stress, avoidance of seeking mental health support, societal disengagement, and a lack of proactive measures to address the long-term consequences. These actions derive from insufficient or limited coping mechanisms, cultural stigmas, and limited knowledge about the psychological impact of the pandemic (Mazza et al., 2023).

The normalization of stress and exhaustion is one major behavioural trend. Many people assign symptoms like worry, brain fog, or irritability to the stresses of daily living rather than considering the possibility of a long COVID or unresolved trauma from the pandemic. Social attitudes that downplay psychological suffering and typically portray it as a normal part of a "return to normal" following the pandemic are the root cause of this normalization.

People might therefore keep experiencing severe psychological stress without pursuing intervention (Pfefferbaum, North, 2020).

The persistent disengagement from social interactions is another behavioural effect. At first, social isolation was an essential public health measure, but for some people, it has become a habit. Participation in social and communal activities has decreased because of persistent health risk anxiety that is amplified by psychological symptoms like exhaustion and depression. This disengagement contributes to feelings of loneliness and isolation, resulting in a feedback loop that heightens mental distress (Loades et al., 2020).

Unresolved psychological problems associated with the pandemic have led to higher rates of burnout, absenteeism, and decreased productivity in the workplace. Employees may find it challenging to achieve job requirements if they suffer from cognitive issues, such as memory loss or lack of focus brought on by long COVID. Employers and coworkers who are uninformed of the psychological underlying causes of these issues might interpret them as a lack of effort or dedication, which could damage workplace relationships (Douaud et al., 2020).

Resistance to proactive health measures, such as mental health interventions, is another behavioural trend. Many individuals may refrain from confronting psychological issues due to fear of reliving the trauma of the pandemic or a sense of exhaustion resulting from an extended period of crisis management (Bran et al., 2014). People are unwilling to participate in preventative activities like therapy or public health initiatives that might reduce the long-term impacts of COVID-19 because of this "pandemic fatigue" (Bonanno et al., 2011).

The psychological toll of the pandemic has also increased societal distrust and divisiveness. Long-term stress and uncertainty have made people more defensive and less empathetic, which has led to more conflict in communities. The lack of a coordinated, united approach to the pandemic's psychological impact reflects and exacerbates this fragmentation (Alexander, 2020).

Measures of social distance and enforced isolation during lockdowns disrupt established social norms and habits. Many people experienced loneliness, sadness, and anxiety because of their prolonged isolation, which can create a self-perpetuating cycle of withdrawal. Individuals who have become accustomed to a restricted social life during the pandemic may experience anxiety or find the process of re-engaging with others to be overwhelming, resulting in a preference for solitude (Loades et al., 2020).

People's displeasure in public places, such as shopping malls or crowded areas, is a well-documented psychological effect that has become increasingly evident in the aftermath of the COVID-19 pandemic. This phenomenon can be attributed to a mixture of sensory overload, social reconditioning, and persistent anxiety or frustration resulting from long-lasting isolation during the pandemic.

People's exposure to crowded environments decreased significantly throughout the pandemic. Lockdowns, remote work, and restricted social interactions resulted in more controlled and silent environments for numerous individuals. Upon their return to public

spaces, the clear distinction between these environments and the quiet atmosphere of the pandemic can be overwhelming. Sensory overload, which can result in irritation or discomfort, can be caused by the noise, movement, and simple presence of large crowds in locations such as malls or events (Spence et al., 2021). For individuals who have become accustomed to quieter environments or who are naturally more sensitive to sensory stimuli, this adjustment challenge is particularly intense.

The pandemic disrupted social norms and routines, causing individuals to become less familiar to interacting in public or crowded settings. Prolonged isolation resulted in a decreased capacity to tolerate the unpredictable nature of social environments for a significant number of individuals. The presence of others, the sounds they produce, or their behaviours—elements that were previously taken for granted or seen as normal—may now be perceived as intrusive and irritating. This change is indicative of the necessity for reconditioning to social contexts that were previously regarded as normal but now appear to be invasive and overwhelming (Taylor et al., 2020).

Even though the imminent threat of COVID-19 has diminished, numerous individuals continue to experience anxiety regarding their health and hygiene. Concerns regarding personal space, hygiene, or potential exposure to illnesses may arise in crowded environments. The underlying anxiety might increase annoyance, as individuals may become hyper-aware of the behaviours or proximity of others that they perceive to be risky (Pfefferbaum, North, 2020).

The ongoing stress of adjusting to post-pandemic life can lead to a decrease in emotional reserves, which can lead to increased irritability in situations that necessitate patience or adaptation. For individuals who are still recuperating from pandemic-related burnout or long COVID symptoms such as fatigue and brain fog, noise, queues, or crowded areas in public spaces can be particularly taxing, requiring additional cognitive and emotional energy (Douaud et al., 2022).

Some individuals may experience frustration because of the overcrowded public spaces, which is associated with the loss of a less chaotic, peaceful, quiet setting that was experienced during the pandemic. This resentment can show up as discontentment with individuals and circumstances that symbolize a return to pre-pandemic norms, which some may find overwhelming or unpleasant.

5. A roadmap to normality

Social engagement can be substantially disrupted by cognitive symptoms associated with long COVID, including fatigue, memory difficulties, and brain fog. Due to embarrassment, difficulty concentrating, or fear of being misunderstood, individuals who are experiencing these symptoms may avoid social situations. Physical fatigue can also diminish the energy necessary for socializing, which may contribute to an impulse for isolation (Van der Velden et al., 2021).

Throughout the pandemic, individuals were consistently exposed to messaging that highlighted the significance of maintaining physical distance and the dangers of direct contact to prevent the transmission of the virus. Although protective, these behaviours have

resulted in long-term psychological repercussions. Although vaccination campaigns and decreased infection rates have reduced the immediate threat, numerous individuals continue to experience an elevated sense of vulnerability in overcrowded environments (Georgescu et al., 2021). This is especially true for individuals who have had their loved ones affected, have ongoing health conditions that put them at risk, or have endured severe illness (Taylor et al., 2020).

Hyperawareness of potential health threats frequently induces anxiety in such environments. Research indicates that the pandemic has induced individuals to become more attentive to the hygiene habits, behaviours (such as coughing or sneezing), and proximity of others. This hyperawareness can induce stress or irritation when others fail to comply with the societal expectations of health-conscious behaviour, such as maintaining a safe distance or wearing masks (Pfefferbaum, North, 2020). These reactions are the residual effects of the pandemic's psychological impact on risk perception and personal safety.

This anxiety is made worse by crowded spaces, as they inherently diminish personal control over the environment (Georgescu, 2023). A feeling of being overwhelmed can be generated by unpredictability, movement, and noise. Individuals who continue to associate crowds with increased risk experience the distress of being near strangers that is made worse by their sense of helplessness in managing their exposure (Van der Valden et al., 2021). This perceived lack of safety contributes to a natural aversion to such settings and results in annoyance and dis-pleasure.

Additionally, this anxiety is worsened by the persistent media coverage of COVID-19 variants and other health crises. For certain individuals, even a short encounter with news reports regarding infections or emerging pathogens can instil a sense of anxiety that crowded spaces are still dangerous. The challenges of transitioning back to pre-pandemic norms of social interaction and the long-lasting psychological impact of the pandemic are further highlighted by this "carryover anxiety" (Mazza et al., 2023).

A combination of health concerns and anxiety can be observed in the form of avoidant behaviours or increased anger, discomfort and annoyance in public spaces. Even when public health guidelines are no longer mandatory, individuals may experience feelings of resentment or judgment toward others who appear to disregard them. This may result in social discord, which can further discourage engagement.

Public spaces, such as retail malls, transport hubs, and events, that were previously perceived as neutral or even enjoyable, may now be perceived as threatening or distressing. This change is indicative of the long-term influence of pandemic-induced anxiety on social norms and public behaviour (Branson et al., 2010).

To alleviate these sensations, it is imperative that strategies prioritize the rebuilding of a sense of safety and control in public areas. The psychological advantages of social reintegration and the reduced risks of infection can be promoted through public health campaigns. Interventions, such as mindfulness practices or progressive exposure to crowds, can also assist individuals in rewiring and retraining their emotional responses to these environments.

Many people have become accustomed to pandemic-related behavioural changes, such as virtual communication and diminished in-person interaction. Face-to-face encounters are becoming less necessary due to the convenience of online buying, remote work and digital socialization. Despite being crucial during the pandemic, these tools unintentionally decreased the frequency and importance of face-to-face interactions, making them seem less significant or comfortable (Van der Valden et al., 2021).

A common observation is that the epidemic has caused behavioural and cognitive fatigue, which is a major cause of displeasure, anger and disengagement in public areas. This fatigue reflects both physical and psychological exhaustion caused by the pandemic's accumulated stress and long-term disruptions to regular life.

Cognitive fatigue is a condition in which the brain is too overworked or unable to recuperate sufficiently, resulting in mental exhaustion. Due to long-term stressors like ongoing health concerns, unstable economic conditions, and the sudden transition to new habits like remote work and virtual communication, the pandemic made this situation worse for many people. People felt emotionally drained and exhausted and less equipped to handle demanding or high-stimulation environments, including crowded public areas, because of these stressors taxing cognitive resources (Arenas et al., 2021).

Cognitive exhaustion is especially noticeable during long COVID. Persistent symptoms like "brain fog," trouble focusing, and memory issues are reported by many people. These cognitive impairments are associated with the virus's neuroinflammatory effects and alteration of the brain networks in charge of information processing and attention (Douaud et al., 2022). For people who have been affected, the added sensory and emotional demands of public areas can increase feelings of mental exhaustion and lead to frustration or withdraw.

Behavioural fatigue is the term used to describe a decline in motivation to perform demanding or difficult tasks, frequently brought on by extended stress. Many were under constant pressure to change their lifestyles during the pandemic, including rearranging their work and family schedules and adhering to public health protocols. Van der Velden et al. (2021) observed that this ongoing rearrangement resulted in a depletion of emotional and psychological resilience, which made even routine activities feel burdensome (Bodislav, 2011).

Many find that navigating overcrowded public spaces—including communicating with strangers, managing sensory input, and keeping situational awareness—requires a large amount of emotional energy. When behavioural fatigue is present, these tasks could feel too much to handle, which could cause avoidance or discontentment. Pandemic-induced shifts in social norms, such as increased sensitivity of personal space and hygiene, accentuate this and can make people feel uncomfortable in crowded settings (Spence et al., 2021).

Cognitive and behavioural exhaustion can cause self-perpetuating loops. For example, the reduction of opportunities for social stimulation and positive reinforcement may result in a further deterioration of cognitive and emotional resilience over time, because of the intention to conserve mental energy by avoiding public spaces. Chronic disengagement can

result from this cycle, making it more challenging for people to reintegrate into social settings and resume their pre-pandemic routines.

Irritability and impatience in public spaces are the results of cognitive and behavioural exhaustion. Noise, crowds, or perceived inefficiencies can quickly overwhelm people, which can cause frustration. Additionally, this exhaustion makes it harder to sympathize with others or put up with small frustrations, which makes the social environment less unified and more divided (Pfefferbaum, North, 2020).

It takes both individual and collective efforts to reduce this cognitive exhaustion. Individually, techniques like mindfulness, consistent exercise, and enough sleep can support the recuperation of emotional and cognitive reserves. In terms of society, public spaces can be made less stressful by, for instance, establishing quieter sections, improving signs to lessen confusion, and maintaining cleanliness and order to ease health concerns. Public health campaigns can also be helpful by recognizing the long-term consequences of pandemic fatigue and providing advice on how to gradually reengage in social interactions (Bodislav, Georgescu, 2023).

6. Conclusion

The COVID-19 pandemic created significant disruptions and long-lasting changes to daily life, which led to a psychological reaction known as "resentment of lost normalcy." This resentment derives from a sense of loss for pre-pandemic habits, lifestyles, and freedoms, as well as frustration with the difficulties of adjusting to a society in which "normal" feels fundamentally transformed (Mazza et al., 2023).

When faced with disruptions to long-held procedures of living, individuals may experience anger, sadness, or frustration—emotions that frequently appear as resentment against the altered surroundings and its reminders of what has been lost (Pfefferbaum, North, 2020). Being unable to "go back" to a pre-pandemic state worsens this resentment.

Public spaces are now perceived differently because of lingering health concerns or behavioural adaptations, which may stir up frustration and remind people of the disruptions caused by the pandemic (Bodislav et al., 2023). This is particularly true when adapting to new norms feels like a forced compromise rather than a choice (Bonanno et al., 2011).

The pandemic irreversibly changed social norms in addition to disrupting routines. Social separation, masks, and increased health precautions established new standards for public behaviour. Even though many of these measures have been loosened, the psychological impact is still there. Seeing these practices continue in public places can irritate people who link them to pandemic limitations and make them wish for a time when these measures weren't essential (Spence et al., 2021).

In addition, habits developed during the epidemic, such as working from home or avoiding large crowds, have become ingrained in some people. These habits may contrast with societal expectations to resume pre-pandemic behaviours, resulting in internal conflict and increased anger of the perceived loss of personal agency (Van der Valden, 2021).

During the pandemic, social connections were broken, and many people have found it difficult to rebuild them. Some relationships were weakened by the time apart, and disagreements on the pandemic (for example, on vaccines or limitations) generated additional tensions. This difficulty in reestablishing a sense of community contributes to emotions of alienation and resentment, as individuals may believe that the social fabric of their lives has been irreversibly disrupted (Lee, 2020).

Perceptions regarding unequal treatment both during and after the pandemic also cause resentment. Many people believed that the burden of restrictions, job losses, or risks to health was unevenly allocated, which led to dissatisfaction with societal systems or specific groups of people. This perception of unfairness adds to the emotional weight of adjusting to a post-pandemic reality, emphasizing the perceived failure of systems designed to protect and support people during crises (Taylor et al., 2020).

The trauma observed in today's people behaviour originating from the negative experience that the pandemic brought aligns with characteristics of collective trauma, chronic stress trauma, ambiguous loss, and in some cases, post-traumatic stress disorder (PTSD).

There have been widespread behavioural changes because of the pandemic's trauma:

- **Hypervigilance:** An excessive awareness of personal space, hygiene, and health risks in public environments (Taylor et al., 2020).
- **Withdrawal:** Reduced engagement in social activities, avoidance of crowded places, and a growing dependence on virtual communication (Van der Valden, 2021).
- **Resentment and Irritability:** Frustration with societal changes or other people's behaviours that bring back memories of the pandemic.
- **Elevated Emotional Reactivity:** An excessive response to superficial stressors or perceived threats, indicative of unresolved trauma.

These types of traumas show up as behaviours representing unresolved grief, higher alertness, and trouble adjusting to new norms. It is imperative to identify these patterns and resolve their underlying causes to encourage resilience and recovery in the post-pandemic world.

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