Back to Too Much?
Feeling Overwhelmed with Social Inclusion During the COVID-19 Pandemic

Devki Patel[1], Verena Graupmann[1], Susan Markunas[1], Allyssa Alteri[1],
& Joseph R. Ferrari[1]

Author Biographies: *Verena Graupmann,* is an Associate Professor of Psychology at DePaul University's College of Science and Health. She has an M.A. from the University of Munich, Germany, has received her PhD from the University of Sussex, UK (2009), and did postdoctoral work at both the University of Salzburg, Austria, and the University of Munich, Germany. Her teaching and research are in the fields of social and cultural psychology. *Susan Markunas*, is Senior Lecturer in Psychology at DePaul University. *Allyssa Alteri,* earned her MS in Research Psychology from DePaul University in 2023. *Dn. Joseph Ferrari,* is St. Vincent dePaul Distinguished Professor of Psychology at DePaul University, Chicago, IL, and a Permanent Catholic Deacon for the Diocese of Joliet, IL.

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Corresponding Author: Devik Patel, Department of Psychology, DePaul University, 2219 North Kenmore Avenue, Chicago, IL, 60614; email: dpate182@depaul.edu

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[1] DePaul University, Chicago IL

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Abstract

The COVID-19 outbreaks in 2020 caused prolonged periods of social distancing. After mandates were lifted, social calendars filling up with plans felt like a dream come true to many. At the same time, a stark increase in real time interactions and number of social obligations likely experienced as stressful. The shift to in-person socialization may be especially distressing considering an extended period of reduced and controlled ways of gathering. Here, we analyzed peoples' accounts of dealing with a sense of overinclusion in pandemic and post-pandemic socializing. In the varied responses in a qualitative sample of 24 participants, we found a disproportionate amount of post-distancing socializing brought up among recalled interactions deemed as "overwhelming", than other inclusion interactions. Among the "overwhelming" interactions, post-distancing socializing was described as of more negative as positive emotional quality.

Introduction

The onset of COVID-19 pandemic prompted stay-at-home mandates to reduce viral transmission. Many US Americans felt isolated from their social networks, reporting more anxiety and depression, worse sleep quality, and reduced physical activity (Sepúlveda-Loyola, 2020). Feeling included relates to feeling protected while feeling excluded has negative consequences on cognition and behavior (Pfundmair et al., 2015a). Social distancing was experienced as psychologically similar to being ostracized, suggesting that many people suffered from being included less than usual: Social distancing was associated with lower self-esteem, sense of control, belonging, and meaning (i.e., the fundamental psychological needs usually impacted by ostracism) (Graupmann & Pfundmair, 2022). One study showed how time spent social distancing was associated with stress, that women reported more stress compared to men, and that adaptability to new situations buffered the distancing-stress relationship (Zamarripa et al., 2020). While there is a considerable amount of research exploring how social distancing affected psychological and physical health, there is little data on the process of reintroduction to social networks after social distancing.

As social distancing mandates ended, some individuals were motivated to re-establish their larger social networks while others faced difficulties with social re-introduction. A study conducted in the U.S. by Forbes Health reported 29% of participants were nervous about knowing how to interact, 26% were worried about embarrassing themselves, and 16% were worried about saying the wrong thing. Fifty-six percent of respondents said they found forming relationships more difficult since the onset of the pandemic. In cultural comparison, people with a more individualistic cultural background have shown less positive outcomes of being included after an exclusion episode, compared to people with a collectivistic cultural background (Pfundmair et al., 2015b).

Taken together, these studies suggest being re-included after a period of reduced socialization is unique from experiences of

sustained inclusion. Very few studies examined individual processes of re-introduction to one's social network(s) in a context such as a global pandemic that imposed social and behavioral restrictions for an extended period. The present study applies a qualitative approach to understand experiences of inclusion after the lifting of social distancing mandates in 2021.

Method

Data for the present study was part of a larger study on overinclusion. Participants were recruited from a private university in the midwestern United States and from online sourcing platform Prolific. University student participants earned course credit and Prolific participants were paid $3 for research participation. The survey was available on Qualtrics during summer and fall of 2021. Completing the survey took, on average, 20 minutes. After eliminating incomplete responses (<90%), 606 participants completed the survey. Participants responded to four psychometric measures and then responded to open-ended questions about instances of overinclusion. Participants self-reported demographic information including their age, gender, race, relationship status, and education level. Of the 606 participants, 24 mentioned experiences of overinclusion related to the COVID-19 pandemic. The present study focused on this subset of participants who discussed instances of inclusion during or after social distancing periods in 2020 and 2021.

Participants

The average age of participants in the present study was 24.1 years old (*SD* = 9.18). Most participants self-identified their gender as female (*n* = 17, 70.8%), male (*n* = 6, 25%), and non-binary (*n* = 1, 4.2%). Participants self-reported their race/ethnicity and chose all that applied, identifying as White (*n* = 18,

75%), Asian (*n* = 6, 25%), Black (*n* = 3, 12.5%), Hispanic/Latinx (*n* = 1, 4.2%), and other (*n* = 1, 4.2%). Participants self-identified as single (*n* = 17, 70.8%), married or partnered (*n* = 6, 24.2%), or divorced (*n* = 1, 4.2%).

Psychometric Scales

Participants responded to the 10-item *Need to Belong* scale, the 10-item *Rosenberg Self-Esteem* scale, the 10-item *Desire for Control* scale, and the 10-item *Meaningful Existence* scale for the purpose of the larger research endeavor of this data collection (not analyzed in the present study) (Leary, 2013; Rosenberg, 1965; Berger & Cooper, 1979; Steger et al. 2006).

Qualitative Questions

Participants assigned randomly to one of two experimental conditions instructed to write about either experiences: a time in their life where they were *included to a greater than usual degree* [one condition] or a time in their life where they *felt overwhelmed by the degree to which they were included* [other condition] This variation of the prompts intended to capture differences between inclusion experiences regarded as more than usual and inclusion experiences that feel overwhelming. The general pattern of the open-ended responses suggests the manipulation was successful: Most participants in the 'greater-than-usual' condition wrote about experiences where the inclusion was more than usual, but generally regarded as neutral or positive. On the other hand, most participants in the "overwhelmed" condition wrote about experiences where the inclusion was more than they could handle, occasionally prompting negative affect and socially reclusive behaviors.

Selection of COVID-related Narratives

The two independent raters coded the 606 open-ended responses for as related to COVID-19, searching for the following terms: COVID, COVID-19, pandemic, and quarantine. The present study examined the 24 open-ended responses that were relevant to the pandemic. Observably, very few participants discussed instances of over-inclusion during the pandemic relative to the size of the entire sample. This outcome may be explained partially by individual differences in how much people normalized the circumstances of the pandemic as part of life. Therefore, in the events participants described, COVID-related aspects were perhaps not salient. In addition, for some, reconnection to close social networks happened soon after mandates were lifted, but for others, reconnecting with even their closest social connections was delayed or contingent on safety measures like vaccination. Thus, it is plausible that many participants discussed instances of overinclusion, which occurred before the onset of the pandemic.

Qualitative Coding Procedure

There were no disagreements between the raters' initial coding for COVID-related responses. Raters met to discuss an a priori coding scheme to further analyze the qualitative responses. Responses were coded for type of experience (positive, negative, or ambiguous), modality of contact (email, messaging, social media, or in-person), the environment where the interaction took place (school, work, or recreation), and when the interaction took place (during or after the pandemic). After assigning pre-determined codes, two raters discussed and identified emerging themes: prolonged isolation making social interactions stressful or difficult, fear of COVID or fear of socializing without vaccination, longing for social interaction, and a perceived rush of communications.

Disagreements between codes were resolved through discussion.

Results and Discussion

Foremost, results showed an overrepresentation of participants from the overwhelmed narrative condition. Sixteen participants were from the overwhelming inclusion condition, and eight participants were from the greater-than-usual inclusion condition. Being randomly assigned to thinking about overwhelming inclusionary experiences might have made people write about experiences related to the pandemic more so than being randomly assigned to thinking about experiences of greater-than-usual inclusion, suggesting a tendency to experience pandemic related socializing as somewhat distressful. Themes from the a priori coding scheme and emerging codes are discussed below.

Pre-established Codes

<u>Positive, negative, or neither</u>. Overall, ten participants' COVID-related accounts were coded as describing negative experiences, five were coded as describing positive experiences and nine were coded as ambiguous. Interestingly, nine participants in the overwhelmed condition wrote about a negative experience of overinclusion, compared to one from the greater-than-usual condition. On the other hand, only one participant from the overwhelmed condition wrote about a positive experience, compared to four people assigned to the greater-than-usual condition. The ambiguous codes were given to the accounts of six participants in the overwhelmed condition and three in the greater-than-usual condition. Ambiguous responses included both positive and negative feelings about inclusion, or the narratives were neutral, with more complex narratives related to comfortability and

feeling safe after a period of quarantine to socialize.

Example for a negatively coded experience in response to the overwhelming inclusion prompt:

> *"I would have more people trying to connect with me than I could handle, which was very socially overwhelming" and "eventually, each of my weekends seemed daunting."*

Finding more negative and ambiguous experiences than positive ones is not surprising, given the overrepresentation of the overwhelmed condition in this COVID subset. However, it is noteworthy that a theoretically positive event – being included

after a time of isolation – experienced as stressful when recounted as an experience of overwhelming social inclusion.

Modality and environment of inclusion. Table 1 summarizes the modalities of the over-inclusion and Table 2 summarizes the physical environments where participants experienced over-inclusion. The sense of control online interaction provides is likely the reason for why those interactions were recounted less when asked about overwhelming experiences. In addition, being the norm during the pandemic, the transition to the more spontaneous, less controlled nature of in-person meetings may have been experienced as a contrast in the context of the pandemic.

Table 1
Modality of inclusion

Modality	Greater than usual		Overwhelmed		Full sample	
	n	%	*n*	%	*n*	%
In-person	4	66.7	11	84.6	15	78.9
Messaging	1	16.7	1	7.7	2	10.5
Social Media	0	0	1	7.7	1	5.3
Email	1	16.7	0	0	1	5.3

Table 2
Environment of inclusion

Environment	Greater than usual		Overwhelmed		Full sample	
	n	%	n	%	n	%
Recreation	2	50	6	66.7	8	62.5
College	2	50	3	33.3	5	38.5
Work	0	0	0	0	0	0

Emerging Codes

Fears of socializing. For six participants in the overwhelmed condition, recalling an instance of overinclusion prompted introspection about their relational preferences. Commonly, participants wrote

about how the pandemic caused them to feel stressed when re-entering spaces where socializing was expected. Several participants wrote they felt stressed about the expectations of in-person social events: "I was stressed about dressing up right, satisfying peoples' expectations… at a certain point, I

even started dreading the events that were supposed to be fun and celebratory" and "during COVID when we were all online for school I found myself being overwhelmed, constantly to the point where I stopped socializing."

Another participant articulated their outlook on attending a family event:

> *"I felt an overpowering sense of fear and dread knowing my evening would be filled with conversation… I was fearful of not being able to respond, overreacting, losing interest, or finding interesting enough subject matter to withhold a natural conversation."*

Ten participants' narratives explicitly included difficulties with socializing, even in situations where they wanted to connect with others. A few participants recalled university experiences, explaining that "*we were all online cause of COVID*" and "*meeting people in person after communicating online because of COVID*" was overwhelming. Other participants wrote:

> *"COVID exacerbated my social anxiety further… I was still slightly uncomfortable socializing with multiple people at once" and "living through this past year with COVID has strained many people's ability to reconnect socially… I got overwhelmed."*

Fear and anxiety-related experiences in the context of COVID give insight into the difficulties people were having as they were transitioning from a period of reduced social interaction to renewed more in-person social life. This gives support to the idea that post-pandemic socializing was likely perceived as overinclusion by many. Discomfort with socializing without preventative measures

such as if vaccination affected perceptions of inclusion and emerged as another theme.

Fear of COVID-19. Only two participants in the overwhelmed condition wrote about how fear of COVID-19 contributed to hesitance to socialize, suggesting that preferences for reduced socialization were perhaps strengthened by fear of catching the virus for a select few. One participant wrote: *"my friends wanted me to come on a bike ride because it's outside and I was scared to go because of COVID."* On the other hand, another participant wrote that after vaccines were available, they felt more comfortable returning to in-person interactions, suggesting an attenuating effect of feeling physically safe to socialize on one's feelings towards inclusion, specifically during a pandemic. The participant stated, *"now that I am vaccinated, I have been able to relax a lot more and have plans to reconnect with friends."* The accounts of health-related fears point to an experience of overinclusion that appears unique to the pandemic. The awareness of disease transmission became an integral part of how one navigates their social lives.

Missing Social Connection and Dealing with the Rush

For four participants, missing or longing for social connection possibly affected perceptions of inclusion. Two participants in the overwhelmed condition mentioned longing for connection, while also feeling uncertain about how to go about reconnecting safely: *"after a while a lot of my friends starting hanging out a lot but I felt unsafe doing so, I had a fear of missing out so I was really overwhelmed"* and *"I was very stressed about making new friends… the only way we could socialize was how I presented myself on Zoom."* Two participants recalled noticeable changes in invitations to socialize, writing, "*I have a lot of friends, and suddenly*

they were all texting me at once and wanting to hang out… I was really happy but overwhelmed" and *"coming out of the pandemic, it seemed like people wanted to hang out more than even before the pandemic."*

Narratives describing one's own longing for social connection and others' eagerness to socialize confirm the idea that people wanted to be re-included after social distancing. The mixed emotional reactions that accompanied these experiences of inclusion suggest that different levels of comfort with in-person and online socializing affected how people reacted to rises in social invitation in this subset of data.

Conclusion

Studying 24 COVID-related narratives highlighted how differently people experienced inclusion after social distancing. While some accounts suggested positive experiences, the overall pattern in our data suggest that (1) people were more likely to think of COVID-related inclusion experiences when prompted to think of "overwhelming" inclusion (i.e., inclusion with a negative, stress-related connotation) than when prompted to think of greater-than-usual inclusion, and (2) that social and health-related fears greatly affected transition back to in-person social life.

Considering the importance of social connection for well-being and community building, as well as the negative psychological impact of exclusion (even if it is mandated and does not imply the personalized threat of ostracism), our findings insinuate that some people might benefit from support when navigating shifts from mostly remote, highly controlled social interaction, to more spontaneous, less controlled, in-person interactions (Graupmann & Pfundmair, 2022). Such guidance might consist of raising

awareness that rapid changes in socializing norms are real stressors, especially to those already suffering social anxieties. Additionally, pacing reintroduction of greater in-person interactions, by allowing people to attend work remotely, for example, might be advantageous to all participants of a drastically changing social life.

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