SUBJECTIVE THEORIES ON SOLIDARITY DURING THE COVID-19 PANDEMIC AND THE DESIRE FOR SANCTIONING “NON-SOLIDARIC” BEHAVIOUR

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ABSTRACT

Solidarity was perceived to be of great importance during the COVID-19 pandemic, including the expected vaccination against COVID-19. Showing any hesitancy was often declared as a lack of solidarity. This paper focuses on three research questions: (1) How did laypeople perceive solidarity during the COVID-19 pandemic? (2) How did they react to people hesitant to vaccination? (3) What consequences could that have had for health promotion and society? In order to understand subjective theories of laypeople on solidarity during the pandemic – and on vaccination against COVID-19 in particular, 1,858 bottom line comments on ten different internet articles were analysed. As a result, laypeople often shared the idea that vaccination was an act of solidarity. Focusing on those who were hesitant, they attributed this to a lack of cognitive and social competence. Furthermore, the expected consequences of vaccination hesitancy were described, which in turn justified a wide range of suggested sanctions. They included discrimination and exclusion, as well as a desire for personal damage. Finally, possible effects on society are discussed.

Keywords: COVID-19 pandemic, health policy, punitive attitudes, solidarity, subjective theories

INTRODUCTION

Solidarity during crises such as the COVID-19 pandemic

In March 2020, the WHO declared to characterize the COVID-19 outbreak as a pandemic (WHO, 2020). In April 2020, the president of the EU, von der Leyen, gave a speech at the European Parliament Plenary on the EU’s coordinated action to combat the coronavirus pandemic and its consequences. She emphasized that “people of Europe are standing together – with empathy, humility and humanity” (European Commission, 2020). The European Parliament (2020) decided on a resolution that summarised statements on legal, organisational, social, and psychological factors that were assessed as important in crisis management. It accentuated the relevance of solidarity as a
“core value” (A), which would “not [be] an option but a treaty obligation and forms part of our European values” (H). Measures installed by governments had to “always respect the fundamental rights of each and every individual; whereas these measures should be necessary, proportional, and temporal” (G). Besides, they should pay “sufficient attention to the mental health implications of the crisis” (12).

In the attempt to combat the crises, governments tried a variety of measures; some of them took or reduced rights, e.g., lockdowns; others depended on compliance, for example in caring for physical distancing, hygiene measures, and vaccinations. The political system issued laws, regulations, and recommendations. In turn, they contributed to an understanding of desirable behaviour and corrections of deviant behaviour. Statements by policymakers had influenced the understanding of solidarity and non-solidaric behaviour in the crises, too (Altenburger, 2021).

Since the first COVID-19 cases occurred in Germany in spring 2020, there has been an intense discussion on the origin and nature of the virus, the disease, therapies, and protective measures. The communicative exchange contributed to collectively shared knowledge, which in turn influenced collective action (de Rosa et al., 2021).

From the very beginning, solidarity was declared to be of utmost importance in Germany too. It was demanded for healthcare personnel dealing with COVID-19 patients or for those who suffered from the economic consequences of the lockdowns. During the first phase of the vaccination campaign, when vaccines were not available for everybody, solidarity meant leaving the vaccines to the prioritised groups. After that, when vaccines became available for all, solidarity meant everybody should get vaccinated.

For example, the Federal President of Germany declared vaccination against COVID-19 as an “act of solidarity across society” (DW, 2020). Campaigns were launched to increase the vaccination rate. The Federal Ministry of Health explained on its website “zusammen gegencorona.de” (“together against corona”) that everyone should get vaccinated in order to achieve herd immunity: “One for all, all for one – this principle of solidarity also plays a crucial role in fighting the pandemic. Because the more people are protected by vaccination from infection and COVID-19 illness, the more often the virus affects people who are at significantly lower risk of becoming infected – and the harder it can spread. One can also call it community protection or herd immunity” (BMG, 2022). Furthermore, cities (Bremen, 2022), trade unions (e.g., DGB, 2022) or welfare associations (Volkssolidarität Bundesverband, 2022) demanded vaccinations out of solidarity.

A study on EU solidarity in times of COVID-19 by Cicchi and colleagues’ (2020), in 13 EU member states and the UK with a total sample of 21,779 adult respondents from Denmark, Finland, France, Greece, Hungary, Italy, Lithuania, the Netherlands, Poland, Romania, Spain, Sweden and the UK (but not from Germany), confirmed the perceived importance of solidarity. The respondents “believe the best reason to help other EU countries is reciprocity, rather than morality or a shared identity” (p. 9). With respect to the reciprocity, this implies that people tend to link their own contribution to solidarity to the perceived solidarity of others.

While the COVID-19 pandemic emerged as a public concern, hegemonic social representations prevailed and increased the “pressure to conform, creating a collective ethos of social rejection of
anyone who behaves or thinks differently. In this way, a majority opinion is created that reduces uncertainty, provides a solution to a problem, and strengthens social cohesion and collective solidarity” (Páez & Pérez, 2020, p. 1.2). Hence, perception, emotion and behaviour could differ between the majority and the minority. Consequently, “the pandemic also accentuates existing fractures, inequalities and prejudices in society, and fuels populism and associated tribalism – people retreat into identity silos that provide solace in the face of chaos but also identify and vilify outgroups and further polarize society” (Krings et al., 2021, p. 199). In the end, the pandemic could unite and divide people, and enhance solidarity or intensify polarisation (Stjernswärd & Glasdam, 2021).

Against this background, the questions raised how laypeople perceived solidarity during the COVID-19 pandemic and how they reacted to people who were hesitant to receive vaccination.

**In response to a lack of solidarity**

Help, control, and punishment are forms of social control (Peters, 2000). Transferred to a perceived lack of solidarity, society could respond by offering help, control, or punishment. As stated by Hinterlehner (2010), punitive attitudes are influenced by economic fears, anomie, fear of crime and authoritarianism. With respect to the COVID-19 pandemic, all four factors could have been important, with fear mainly addressed to the virus. The author defines two forms of “joy to punish”: Instrumental punishment aims to solve the problem, e.g., to overcome the pandemic, while expressive punishment derives from the motive to cope with negative feelings. In crises, people tend to long for authorities and strong leaders (Schwarz, 2021). High levels of authoritarianism and conservatism are related to a stronger desire for punishment (Hinterlehner, 2010). The latter also stems from personal or vicarious victim experiences, as well as from dramatizing media reports. Both were given in the example of the COVID-19 pandemic. Feelings of insecurity or fear could influence punitive attitudes, whereas fear is possibly replaced by outrage and anger (Roberts et al. 2003). People might tend to attribute emotions to the causing phenomenon (e.g., the virus) or to people identified as the villain (or the transmitter). People try to transform helplessness into the feeling of being able to cope (Streng 2006, Hinterlehner, 2010). Subsequently, punishment becomes a stabilising factor (Kury et al., 2002).

Studies often focus on deviant behaviour that is relevant to criminal law (e.g., Löbmann et al., 2007) or on penal cultures (Drenkhahn et al., 2018). Sometimes, studies are interested in differences between professionals such as judges or public prosecutors and laypeople (Kuhn et al., 2004). Besides the characteristics of the offence, the perceived attributes of the victims and the perpetrator influence the wish to sanction (Greve et al., 2014). Hoven (2018) analysed bottom line comments on articles reporting sex, economic and violent crimes. According to this study, laypersons call for the exploiting of penalties and the suspension of penalties on probation if the interests of identified victims were not considered sufficiently. However, studies that enlighten a possible desire for sanctions in response to a lack of solidarity are rare.

A study commissioned by the Federal Government of Germany aimed to identify ways of correcting undesirable behaviour (vaccination hesitancy) in order to increase the vaccination rate (Klüver et al., 2021). Suggested measures embraced positive incentives (e.g., to regain freedom and fundamental rights via the green passport) as well as negative sanctions, for example, to exclude the
unvaccinated from social life as far as possible. Hence, this study provided suggestions on how sanctions could be used by health policy.

Leading representatives of the political and scientific social systems pointed to solidarity and sometimes mentioned their wish to sanction people who were hesitant to get vaccinated. For example, when the former Federal Minister of Health, was asked about mandatory vaccination, he suggested: “Consistently really 2G\(^{35}\) for all areas of life. (...) Dear people, the year 2022 will be one, no matter how low the incidence is, be prepared, 2G, vaccinated or recovered, and indeed boostered, [...] applies at least the year 2022. If you want to do anything more than visiting your town hall or your supermarket, uh, you need to be vaccinated. That’s a pretty clear message.”\(^{36}\)

The media reported intensively on COVID-19 and linked it to solidarity (e.g. “Vaccinate, what else! It’s called solidarity” (Bock, 2021), or “Those who don’t get vaccinated do not show solidarity” (Deutschlandfunk Kultur, 2021)). Reports, articles, or documentation elicited controversial discussions, and often, they demanded sanctions.

Thus, we could assume that people might also have desired sanctions in the case of a perceived lack of solidarity, which led to the research questions of this paper: How did laypeople react to people hesitant to vaccination, and what consequences could this bring along for health promotion and society? The following case study aims to provide some answers to the research questions.

**CASE STUDY: SUBJECTIVE THEORIES ON SOLIDARITY DURING THE COVID-19 PANDEMIC AND THE DESIRE FOR SANCTIONS IN GERMANY**

**Method**

The study presented here focused on laypeople: (1) How did they perceive solidarity during the COVID-19 pandemic? (2) How did they react to people who were hesitant to receive vaccination? (3) What consequences could this have had for health promotion and society?

This paper analysed bottom line comments on internet articles about COVID-19 and vaccinations in order to detect subjective theories on solidarity and expectations involved. The concept of subjective theories refers to Groeben and colleagues (1988). Subjective theories serve as explanations, predictions and they regulate action. They help to understand an individual’s cognition of the self and the world. They are generated and maintained through communication and dialogue. In that respect, an analysis of bottom-line comments seems to be an appropriate methodological approach. Subjective theories reveal argumentation lines and possible justifications of desired or suggested reactions. Individuals might verify who shares their position, to determine whether they are in the minority or majority. If they identified consensus, this could have a confirming as well as reinforcing effect on their beliefs.

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\(^{35}\) 2G stands for either vaccinated (“geimpft”) or recovered (“genesen”).

\(^{36}\) [https://www.youtube.com/watch?v=G0j0dHNNBkw](https://www.youtube.com/watch?v=G0j0dHNNBkw) – minute 6:07 (accessed 04/02/2022).
Weidmann (2009, p. 3) stresses that – compared to scientific theories – subjective theories are “less coherent and consistent, usually implicit rather than explicit. Still, they effectively serve the important function of orientation in everyday life.” In the case of COVID-19, subjective theories might have partially included objective scientific knowledge on the origin of the virus, different mutations, various courses of disease, vaccination, and other measures to fight the pandemic. Scientific knowledge is often conveyed by the media.

The selection of bottom-line comments considered three criteria: First, media with different readership were included. Second, articles offered commenting. Third, the comments were open to everybody and not only accessible by a closed community at the time of data selection. Table 1 in the appendix presents an overview. It also includes some remarks on the content of the articles, as it provoked commenting.

Ten articles and their 1,858 bottom-line comments were analysed. The analysis referred to the qualitative content analysis by Mayring (2019), which is category-based. Categories were not defined in advance but were derived from the material. The first step is to summarise the content. The second step of explication is necessary if the text is difficult to understand. This was not the case for the bottom-line comments. The third step assigns the content to the category. The content analysis focused on the above-mentioned research questions (1) and (2); the third question is part of the discussion.

Regarding the large number of comments, the following results present a summary with only a few illustrative examples of the bottom-line comments. Verbatim quotes were included; however, it should be noted that the original tone is limited due to translation. The quotes show the chosen names of the commentator, whereas the square brackets point to the article to which a comment was made.

RESULTS

Subjective theories on solidarity and vaccination

As described above, subjective theories could result from attempts to explain people’s vaccination hesitancy. Sometimes, commentators differentiated between those with or without medical reasons, although most comments expressed generalised assumptions.

Some commentators believed that one reason for hesitancy was the lack of cognitive competence. The line of reasoning assumed that no rational arguments existed against vaccination. “Anyone who has not yet been vaccinated is consistently put by me in the drawer ‘IQ below ground and several screws urgently need treatment with a screwdriver’” (“Wolfgang_K.” [6]). People who had decided against a COVID-19 vaccination were called “vaccination fools” (“Nikolaus12345” [6]), because they would “refuse an approved vaccination that has now been tried and tested billions of times – due to obscure conspiracy theories or alleged mass vaccination damage that has been completely eliminated by reality” (“Maria T.” [2]).
Argumentation often used the contrast between very strong pro arguments and only weak or not existing contra arguments. Then, the decision against vaccination became even more irrational. Some commentators referred to the image conveyed by the media of the “prick”\(^{37}\), which reduced vaccination to the brief moment of puncture. Contra arguments were rated as weak or fake because they were—according to several comments—“schwurbleric”\(^{38}\) or fear-driven. Some described people who decided against vaccination as “nuts” (“Paul Merlin” [4]), while other commentators mentioned disorders or craving for recognition and power: “I only know those who are waiting for Novavax (I can accept it) and people for whom vaccination is only a vehicle for their disorders, they wish to finally be important and to pay the powerful back. If you have problems with yourself and your life, you should take advantage of the plenty of opportunities that are available, but don’t turn it on this small but important prick” (“MrGaga” [6]).

Many commentators were sure that vaccination-hesitant citizens also missed social competence and showed a lack of solidarity. “But you can only live individual freedom if the whole system around you works fairly. Individual freedom is therefore inextricably linked to solidarity, the duty to contribute to the functioning of society as a whole. Anyone who refuses to make this contribution on is not an advocate of individual freedom, but merely a despicable egoist who does not understand the overall context” (“Mr. Finch” [6]). Sometimes this lack of solidarity was addressed to certain groups: “I see the lack of willingness to vaccinate, at least among young and healthy people, as a problem of a lack of solidarity or—to put it another way—of a frightening narcissism and egoism in our society” (“Sandy” [3]).

Subjective theories on expected consequences of the deviant behaviour

Subjective theories included multiple beliefs. Commentators asserted that unvaccinated people were responsible for the infection process because they “are a much greater danger for others. [...] the unvaccinated attract an infection more often and more severely” (“Impfbefürworter” [6]). It was implicitly assumed that the pandemic could be overcome by herd immunity, which could have been achieved by vaccination. The argumentation followed a political narrative, as briefly noted above. From this narrative, commentators derived the need for a general mandatory vaccination (“Impfbefürworter” [6]). “Stephan S” ([10]) provided an illustrative example: “[...] only the vaccinated are protected from the virus, never get sick again, and protect others. In contrast to the unvaccinated, they do not pass on the virus and therefore cannot infect healthy elderly people. Anyone who does not understand this is irresponsible and does not really deserve an undisturbed life in our healthcare system.”

The picture of the “tyranny of the unvaccinated” by Frank Ulrich Montgomery\(^{39}\) was also used by commentators. “Online reader” ([7]), e.g., explained that unvaccinated people lacked “understanding of a modern state and its open society. It’s sad that some people still think they know better and try to bully the vast majority!” That implied that the decision against vaccina-

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\(^{37}\) Several public campaigns used this or similar narratives, for example: “Get the prick!” [https://www.wir-rauner.de/aktuelles-und termine/; “A little prick and it is over” [https://www.kstw.de/detailsansicht/?newsid=5996c4e634f7f97e7391e1c00126d154839d7d72] or others that hide the moment of the prick and use the picture of preparation (“Germany rolls up its sleeves” [https://www.zusammengegencorona.de/mitmachen/deutschland-krempelt-die-aermel-hoch/]) or after the accomplished vaccination (“Get the plaster!”, [https://huf-de-deen-pflaster.de/] (accessed 03/06/2022).

\(^{38}\) The expression “Schwurbler” has become a synonym for people who talk nonsense, often associated with conspiracy thoughts.

\(^{39}\) [https://www1.wdr.de/nachrichten/corona-spaltung-geimpfte-ungeimpfte-100.html] (accessed 03/06/2022).
tion reflected an attempt or wish to act against other people. Sometimes, commentators emphasised that the unvaccinated were perpetrators, while others became victims (“anton reutlinger” [3], “Life is Life” [9]).

Other commentators argued more on a societal or economic basis: “People here love their freedom more than anything. [...] just no vaccination because the ego is above everything. [...] If these people would only endanger themselves, I wouldn’t care. However, they endanger everyone in the country and damage the recovery of our country on the long term. [...] A people of egomaniacs has no place in this world anymore” (“Joachim Frenz” [4]).

**Subjective theories of sanctions**

Subjective theories on solidarity in the pandemic and the possible consequences of vaccine hesitancy sometimes resulted in a desire to correct or sanction deviant behaviour.

**Discrimination in rights**

Several commentators believed that unvaccinated people had rights that they should not have, or that the rights of the vaccinated were not adequately secured. “Whoever cites the Basic Law for himself (unvaccinated), what about the integrity of the health of the vaccinated? Who gives the unvaccinated the right to infect us when they want all freedoms back?” (“GigiPotsdam” [8]). Others put it even more drastically when they accused the unvaccinated “to intentionally harm others” (“Impfbefürworter” [6]). Following this line of reasoning, the unvaccinated should not be allowed to harm other people anymore. Likewise, they should no longer receive solidarity as they were perceived as lacking in solidarity: “People’s true faces show: ‘What do I care about the others?’ Anyone who collapses remains lying by the wayside. It doesn’t matter to them. In that case, there is no difference between humans and animals. No, I don’t belong to that ‘we’ – all of them egocentrics. I have a certain minimum expectation of a human society, but I’m probably in the minority. I must tolerate that. You can really only protect yourself (also and especially from reckless people) as best you can. The bitter lesson is that those who are empathetic, social, and sensitive are on their own. That has always been the case. Well, then we’ll do it like this – but then YOU shouldn’t expect any more help from US either” (“kditd” [9]).

**Discrimination on the labour market**

Several bottom-line comments were addressed to employment bans. “I would say that the state must FINALLY unpack its instruments of torture. (...) I would also introduce the 2G rule and enable employers to relocate or fire people who refuse to be vaccinated in order to protect other employees from them” (“Athanassios L.” [2]). Some comments pointed to the healthcare sector. One assumption was that healthcare professionals had to believe in “modern medicine”, and therefore in vaccination. Hesitancy would prove their incompetence, and hence they needed to be sacked: “[...] if you work in health care, and you don’t believe in modern medicine, that is unacceptable. These people obviously don’t care about their clients/patients, and they obviously don’t have enough medical understanding for their own profession either” (“Besorgter Döner” [6]). Furthermore, health
care workers without vaccination should not receive any appreciation: “Health care workers who refuse to get vaccinated deserve no recognition, only sacking. It’s not about the pandemic, it’s about protecting patients from those who refuse vaccination” (“Impfbefürworter” [6]). Some commentators stated that they would reject treatment by unvaccinated therapists/nurses as a matter of principle (“GigiPotsdam” [8]). Unvaccinated healthcare professionals would be “toxic colleagues” who could only be “caught” with “the obligation to vaccinate”. The commentator concluded, “when those [unvaccinated] say goodbye, they’re making it easier for those who really take it seriously” (“TimeShift”, [6]).

Discrimination in the health care system

Commentators demanded a financial burden for the unvaccinated. “Those who wilfully refuse to be vaccinated despite the availability of safe and effective vaccines must face health and personal consequences and should not receive financial support from the community. Solidarity is not a one-way street” (“Wolfgang L.” [2]). This argument was frequently applied to treatment costs: “Every non-vaccinated COVID patient must now partially pay for the costs of their medical, nursing and rehabilitation treatment themselves. Why should sensible people pay for their treatment?” (“Ben Harms” [4]). Some bottom-line comments revealed a certain malicious glee, when unvaccinated people would even need to sell – and lose – their home to afford medical treatment: “It would be easier for health insurance companies to refuse to cover the costs of hospitalised unvaccinated people. Then their house would be gone” (“Veith Maria” [4]).

According to many bottom-line comments, unvaccinated people should have been excluded from the healthcare system based on solidarity. This could be a sanction due to the attributed know-it-all: “Maybe these people all should be kicked out of the health insurance, and they will then have to take care of themselves – since they all know everything much better and are so well versed” (“karstenwehr” [6]).

At the same time, it was repeatedly stated that unvaccinated people should not expect hospital treatment or should refrain from it of their own accord. “I hope that you have made a living will that if you fell ill with COVID-19, you do not want intensive care treatment. That would be consistent […]” (“Harald V.” [2]). It was often emphasised that healthcare personnel would not like to treat or care for unvaccinated patients: “I know many who work there and they are just fed up with people like them.” (“Harald V” [2]). Again, some comments revealed cynicism: “So you would like to die in peace in front of the clinic, as long as you were right that you died unvaccinated? Surely, that can be set up. ;-)” (“RicochetBerlin” [8]).

Exclusion from social community

Some commentators want to exclude the unvaccinated from the community completely. “They’re just stuck in their ego. Their concept of freedom is apparently the freedom to be released of taking responsibility, but they feel free to endanger everyone else. But those people should not have a place in a social community” (“Jutta Denker” [4]).
Comments indicated strong emotions such as anger and disgust. “It is an outrageous, shameless mendacity how these unvaccinated people blackmail politics! I’m angry and sick and ashamed to be part of the human species with them. At least I live in Western Germany where more people are vaccinated, but at the moment I would prefer to be in another European country where the vaccination rate is higher, not because I am afraid of corona, but because people in those countries demonstrate reason, solidarity, and consideration, at least as far as corona/vaccination is concerned. Looking at Germany, heads are shaken in disbelief. That is correct! In this country, many people always think they know it better, [...] Most unvaccinated people are not afraid of the vaccines, they just want to be against it. No matter what the state asks them to do – they will always be against it! Disgusting [...] As to ‘sitting in the same boat’. No way! I don’t want to hear that from anyone anymore. I don’t want to be in the same boat with egoists, long-term sceptics and people who undermine the rule of law” (“vielleichtspäter” [6]).

In general, the unvaccinated should be excluded from social life: “Anyone who still refuses to be vaccinated – even though millions upon millions have now been vaccinated worldwide without a ‘flesh-eating zombie species having developed’ or ‘robots remote-controlled by Bill Gates’– cannot expect to be allowed into a restaurant or cinema [...]. Those who are vaccinated must clearly be treated better” (“Maria T.” [2]).

**Strong authorities, strict laws, and penalties**

As stated above, many comments called for strong authorities. Some urged others to trust policymakers: “Whom do you believe when you even contradict the statements made by Mr. Lauterbach? [the recent Federal Minister of Health, K.W.]” (“Fialein” [6]). Commentators expressed a desire to have an assertive and strict state. Policymakers should abandon the discussion culture: “It’s a shame that people are simply not obliged to get vaccinated. Discussions or not, we need compulsory vaccination, especially in some professions that are important. [...] A little more autocracy would not harm Germany [...]. Everything is always discussed, it makes you cry” (“Rustam Abrekov” [4]).

Following this argument, people called for a strict line and high penalties for non-conformity. In the end, mandatory vaccination for everybody was said to be necessary: “This back and forth of politics is absolutely sickening. About 100,000 corona deaths are probably not enough to understand the seriousness of the situation and to take countermeasures. The only way to reduce bed occupancies in ICUs and to reduce the number of deaths [...] is vaccination. Against this background, the resolution of a general obligation to vaccinate is long overdue” (“Paul Merlin” [4]). As to the logic of this argument, some argued for an even tougher approach: “Finally...!!! Full program please. For all vaccination passport forgers 25,000 euros40 penalty. Great thing. There are currently many unvaccinated people who obtain photos of vaccination cards and sneak into facilities. From now on, vaccination passport control with comparison of ID card. The army and the Federal Police should be allowed to do this... According to the Federal Constitutional Court, compulsory vaccination is admissible. [...] Those who shout that this is illegal can close their mouths again. It’s time to take action. We have hundreds of deaths every day and fellow citizens who still lack solidarity and only

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look for themselves. The appeal to reason has never worked during the pandemic but has been mercilessly exploited every time (“Christian Brodt” [4]).

Commentators also expected policymakers and public servants to be sacked if they did not adhere to the strict line: “If policymakers fail to enforce the laws, [they] must be taken out of circulation immediately” (“JR71” [6]). In the case of public servants, they should receive disciplinary complaints and disciplinary proceedings if they delayed or prevented the implementation of vaccination that was endorsed for all: “But now that vaccination is available and since vaccination is only a minimal intervention with low risk, but with great sense, it must be implemented. […] Statements of ‘schwurbleric’ or overworked people, some of whom work in public authorities or are civil servants, who declare solidarity with unvaccinated people, unacceptable. I therefore demand appropriate supervisory and disciplinary procedures if authorities (employees) delay or even prevent implementation” (“MrDowntown”, [6]).

The need for sanctions was often justified by the attributed intention. Therefore, some pleaded for a “punitive obligation to vaccinate, so that the lack of solidarity, proudly displayed by unvaccinated, has very personal consequences in the form of an entry in the police clearing certificate” (“Gerd Müller” [5]). Others interpreted the refusal of a vaccination offer as bodily injury caused by negligence (“anton reutlinger” [3]). Some commentators have claimed to sue employers of unvaccinated professionals in the care sector (“Jadoo6” [6]). Other comments favoured maximum sanctions: “Of course, compulsory vaccination against COVID must also be enforced, because that’s what it’s decided on. Every first violation should be subject to a fine of up to 25,000 euros. Then, when it was still refused, it must come quickly to enforcement. The notorious vaccination refuser must be brought to the vaccinating doctor by the police. Because compulsory vaccination is compulsory” (“Jutta Denker” [4]).

In the end: illness and death

Following the desire to end the pandemic, comments had gone as far as wishing for unvaccinated people to fall ill of COVID-19: “I wish anyone who could but refuses [vaccination] may get Delta and have time to regret” (“Jörg Driessen” [4]) or to die: “I am vaccinated and do not endanger myself or others, for me the epidemic is over. The fact that unused doses of vaccine are now being destroyed means that everyone has had an offer […]. Let the plague off the chain, then the vaccine bums can wake up or darwinize themselves” (“CnndrBrbr” [1]).

DISCUSSION

Solidarity is especially important during crises such as the COVID-19 pandemic. Political narratives often emphasised its importance and linked solidarity to vaccination. Hence, solidarity was related to health policy, measures to combat the pandemic and to public health. The effectiveness of public health measures also depends on the perspective of laypeople.
Subjective theories of unvaccinated involved social devaluation

The analysed subjective theories of laypeople revealed that they tended to take a picture of the “perpetrator”, which in turn influenced their desire for sanctions (Greve et al., 2014). Subjective theories described people who were hesitant to get vaccinated as having deficits in cognitive and social competence and lacking solidarity. The analysed bottom line comments rarely mirrored an attempt to examine their arguments or to understand them, nor did they include signs of empathy, pity or mercy. Instead, they often reflected contempt. The argumentation lines represented a tendency to refer to categorisation and simplification and could be based on a fundamental attribution error. The decision against vaccination was reduced to personality while ignoring all other factors. This could have contributed to a devaluation of the part of society that had not decided on a COVID-19 vaccination and contributed to social fragmentation. Recurrently, the argumentation included contrasting the two groups – the majority that got vaccinated – and the minority of those who were hesitant. Some comments addressed the responsibility for personal suffering or deaths as well as for social and economic problems to unvaccinated people. Then, their personal decision against vaccination affected everyone. According to the underlying subjective theory, the core problem was not the virus anymore, but this group.

Subjective theories risked overlooking important factors and could have endangered an open discussion of health policy measures

Furthermore, a fundamental attribution error entails the risk that possibly important factors are neglected. Subsequently, this could become a risk to society. If vaccination was perceived to be the only necessary means to fight the pandemic or people believed that once inoculated, they could not be infected by COVID-19 or transmit it to others, further measures could be perceived to be unnecessary. This could have had negative effects for themselves and others and on the success of fighting the pandemic.

Limited perception and communication could exacerbate the reflection of experiences made during the pandemic, new scientific results, or evaluation of health policy measures. The tendency of evolving hegemonic social representations and the pressure of conformity not only produce unanimity but also lead to a generalised absence of criticism (Pizzaro et al., 2020). Some examples hint that such a process might have existed and that the right to free speech was limited (Bethke & Wolf, 2020). This tendency could also cause an authority bias. One commentator described this impression as follows: “But as soon as one deviates even a little from the path of the accepted opinion, one’s opinion is no longer there and must be denounced with all might. That’s not how I imagine democracy...” (“Rico H” [10]).

Subjective theories on sanctions could create a climate of dissatisfaction and hate and endanger social peace

The examples shown above revealed disappointment, frustration, anger, and the desire to punish those who had rights they should not have or who lacked solidarity. The argumentation reflected a kind of reciprocity (as described by Cicchi et al., 2020), which, if impaired, served as a legitimisation for sanctions. The implicitly presumed or explicitly expressed subjective logic was not to show
any solidarity with people who were declared to lack it. A negative reciprocity, according to the
Old Testament “an eye for an eye, a tooth for a tooth” could be driven by the motive for revenge
(Freitag & Manatschal, 2014).

The desire for sanctions included a wide range of measures; it embraced different forms of discrim-
ination and even included the wish for physical harm or death. The argumentation lines showed the
wish to be protected from unvaccinated people – this could be kind of instrumental punishment –
and the wish to punish them for their deviant behaviour – which could be expressive punishment.

The comments demonstrated how easily the values of anti-discrimination and physical integrity
were given up by laypeople and replaced by suggestions that appear to fall back to former times.
The harshness and totality of the suggested sanctions evoke associations with historical examples
of other epidemics in which manifestations of scapegoating, punishment, and segregation also
occurred (Bornini, 2021).

Sometimes, the desire for sanctions seemed to root in the wish for revenge, which could be per-
ceived as “a magical solution to aggressive conflicts that reverberate on many levels” (Lafarge, 2006
p. 447). Yet, if revenge was the chosen strategy, the problem would not be solved, but the situation
could worsen. “One does not fall out of hate as readily as one falls out of love. Revenge pushes
for action but is not satiated by it. The wish for revenge tends towards obsession, as the avenger,
who consciously aims to dominate a painful situation, becomes dominated by his vengefulness”
(Lafarge, 2006 p. 447). In this case, social problems could persist.

Subjective theories, like those presented in this paper, could endanger social peace. The fact that
everybody was affected by the risk of the COVID-19 virus indicated how vast the group of possible
victims was. Dramatizing media reports could aggravate the situation, too. Furthermore, narratives
reproduced by authorities could have enhanced negative emotions and social problems. Their
statements were especially influential because of their tendency to resort to authorities during
crises. Narratives could be helpful, as they could offer orientation and might reduce complexity.
However, dissatisfaction could rise under several circumstances: if the pandemic was not ended as
soon as expected; if subjective theories generated during the crises turned out to be wrong, e.g.,
if assertions of herd immunity or efficacy of the vaccines were different from what was expected;
or if policymakers did not implement the sanctions that people would have liked to see. Finally,
tergroup conflicts between vaccinated and unvaccinated individuals could increase hostility and
aggression. Sometimes, fear of and anger about COVID-19 were not addressed to the virus any-
more, but to the unvaccinated group. Then, they served as a scapegoat. As long as people felt the
need to identify stabilising factors in a health crisis, they might have been motivated to wish for
sanctions (Kury et al., 2002) - aimed at the scapegoat.

Aggression and the wish for revenge could neither solve social problems nor help fight a pan-
demic. Furthermore, the criminalisation of disease transmission was likely to be disadvantageous
for healthcare politics (Lelliott et al., 2021). Even an intense discussion on how to sanction unvacc-
cinated people could deepen social fractures. There was some evidence that aggression did not
remain on the level of communication but culminated in aggressive behaviour. The vaccination
status “explains substantial variance in a range of polarising attitudes and behaviour indicating
its importance for increasing conflicts between vaccinated and unvaccinated individuals” (Henkel
et al., 2023, p. 1). Demonstrations against or for mandatory vaccination repeatedly escalated with victims on all sides, including the police.

If health policy relies on solidarity, as in the given example, this offers a wide range of interpretations and expectations. It can help promote health measures. At the same time, subjective theories constructed by laypeople can result in unintended new challenges. These could be a need for further information, modified health policy, or a need for politicians to sense social tensions in an attempt to prevent or reduce them.

**LIMITATIONS**

The presented results could convey an impression that a perceived loss of solidarity motivated most individuals to call for sanctions. However, this analysis illuminates only one facet of social reality. It does not provide any information about frequencies and, of course, it is not representative. For this reason, it allows only an illustrative insight into subjective theories of only one part of society.

The data selection intended to include diverse sources, although it did not aim at a representative media analysis. However, it is interesting that the comments differed in communication style and the expressed need for sanctions. For example, comments in the FAZ provided less emotional content with fewer suggested sanctions. Comments made on the ZEIT article were repeatedly moralising and sometimes contained a strong desire for sanctions. In contrast, comments in the WELT tended to take a critical stance on mandatory vaccination. This allowed us to assume that the comments of different groups were included in the analysis. However, this observation could inspire further research.

It is obvious that only the perspectives of people who gathered information about COVID-19 on the internet and who participated in bottom line commenting are represented in this study. It can be advantageous to use non-reactive data. At the same time, it can be disadvantageous, because the researcher cannot ask commentators about the motives behind their statements.

This paper interpreted bottom line comments as an expression of laypersons’ perspectives. Yet not everyone involved in the discussion might be a layperson, but data concerning this matter are simply not available.

In the protected space of the internet, which includes anonymity and a lack of direct face-to-face communication, comments may be sharper than they would be in personal contact. Nevertheless, the comments show – possibly even better – how people think and communicate about solidarity and their desire for sanctions. It is possible that the discussions inhere echo chambers (Messeningschlag & Holtz, 2020), reflecting self-affirming representations within those groups that are part of the echo chamber, while perception and evaluation differ remarkably between different echo chambers. Differences were apparent in the analysis. In some discussions, participants often exchanged controversial arguments, and some commentators seemed to long for discussions with those who had opposing opinions. Only the discussion in the WELT was somehow different. Commentators tended to be critical of compulsory vaccination, and they rarely reacted to the few comments that presented contradictory positions.
The analysis was limited to the research questions and should not cause biased perception. Comments also included statements that did not express any desire for sanctions. Some of them inserted critical reflections on solidarity, e.g., towards countries that had less access to vaccines and/or very low vaccination rates ("Case" [3], "NoMeansNo" [9]), or they questioned whether solidarity was actually the motive of those who decided to be vaccinated or if they were just as selfish ("chris" [3]). Bottom line comments also reminded us of general solidarity in healthcare security: "Skiing, swimming, motorcycling, and all dangerous sports are included in statutory health insurance. Fortunately, you are not left alone with vaccination damage, which cannot only occur after corona vaccinations. Would you like to change that?" ("Karlemann" [1]).

Some condemned the desire for sanctions in society ("chris" [3]) or they denounced the treatment of unvaccinated people. “Anyone who agitates against the unvaccinated, as can be read in large numbers here in the forum, is on the bottom drawer of morality and is outside the law! Incitement against certain groups has brought a lot of mischief in this country in the past and people who now incite against unvaccinated people should, in my opinion, be treated with great caution and scepticism!” ("Andreas Tecklenburg" [4]). Commentators also took a critical look at the general obligation to vaccinate: “Why should people be expected to injure themselves against their will, which primarily serves to protect themselves? The suspicion arises that one wants to force the dissenters into line, since equality always seems to be more important to the Germans than freedom. But freedom is the ability [...] to do things that others see as mistakes [...]. By the way, I am fully vaccinated” ("Hans-Jürgen Stellbrink" [4]). In this context, the comments also argued against the expressed desire for strong authorities. "Foremost, I’ve been vaccinated... How do you imagine that? The police come, grabs the person, takes him to the doctor by force, fixes him there and the doctor ‘slams’ the syringe in. Please think about that! Are you serious? High totalitarian things are slowly becoming socially acceptable. Where does that end?” ("Matthias Dautel" [4]).

Incidentally, it was striking how often the commentators, who contributed critical thoughts, e.g., against suggested sanctions, felt the need to emphasise that they were vaccinated. This could reflect an understanding that freedom of expression was restricted to the majority. Perhaps this was already evidence of the social problems mentioned above, which could have resulted from the described subjective theories and the discussion on the wish for sanctions.

LITERATURE


Kerstin Wüstner: Subjective theories on solidarity during the Covid-19 pandemic and the Desire for...


## APPENDIX

### Table 1. Included Articles

<table>
<thead>
<tr>
<th>No.</th>
<th>Title</th>
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| 1   | Spahn’s plans for restrictions on the unvaccinated – Corona          | Tagesspiegel, 08/05/2021  | - removing restrictions on the vaccinated  
- maintaining/tightening restrictions on the unvaccinated?  
- risk of “de-solidarization spiral”                                                                                       | 107             |
| 2   | End of continued payment of wages: The pressure on the unvaccinated is too high | Augsburger Allgemeine, 09/10/2021 | - “sluggish vaccination campaign”  
- sanctions for the unvaccinated are wrong  
- broad understanding of solidarity in health behaviour                                                                 | 18              |
| 3   | What does solidarity mean in the Corona era?                          | Spektrum.de, 11/01/2021   | - vaccinations provide the best protection against a severe course of COVID-19  
- unvaccinated should pay for treatment if they are in hospital due to COVID-19  
- people who could not be treated because of exhausted capacities died                                                                 | 137             |
| 4   | Loss of job and fine of up to 25,000 euros? What threatens the unvaccinated if vaccination is compulsory | Focus, 11/19/2021         | - political discussion about compulsory vaccination  
- compulsory vaccination is legal  
- penalties refusal between 5 and 2,500 € per violation  
- need for a law to make vaccination compulsory  
- consequences for the healthcare system if the partial vaccination obligation takes effect                                                                 | 121             |
| 5   | Strict corona measures: solidarity of the vaccinated                  | FAZ, 12/03/2021           | - no red lines, vaccination as an act of national solidarity  
- striving for compulsory vaccination                                                                                     | 54              |
| 6   | Compulsory vaccinations in the healthcare system: sensitive solidarity with the unvaccinated | ZEIT, 01/30/2022 (Note: Comments that contain e.g. allegations are deleted by the editors) | - unvaccinated healthcare personnel are irresponsible  
- need for a law to make vaccination compulsory  
- consequences for the healthcare system if the partial vaccination obligation takes effect                                                                 | 275             |
| 7   | Munich in solidarity: New alliance opposes the Corona protesters     | Abendzeitung, 01/03/2022  | - authorised demonstrations against corona measures  
- groups want to demonstrate against corona deniers  
- advocate for vaccinations and solidarity                                                                                   | 39              |

Table continues on the next page

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43 [https://wrlgs.spektrum.de/menschen-bilder/was-heisst-solidaritaet-in-der-corona-aera/](https://wrlgs.spektrum.de/menschen-bilder/was-heisst-solidaritaet-in-der-corona-aera/) (accessed 03/02/2022).
## Subjective theories on solidarity during the Covid-19 pandemic and the Desire for...

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<tr>
<td>8</td>
<td>Orientation debate Bundestag discusses pros and cons of mandatory corona vaccination for the first time[^48]</td>
<td>Rbb24, 01/26/2022</td>
<td>- overview of relevant statements by the parties on mandatory vaccination</td>
<td>89</td>
</tr>
</tbody>
</table>
| 9   | No solidarity for the vulnerable[^49] | TAZ, 02/18/2022 | - releasing measures in March means less freedom for those at risk  
- the goal was never to fight the pandemic, but to relieve hospitals | 47 |
| 10  | “Vaccination is a minimally invasive procedure”[^50] | Welt, 02/26/2022 | - interview with Emilia Fester from the green party  
- lockdowns can only be avoided by herd immunity  
- this requires compulsory vaccination  
- mandatory vaccination is a minimally invasive intervention in physical self-determination | 971 |

[^49]: [https://taz.de/Problematische-Corona-Oeffnungen/!5833565/](https://taz.de/Problematische-Corona-Oeffnungen/!5833565/) (accessed 03/04/2022)  
SUBJEKTIVNE TEORIJE O SOLIDARNOSTI TIJEKOM PANDEMIJE COVID-19 I ŽELJA ZA SANKCIONIRANJEM „NESOLIDARNOG” PONAŠANJA

SAŽETAK


Ključne riječi: COVID-19 pandemija, zdravstvene politike, kažnjavajući stavovi, solidarnost, subjektivne teorije