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TO AVOID A SCAPEGOAT MECHANISM.  
PERCEPTION OF COVID-19 VACCINATION  
AMONG INHABITANTS OF EU  
– A STUDY BASED ON THE REPORTS OF THE EUROBAROMETER

INTRODUCTION

In the Covid-19 pandemic, the part of René Girard's reflections which concerns the cognitive and symbolic moment of homo sapiens' development, connected with the transition from animalism to culture, acquires particular significance.<sup>1</sup> Focusing the anger of the community on a single individual makes it possible to stabilise it on new terms and to emerge from the chaos into which it occasionally falls.<sup>2</sup> Girard tries to show the essential paradox inherent in contemporary culture by pointing out that Western culture, precisely when it tries to free itself from its denominational and religious assumptions, reveals its Judeo-Christian roots. This stems from the conviction that every ideology present in contemporary culture is based on the notion of sacrifice. There are victims: of the holocaust, of capitalism, of social injustice, of racial and sexual discrimination, etc.<sup>3</sup> There can therefore also be victims of pandemics – individuals and groups (Asians) responsible for the global situation. Judeo-Christianity, by making us aware of the innocence of

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<sup>1</sup> Marek Drwięga, „O początkach kultury z René Girardem,” *Diametros* no. 11(2007): 146–147 (142–150).

<sup>2</sup> Anna Urbańska-Szymoszyn, „Mimesis i przemoc. U podstaw Girardowskiej teorii kształtowania się zjawisk kulturowo-społecznych.” *Rocznik Antropologii Historii* no. 2(5)(2013): 51 n.

<sup>3</sup> Drwięga, „O początkach kultury z René Girardem,” 148.

the victim, has exposed an unjust and haphazard victim-seeking mechanism that can no longer function, and thus from an evolutionary point of view, modern societies have reached a new stage of development.

As Girard himself puts it “we need not engage in eternal mimetic rivalries. We need not accuse our neighbour – we can learn to forgive him.”<sup>4</sup> Instead of looking for a ‘scapegoat,’ the focus should be on solving the problem itself with, for example, mass vaccination against Covid-19. The media play a vital role in promoting appropriate attitudes and behaviour during the pandemic.

The COVID-19 pandemic is accompanied by an “infodemia”<sup>5</sup> without precedence, that is, an excessive quantity of information in the media also in the field of vaccination, making an objective opinion difficult. This may cause disorientation and a lack of social trust and fuel people's fears and anxieties. Media coverage of the COVID-19 vaccine can create opinion both in terms of fears and assessments of vaccination.

In the context of the main problem, the question arises whether media coverage of the COVID-19 pandemic influence EU inhabitants’ opinions/conceptions (fears and assessments) about vaccine acceptance or create confusion by paralysing their protective actions?

## 1. MATERIALS AND METHODS

The aim of the article is an analysis primarily aimed at demonstrating the relationship between fears (health, social and economical) and assessments of COVID-19 vaccination and media information, based on research of the Eurobarometer, carried out in all member countries of the EU in the period from the 20<sup>th</sup> of March 2020 to the 30<sup>th</sup> of June 2021. In order to solve the research problem, we shall analyse the report *Public opinion monitoring in the time of COVID-19* prepared for DG Communication Public Opinion Monitoring Unit, available in the internet archives of the European Parliament.<sup>6</sup> We shall limit ourselves to two parts of the report: *Analytical summary* and *Countries annex*. An indicator of perceptions of the COVID-19

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<sup>4</sup> René Girard, *Początki kultury*, translated by Michał Romanek (Kraków: Wydawnictwo Znak, 2006), 140.

<sup>5</sup> World Health Organization. 2021. Infodemic, accessed March 2021, 1, [https://www.who.int/health-topics/infodemic#tab=tab\\_1](https://www.who.int/health-topics/infodemic#tab=tab_1).

<sup>6</sup> Archive of reports: *Public opinion monitoring in the time of COVID-19*, <https://www.euro.parl.europa.eu/at-your-service/pl/be-heard/eurobarometer/public-opinion-in-the-time-of-covid-19>.

vaccine will be respondents' opinions on fears and assessments of vaccination, analysed in three groups of countries (enthusiasts, realists, sceptics of the vaccination) typified on the basis of the declaration willingness of their inhabitants to be vaccinated in three problematic fields: health, society and economy.

The assumption is that the fears of EU inhabitants are created by the media through unreliable coverage or lack of information about the vaccine, while assessments are the result of media information made directly.

At the beginning of the research process, I formulated the following questions:

1. What assessments in the health, social and economical fields are declared by vaccination enthusiasts, realists and sceptics?
2. What fears in the health, social and economical fields are expressed by vaccination enthusiasts, realists and sceptics?
3. To what extent does media information differentiate the opinions of EU inhabitants (fears and assessments)?

I accepted the following research hypotheses:

1. In the health field, positive assessments of the vaccine prevail, saying that it will help to recover from a pandemic, in the social field assessments concerning the vaccination of priority groups, and in the economical field assessments concerning the purchase of vaccines by the EU
2. Health opinions are dominated by fears about vaccination reactions; social opinions are dominated by fears about the possibility of control through new technologies (the possibility of implanting a chip), while economic opinions are dominated by fears about the availability of vaccination.
3. The fears of EU inhabitants are the result of unreliable media coverage or lack of information about the vaccine, while assessments are the result of reliable, directly given media information.

In order to solve the main problem I shall apply the following research methods: a quantitative analysis of the content of reports, a qualitative analysis of the contents, comparative and analytical descriptive methods. The research process has three stages, namely:

1. A quantitative analysis of the content of the reports.
2. A qualitative analysis of the content of the reports.
3. Conclusions and discussion.

It should be noted that the Eurobarometer reports cover only a subset of the attitudes/opinions that contribute to public behaviour. They work on an atomistic social model of society as an agglomeration of autonomous

individuals whose behaviour is not affected by cultural and social interactions or fashionable norms within subgroups. Hence, the conclusions are also based on modelling member countries as coherent agents with characteristic attitudes and views that are treated as hallmark standards for each country. Although that gives an impressive measure of international variation, that representation misses the extent of variation within countries, within cultural subgroups of countries, and within age cohorts.

## 2. RESULTS AND DISCUSSION: THE PUBLIC OPINION OF INHABITANTS OF THE EU COUNTRIES AND GREAT BRITAIN IN THE DOMAIN OF THE PERCEPTIONS OF COVID-19 VACCINATION

### 2.1. A QUANTITATIVE ANALYSIS OF THE CONTENT OF THE REPORTS

The purpose of the quantitative analysis of the content of the reports is collecting and ordering the research matter containing the opinions of the inhabitants of EU countries regarding the pandemic and the vaccine against COVID-19 in the reports *Public opinion monitoring in the time of COVID-19* (table 1).

The research matter makes up 24 reports *Public opinion monitoring in the time of COVID-19* covering the period from the 20<sup>th</sup> of March 2020 to June 2021 (15 weekly reports during the first surge of the pandemic: 20<sup>th</sup> of March – 27<sup>th</sup> of July 2020 and 5 monthly reports<sup>7</sup> containing data of the second surge of COVID-19: September 2020 – February 2021) and 4 monthly reports covering the period of the third surge: March–June 2021.

The question arises, in what range do the opinions of the inhabitants of the EU on the subject of vaccination being a form of preventive action and also a reaction to information received – register themselves in the general number of opinions regarding the COVID-19 pandemic, considering health, social and economical problems.

In the period of the COVID-19 pandemic (March 2020–June 2021), the inhabitants of EU countries jointly expressed 369 opinions<sup>8</sup> (in this: I surge:

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<sup>7</sup> There is no report for August 2020. Data for November and December contain a report dated December 2020.

<sup>8</sup> One opinion of a given country may contain more than one opinion regarding health, social and economic problems, the numbers therefore do not sum up. “COVID-19 Coronavirus Pandemic,” accessed 1.03.2021, <https://www.worldometers.info/coronavirus/>; “COVID-19 Coronavirus Pan-

150, II surge: 91, III surge: 128). Most of the opinions, 24 opinions each come from Italy (14<sup>th</sup> place in the Worldometer's COVID-19 data in the first surge; 7<sup>th</sup> in the II surge, 8<sup>th</sup> in the II surge), Germany (I surge: 18; II surge: 10, III surge: 12) and France: 23 (I surge: 19, II surge: 6, III surge: 4). A reverse tendency – the least opinions come from Luxembourg: 1 (I surge: 93, II surge: 101, III surge: 106); three each from Malta (I surge: 153, II surge:

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demic,” accessed 1.09.2020, <https://www.worldometers.info/coronavirus/>; “COVID-19 Coronavirus Pandemic,” accessed 1.06.2021, <https://www.worldometers.info/coronavirus/>; European Parliament, *Public opinion monitoring in the time of COVID-19*, accessed 2020-2021, <https://www.europarl.europa.eu/at-your-service/pl/be-heard/eurobarometer/public-opinion-in-the-time-of-covid-19>; European Parliament, *Public opinion monitoring at a glance in the time of COVID-19: 20 March 2020* (Brussels: Eurobarometer, 2020); European Parliament, *Public opinion monitoring at a glance in the time of COVID-19: 27 March 2020* (Brussels: Eurobarometer, 2020); European Parliament, *Public opinion monitoring at a glance in the time of COVID-19: 3 April 2020* (Brussels: Eurobarometer, 2020); European Parliament, *Public opinion monitoring at a glance in the time of COVID-19: 20 April 2020* (Brussels: Eurobarometer, 2020); European Parliament, *Public opinion monitoring at a glance in the time of COVID-19: 27 April 2020* (Brussels: Eurobarometer, 2020); European Parliament, *Public opinion monitoring at a glance in the time of COVID-19: 5 May 2020* (Brussels: Eurobarometer, 2020); European Parliament, *Public opinion monitoring at a glance in the time of COVID-19: 12 May 2020* (Brussels: Eurobarometer, 2020); European Parliament, *Public opinion monitoring at a glance in the time of COVID-19: 19 May 2020* (Brussels: Eurobarometer, 2020); European Parliament, *Public opinion monitoring at a glance in the time of COVID-19: 27 May 2020* (Brussels: Eurobarometer, 2020); European Parliament, *Public opinion monitoring at a glance in the time of COVID-19: 3 June 2020* (Brussels: Eurobarometer, 2020); European Parliament, *Public opinion monitoring at a glance in the time of COVID-19: 9 June 2020* (Brussels: Eurobarometer 2020); European Parliament, *Public opinion monitoring at a glance in the time of COVID-19: 16 June 2020* (Brussels: Eurobarometer, 2020); European Parliament, *Public opinion monitoring at a glance in the time of COVID-19: 23 June 2020* (Brussels: Eurobarometer, 2020); European Parliament, *Public opinion monitoring at a glance in the time of COVID-19: 1 July 2020* (Brussels: Eurobarometer, 2020); European Parliament, *Public opinion monitoring at a glance in the time of COVID-19: 7 July 2020* (Brussels: Eurobarometer, 2020); European Parliament, *Public opinion monitoring at a glance in the time of COVID-19: September 2020* (Brussels: Eurobarometer, 2020); European Parliament, *Public opinion monitoring at a glance in the time of COVID-19: October 2020* (Brussels: Eurobarometer, 2020); European Parliament, *Public opinion monitoring at a glance in the time of COVID-19: December 2020* (Brussels: Eurobarometer, 2020); European Parliament, *Public opinion on COVID-19 vaccination. December 2020* (Brussels: Eurobarometer, 2020); European Parliament, *Public opinion monitoring at a glance in the time of COVID-19: January 2021* (Brussels: Eurobarometer, 2021); European Parliament, *Public opinion monitoring at a glance in the time of COVID-19: February 2021* (Brussels: Eurobarometer, 2021); European Parliament, *Public opinion monitoring at a glance in the time of COVID-19: March 2021* (Brussels: Eurobarometer, 2021); European Parliament, *Public opinion monitoring at a glance in the time of COVID-19: April 2021* (Brussels: Eurobarometer, 2021); European Parliament, *Public opinion monitoring at a glance in the time of COVID-19: May 2021* (Brussels: Eurobarometer, 2021); European Parliament, *Public opinion monitoring at a glance in the time of COVID-19: June 2021* (Brussels: Eurobarometer, 2021).

116, III surge: 122), Slovakia (I surge: 119, II surge: 44, III surge: 52) and Croatia (I surge: 96, II surge: 52, III surge: 55).

The opinions on the subject of the vaccinations of which there are 127, constitute 34,4% of the total of opinions and were mostly expressed in the period of the II surge of the pandemic: 64. The first opinion was expressed in April 2020 by the inhabitants of Slovakia. The greatest number of opinions was noted in December 2020: 15, January 2021: 20; and February 2021: 14 (at that time, the vaccination campaign was beginning); whereas in March and May 2020 there were no opinions concerning the vaccinations.

## 2.2. A QUALITATIVE ANALYSIS OF THE CONTENT OF THE REPORTS

### 2.2.1. The level of declarations regarding the reception of the vaccination COVID-19 vs. opinions related to fears and assessments

Taking into account the level of declarations given by inhabitants of each of the EU countries regarding the reception of the vaccination, three groups can be distinguished:<sup>9</sup>

1. Enthusiasts of the vaccination (E) – the highest level of positive declarations regarding the reception of the vaccination (< 60%) – 7 countries: DK, FI, IE, MT, NL, PT, SE.

2. Realists of the vaccination (R) – a moderate but growing level of positive declarations of the will to accept vaccination (41-60%) – 12 countries: AT, BE, DE, EE, ES, FR, GR, IT, LT, LU, RO, SI.

3. Sceptics of the vaccination (S) – the lowest level of positive declarations of reception of the vaccination (> 40%) – 8 countries: BG, CY, CZ, HR, HU, LV, PL, SK.

### 2.2.2. Assessments of vaccination and health, social and economic anxieties – perception of vaccination

#### 2.2.2.1. Vaccination enthusiasts

In EU countries where the highest level of positive declarations of acceptance of vaccination was noted, half of the inhabitants of Portugal (50%) think that the vaccination was prepared too quickly, however, 63% notice that if it were dangerous then it would not have been certified in the MEA; 68% of those studied thought that possible complications should be ascribed

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<sup>9</sup> The article is based on research conducted from March 2020 to June 2021 (three surges of the Covid-19 pandemic) by the research team of Małgorzata Sławek-Czochra and Małgorzata Gruchola.

to the pharmaceutical industry. As good points are mentioned a decrease of mortality (46%), a reduction of the intensification of symptoms (41%) and a limitation of infection (37%). Nearly three quarters of those studied (72%) think that vaccination will help bring back normality.

A definite majority of the inhabitants of Portugal positively assesses the government's action as regards vaccination. 72% of respondents think that the first who should be vaccinated are priority groups, 55% claim that the government organizes distribution in an effective way. Half of the those studied (50%) maintain that the financial resources for the program of vaccination are sufficient, 43% classify the information of the government regarding vaccination as complete; 38% think that the government preserved transparency in the process of purchase; similarly as regards the pharmaceutical industry (34%) and 36% of those studied think themselves well informed. 79% of the Portuguese maintain that the distribution of vaccination will not bring to an end the universal wearing of masks in public before the year 2022. Plans to limit restrictions for those vaccinated are supported by 56% of the Dutch, whereas 28% reject them. Among supporters of vaccination 86% trust the national organ for health affairs (RIVM). Despite the acceptance of vaccination, only 15% positively assess the government's vaccination strategy. The number of respondents who wish to assuage prophylactic action has doubled in the space of a month, from 21% in January to 45% in February 2021.<sup>10</sup>

#### 2.2.2.2. Vaccination realists

In the group of countries with a moderate, growing level of positive declarations regarding vaccination, among motives inclining Germans to be vaccinated they mention the need for preserving their life and health: 69%, the will to protect others: 62%, the will to get rid of limitations resulting from a sanitary regime: 32%. Half of the Germans (52%) think that the tempo of vaccination is too slow, 36%: adequate, and 8% that it is too quick. The majority (70%) declare themselves for the purchase of the vaccination in Europe by the EU and not independently by member countries, although 64% claim that the image of the EU has decidedly deteriorated because of

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<sup>10</sup> European Parliament, *Public opinion.....: September 2020*; *ibidem, Public opinion....: October 2020*; *ibidem, Public opinion....: December 2020*; *ibidem, Public opinion on COVID-19 vaccination: December 2020*; *ibidem, Uncertainty – EU – hope. Public opinion in times of COVID-19. Third round. Public opinion survey commissioned by the European Parliament a Public Opinion Monitoring Study: November 2020*; *ibidem, Public opinion....: January 2021*; *ibidem, Public opinion....: February 2021*; “COVID-19 Coronavirus Pandemic”, 2.

this. Nearly half of the Greeks 48% (+12 pp in January 2021) positively assessed the national vaccination program; 41% (-3 pp): negatively. More than 62% unfavourably assessed the separate vaccination of government officials. More than half (65%) think that the EU properly sees to the distribution of vaccination to member countries, although (47%) claim that with delays and 28% think that such action is improper. Half (56%) have an optimistic attitude to the combat with COVID-19 after the beginning of vaccination. One third of the Lithuanians proclaim themselves in favour of compulsory vaccination, although nearly half (46%) is against this. Supporters of vaccination claim that they are afraid of falling ill or infecting others (17%), they think that this is the only effective way of fighting with the pandemic (15%), they believe in its effectiveness and trust scientific knowledge (14%). In February 2021 more than half of the Lithuanians (60%) claimed that probably vaccination will be good, however, the short time of the duration of clinical research arouses their fear. At the same time they indicated (59%) that it is the only way to return to a life without pandemic restrictions. In turn, 44% claim that it had not been tested sufficiently before its introduction and that its promotion is only beneficial for large pharmaceutical firms. According to the Lithuanians, the vaccination declarations form the public commentaries of experts (62%), doctors (47%) and politicians (8%). Supporters of vaccination more often trust official information whereas sceptics: the social network. Although 63% of the French are opposed to compulsory vaccination, 62% declare themselves in favour of vaccination for people who wish to travel by plane and visit those particularly subject to infection in senior citizens' home or in hospitals (60%). According to 63% of the French vaccinations in the country are carried out too slowly, 26% (+4 pp): properly, and 10% (-2 pp) think that the action was carried out too quickly. Three quarters in addition think that the national strategy of vaccination is neither clear (74%), nor effective (72%). As regards the question of information concerning the way how the concoction of the firm Astra Zeneca works, more than a half (68%) judge the government's action as not trustworthy, as incoherent (71%), not carried out in the right pace (79%). 68% of the French think that the government will not achieve its aim, which is the vaccination of all adults by the end of the Summer (22 September 2021). A decided majority (75%) of Italians think that vaccination will help end the pandemic and 18% expressed an opposite opinion. Nearly half (45%) think that vaccination should be compulsory and more than half (55%) that it should be voluntary. One third of those under research (30%) think that by the end of Autumn



2021 they will gain population immunity, at the same time 58% claim that this will not be, 12%: do not have an opinion. Nearly half of the Italians (49%) negatively assess the national campaign of vaccination, whereas 39% assess it positively. They forecast that vaccination will be ready by March–April 2021.

In September, a third of the Rumanians (33,3%) indicated that they would accept vaccination if they had the certainty that there would be no side-effects, 8% need more information regarding vaccination. They see the causes of sceptical opinions in the meagre information from official sources: 32,6%, the low quality of the vaccination and medicine on the Rumanian market: 11,5%, in the negative opinions appearing in the media: 9,1%, the influence of acquaintances: 5,5%, in the lack of knowledge: 6,4%. According to half of the Rumanians the information concerning the general national campaign of population vaccination which the government supply is insufficient (32,6% have a contrary opinion), and 15% think it to be useless. At the same time 92,6% have heard of the EU campaign. According to 56,6% of the inhabitants of Rumania the national campaign is well prepared, 39,3% claim the direct opposite. 71% positively assess the involvement of the army in this campaign. A decided majority of Rumanians (73,2%) also assesses well the decision of the EU regarding the negotiation and purchase of vaccination for all countries of the EU; 22,5%: badly. According to the Austrians, the reluctance to vaccination issues from the low perception of the risk, young age, low social coherence, the fact of being a woman, rightist views. A falling satisfaction of the government correlates with the falling inclination to be vaccinated (the most important factor). In February 2021, more than half (62%) of the Austrians see as responsible for problems with the purchase of vaccination the slow advance of vaccination of people outside of their country: EU: 34% and the producers of vaccination: 28%. They think that the strategy of diffusing vaccination has annihilated the positive image of the EU.<sup>11</sup>

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<sup>11</sup> European Parliament, *Public opinion...: September 2020*; *ibidem, Public opinion...: October 2020*; *ibidem, Public opinion...: December 2020*; *ibidem, Public opinion on COVID-19 vaccination: December 2020*; *ibidem, Uncertainty – EU – hope. Public opinion in times of COVID-19. Third round. Public opinion survey commissioned by the European Parliament a Public Opinion Monitoring Study: November 2020*; *ibidem, Public opinion...: January 2021*; *ibidem, Public opinion...: February 2021*; “COVID-19 Coronavirus Pandemic”, 1; “COVID-19 Coronavirus Pandemic”, 2.

### 2.2.2.3. Vaccination sceptics

In countries sceptical towards vaccination<sup>12</sup> nearly half of the Bulgarians (48%), in January 2021 thought vaccination was dangerous, 34%: relatively dangerous, and 18% had no opinion. A lack of interest in vaccination resulted from the lack of certainty that vaccination is safe: 12% and from contradictory information regarding vaccination or a lack of information: 9%. The media bring about unnecessary panic (76,9%). Every fifth of those questioned (21,1%) claim that the coronavirus does not constitute a serious threat, 17%, that it does not exist (fraud). More than half of the Bulgarians (53,2%) perceive COVID-19 as a dangerous form of flu and a threat to humanity (23,8%). Scepticism towards vaccination may imply conspiratorial theories: COVID-19 is an illness created synthetically: 52%; a biological weapon: 40%; a variant of flu: 33%; chips are found in vaccination which control the human being: 16% and COVID-19 spreads by the intermediary of technology 5G: 10% (53%: no) and that there exists a vaccination that is kept secret in order to allow the gaining of considerable financial profit by pharmaceutical firms: 45%. In December 28% of the Latvians thought that the coronavirus is not more threatening than “common flu,” and 31% treated it as a media bubble of politicians and the media, and not a real problem. In the opinion of the inhabitants of Croatia (5) and Cyprus (7) there are none referring directly to vaccination.

In June 2020, Slovenians feared that vaccination may cause more serious health problems than COVID-19 and be the source of conspiratorial theories regarding the subject of the virus's origin. Analogically, in October one third of teachers (31%) thought that vaccination will make possible the implanting of chips into people. In October 26% of the Hungarians deemed as real the introduction of vaccination by the end of 2020 and the vaccination of all the inhabitants by the end of Summer 2021 (56%), whereas the international average was remarkably higher: 74%. According to the decided majority (90%) of Hungarians it should be free of charge. The opinions concerning vaccination are formed by: 83%: indicator of deaths and infections, 80%: the communication channels of the government; 79%: information in the media, 67%: information in the social media. 50% do not believe in what the internet says what the groups diffusing conspiratorial theories against vaccination. Although in January 2021 in Hungary as the only member EU country

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<sup>12</sup> Apart from percentage criterion the number of most often occurring opinions were also taken into account.

which accepted the Russian vaccine, only 2% of those questioned would agree to accept it. The most popular vaccines are: Pfizer/BioNTech: 46%, Moderna: 5%, Astra/Zeneca: 4%. 89% of the Hungarians think that the government should take into account the opinion of epidemiologists, 48%: of economists, and 29%: of sociologists. Young people trust natural historians-epidemiologist (57%), whereas older people (49%) trust EU institutions. A wave of criticism was brought about by information of the separate vaccination of politicians: 80% agree that everyone should comply with the vaccination program; 16% have an opposite opinion. 22% think that universality of vaccination will end the pandemic.

The opinions of the inhabitants of the Czech Republic also mark themselves into conspiratorial theories. In September more than half thought that COVID-19 was created in a laboratory and that an effective vaccination will be available in 2021. Even if they themselves are against vaccination, they support the universality of vaccination (52%). 25% do not trust vaccination; 16% support compulsory vaccination; 18% would pay for vaccination and 66,6% had to do with false information on the subject of vaccination. 45% of the Czechs think the epidemic is a media bubble (57% in August); 18% that it is an illness of a great risk. 33,3% trust controversial doctors who are not experts but appear in the media; 66% do not believe in the information passed on by the Ministry of Health. In turn, over 80% of people trust workers of the health service.<sup>13</sup>

### **2.2.3. Health, social and economical anxiety**

During the time of the COVID-19 pandemic (March 2020–February 2021), the inhabitants of EU countries expressed 69 opinions on the subject of vaccination, containing altogether 70 fears (29 each: health and social, 12: economical). The most fears were provoked by post-vaccination reactions: 10.

#### **2.2.3.1. Health anxiety**

From among 27 EU countries fears regarding the health consequences were expressed by 14 countries. The least by enthusiasts: 2/7, whereas realists and sceptics 6 each (R: 6/12; S: 6/8).

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<sup>13</sup> European Parliament, *Public opinion...: September 2020*; *ibidem, Public opinion...: October 2020*; *ibidem, Public opinion...: December 2020*; *ibidem, Public opinion on COVID-19 vaccination: December 2020*; *ibidem; Uncertainty – EU – hope. Public opinion in times of COVID-19. Third round. Public opinion survey commissioned by the European Parliament a Public Opinion Monitoring Study: November 2020*; *ibidem, Public opinion...: January 2021*; *ibidem, Public opinion...: February 2021*.

Enthusiasts of vaccination fear:

- side-effects/post-vaccination reactions: SE, PT,
- too short a period of the testing of vaccination: PT,
- low effectiveness: PT,
- the worsening of the situation in hospitals: PT.

Realists fear:

- side-effects/post-vaccination reactions: BE, DE, GR, LT, IT, RO,
- a lack of trust regarding vaccination: GR, LT, RO,
- too short a period of the testing of vaccination: DE, LT,
- the threat to life and health: DE, LT,
- low effectiveness: IT, RO, for some categories: IT.

However, in countries where a sceptical declaration was observed of acceptance of vaccination, fears are generated by:

- too short a period of the testing of vaccination: BG, SK, CZ,
- side-effects/post-vaccination reactions: HU, PL,
- the risk of infection: BG, LV,
- the indicators of deaths and infection: HU.

#### **2.2.3.2. Social anxiety**

As regards social consequences which were expressed by 13 of 27 EU countries, the greatest anxiety was declared by realist countries of vaccination: 7/12, in turn: sceptics: 5/8 and enthusiasts: 1/7.

The anxiety of enthusiasts is generated by:

- a negative opinion of the government's strategy of vaccination: NL,
- the limiting of restrictions for the vaccinated (the problem of vaccination passports): NL.

The anxiety of realists of vaccination is generated by:

- a negative opinion of the government's strategy of vaccination: AT, FR, IT, DE,
- the possibility of controlling society with the aid of new technologies (implanted together with a portion of the chip): BE, IT, RO,
- the limiting of restrictions for the vaccinated, taken as an attempt to segregate the population, the problem of vaccination passports: DE, FR,
- the criteria of vaccination: the negative opinion of the separate vaccination of government officials: GR,
- the negative opinion of the level of information given by the government, official sources, media: RO,
- the need to protect those threatened: DE,
- a low social coherence: AT.

Opinions in the field of social consequences of sceptics are created by:

- contradictory, false information on the subject of vaccination given by the government, media, also social and/or a lack of information: BG, CZ, HU, LV,
- the possibility of controlling society with the aid of new technologies (implanted together with a portion of the chip): BG, SK, CZ,
- media creating unnecessary panic: BG, CZ,
- conspiratorial theories on the subject of the virus' provenance: created synthetically: BG, in a laboratory: CZ, as a biological weapon: BG, spread by the intermediary of technology 5G: BG,
- a critical opinion of vaccination (politicians) vaccinated separately: HU.

#### **2.2.3.3. Economic anxiety**

Anxiety in the field of economical consequences was expressed by 11 countries. The most by realists (5/12), then by enthusiasts (4/7) and sceptics (2/8).

In enthusiasts anxiety was created by:

- fear of a lack of availability of vaccination before the end of 2020: DK, SE, FI,
- a lack of trust regarding the productive process: PT.

In realists anxiety was generated by:

- fear of a lack of availability of vaccination before the end of 2020: ES, FR,
- the lack of a preferred mark: DE,
- the worsening of the image of the EU issuing from a negative opinion of the strategy of purchasing vaccines in Europe by the EU and not independently by member countries: AT, DE,
- a promotion of vaccination profitable only for large pharmaceutical firms: LT.

Whereas in sceptic countries fear is implied by:

- a lack of availability of the preferred mark of vaccine: HU,
- conspiratorial theory: the vaccine is kept in secret in order to make possible the gaining of great financial profit by pharmaceutical firms: BG.

#### **2.2.3.4. Number of infections and deaths and the Vaccination Coverage**

In the period of the second and third surge (from September 2020 to June 2021) the number of cases of infection by COVID-19 in countries of the European Union grows constantly, although the rate of growth as well as the number of deaths is different in particular countries and months.

**Table 1.**  
Number of vaccination doses vs. cases, deaths and position  
in Worldometer's COVID-19 date

Country EU	Number of vaccination doses per 100 people** and cases/deaths per 1000000 people							Position in Worldometer's COVID-19 data		
	2020				2021			I surge	II surge	III surge
	Sep.	Oct.	Nov.	Dec.	Jan.	Feb.	Jun.			
	Vaccination enthusiasts									
NL	0/5,17 5.00/3 67.67	0/12,24 3.98/39 3.88	0/26,55 1.76/49 9.51	0/37,28 0.75/59 8.43	0,45/53,3 64.15/75 6.88	4,57/61,0 67.33/87 3.25	80,75/97,6 62.72/1,03 3.42	41	21	20
PT	0/6,37 6.67/1 83.88	0/9,149. 42/208. 69	0/21,31 0.90/33 1.58	0,05*/3 4,675.5 1/562.2 4	1,16/51,8 27.42/83 7.82	5,19/77,1 87.57/1,5 11.37	69.81/84,4 85.79/1,67 6.74	42	27	30
SE	0/8,64 8.65/5 78.85	0/10,14 0.04/58 5.19	0/17,56 1.17/61 0.34	0,02*/3 3,767.6 9/744.0 1	1,21*/51, 834.04/1, 022.15	5,29*/60, 243.07/1, 230.58	73.44/106, 753.84/1,4 34.43	27	29	26
IE	0/6,38 9.29/3 61.90	0/9,402. 78/372. 23	0/13,75 1.68/40 0.79	0,04*/1 5,548.6 4/432.1 8	1,57*/33, 729.22/5 13.59	5,68/42,6 10.51/79 9.55	73.15/53,6 41.21/991. 59	57	58	68
DK	0/3,62 7.81/1 09.28	0/5,959. 56/116. 88	0/10,81 6.61/13 1.21	0,11*/2 0,136.7 2/165.9 1	2,80/32,4 57.08/29 7.12	7,26/35,4 76.31/38 2.76	73.63/49,9 42.87/434. 69	70	59	63
FI	0/1,57 4.71/6 1.18	0/2,336. 16/63.1 7	0/3,486. 01/66.6 0	0,03*/5, 677.78/ 84.11	0,78/7,20 3.22/111. 54	5,00/9,14 3.58/129. 22	71.28/16,9 58.88/176. 64	86	96	97
MT	0/5,55 7.83/3 6.24	0/9,421. 59/101. 92	0/18,19 5.45/21 9.69	0/25,25 9.38/40 0.87	2,65/34,5 88.11/53 4.49	12,15/45, 171.55/6 68.12	117.04/59, 255.96/947	153	116	122
	Vaccination realists									
FR	0/6,39 4.07/4 55.08	0/12,51 6.57/48 6.38	0/29,83 8.42/65 4.65	0/35,91 3.27/86 8.44	0,54/43,0 10.12/1,0 28.47	4,42/51,7 82.48/1,2 08.76	68.61/85,8 31.40/1,63 9.82	19	6	4
IT	0/4,79 6.25/5 89.35	0/6,311. 45/601. 57	0/19,49 2.12/74 8.06	0,01*/3 0,938.1 3/1,089. 23	1,83/38,9 07.57/1,3 45.06	5,13/45,1 39.60/1,5 51.97	72.50/70,3 52.99/2,10 5.45	14	7	8

ES	0/12,9 00.65/ 641.7 3	0/19,70 6.52/71 7.64	0/31,19 6.62/87 1.98	0/37,69 0.52/1,0 35.21	1,64/48,1 69.70/1,1 40.29	5,61/66,0 10.06/1,3 99.84	73.22/80,1 19.42/1,72 3.79	9	8	11
DE	0/3,16 3.06/1 11.80	0/4,202. 56/116. 24	0/9,583. 53/150. 06	0,03*/1 6,603.2 5/281.0 1	1,31/24,1 55.32/54 5.51	5,19/28,0 11.05/77 9.24	75.23/44,4 01.75/1,07 3.64	18	10	12
RO	0/5,47 3.53/2 20.19	0/8,758. 33/294. 94	0/18,72 7.88/46 3.99	0,01*/2 9,408.8 5/712.0 4	0,95/35,7 77.18/88 8.78	5,98/39,6 77.03/1,0 10.78	44.92/56,4 56.08/1,67 0.71	46	24	27
BE	0/8,17 9.31/8 56.80	0/16,56 3.02/89 1.06	0/46,24 3.03/1,2 44.30	0,01*/5 2,756.0 2/1,568. 47	1,0/58,24 9.47/1,75 6.06	5,41/63,8 06.08/1,8 72.54	78.02/92,5 94.23/2,15 7.69	33	25	28
AT	0/3,80 8.96/8 4.05	0/6,686. 80/97.3 8	0/22,64 5.67/20 3.08	0,01*/3 6,382.9 0/516.0 8	1,09/43,3 90.03/77 5.78	5,15/48,2 67.01/91 2.79	72.62/71,7 50.95/1,17 9.69	61	37	39
GR	0/1,31 7.27/3 0.03	0/2,297. 50/46.2 4	0/7,119. 31/106. 11	0,01/12, 124.27/ 363.14	0,72/14,1 85.86/52 0.10	5,32/16,5 80.93/59 0.23	67.90/40,1 31.63/1,20 1.94	99	56	47
LT	0/1,24 6.01/2 6.08	0/2,479. 16/34.5 3	0/12,75 6.90/10 8.36	0,09*/3 5,519.3 5/408.4 8	1,83/61,6 98.03/87 6.10	5,83/70,1 38.35/1,1 31.40	73.01/103, 329.46/1,6 16.44	124	64	64
SI	0/1,84 2.77/6 4.94	0/5,138. 70/84.6 6	0/26,47 6.09/38 3.37	0,29*/4 7,274.7 5/1,033. 70	2,32/70,7 17.08/1,5 01.25	5,88/86,4 77.10/1,7 93.03	63.77/123, 432.03/2,1 20.53	122	65	70
EE	0/2,05 1.96/4 8.25	0/3,000. 29/51.2 6	0/5,757. 09/61.0 6	0,02*/1 4,083.2 6/118.3 5	1,26/27,2 10.66/23 8.21	5,16/39,8 23.18/37 7.68	63.25/98,5 51.30/954. 01	121	86	90
LU	0/11,6 36.23/ 198.0 9	0/16,36 4.84/21 2.47	0/41,42 4.91/34 9.85	0,19*/6 7,494.6 0/667.7 6	0,60*/77, 686.68/8 77.03	3,84/84,5 44.77/97 6.08	71.32/111, 002.59/1,2 87.01	93	101	106
Vaccination sceptics										
PL	0/1,98 5.22/5 8.84	0/3,960. 80/87.4 1	0/18,83 8.47/27 3.42	0,01*/3 0,318.3 3/615.8 8	1,15/37,5 81.18/86 7.82	5,70/42,0 51.25/1,0 78.88	67.42/76,1 38.82/1,97 4.39	44	14	14
CZ	0/3,63 2.09/4 4.45	0/13,91 4.49/11 4.86	0/42,96 5.43/57 9.70	0,01*/5 4,743.8 6/909.8 0	1,08/81,6 70.23/1,3 10.02	4,46/101, 864.02/1, 704.18	63.95/155, 281.72/2,8 18.67	68	18	21

HU	0/1,43 6.70/6 6.87	0/4,319. 93/108. 90	0/14,59 1.71/32 0.59	0,01*/2 9,581.0 2/749.1 4	1,17/36,1 42.48/1,1 57.00	4,90/40,2 46.89/1,4 23.55	97,56/83,7 75.01/3,10 7.17	97	34	33
SK	0/1,19 8.98/6 .96	0/4,437. 10/13.0 1	0/15,89 2.43/93. 41	0/24,82 2.69/22 9.14	1,14/40,4 25.17/61 5.79	5,73/50,9 65.60/1,0 90.18	65.01/142, 020.12/2,2 83.98	119	44	52
BG	0/2,62 1.59/1 05.92	0/3,958. 73/135. 86	0/14,14 0.00/30 6.54	0,02*/2 6,522.0 5/864.2 2	0,26/30,4 38.90/1,2 17.11	1,11/33,2 08.44/1,3 91.82	23.23/60,9 93.92/2,60 0.10	77	48	46
HR	0/3,34 9.11/5 6.03	0/5,489. 05/83.8 0	0/20,51 1.69/25 5.53	0,19*/4 3,777.4 1/676.6 9	1,01/54,5 18.24/1,1 08.33	2,94/57,9 07.30/1,3 00.52	53.82/87,8 75.35/1,99 9.19	96	52	55
LV	0/785. 71/18. 56	0/1,620. 19/21.7 4	0/5,591. 66/65.2 1	0/14,03 4.55/18 9.27	0,89*/28, 663.95/4 95.70	2,03/40,8 14.29/77 8.28	52.82/72,9 79.01/1,31 9.81	135	85	87
CY	0/1,75 8.19/2 5.12	0/2,608. 75/28.5 4	0/8,198. 01/44.5 3	0/18,02 6.05/95. 90	1,17/32,6 62.44/18 9.52	5,07*/37, 248.59/2 53.45	80.22/82,9 99.54/418. 52	144	104	103
UK	0/5,54 8.60/6 15.05	0/9,964. 60/639. 06	0/20,22 3.40/76 6.37	0,99*/2 7,891.4 5/957.5 8	5,93/48,9 88.68/1,2 88.16	23,75/59, 801.72/1, 732.64	106.24/67, 223.46/1,8 76.68	10	5	7

Own study based on: "COVID-19 Coronavirus Pandemic", 1; "COVID-19 Coronavirus Pandemic", 2; "COVID-19 Coronavirus Pandemic", 3; "Coronavirus (COVID-19) Vaccinations", 1; "Coronavirus (COVID-19) Vaccinations", 2; "Coronavirus (COVID-19) Vaccinations", 3; "Coronavirus (COVID-19) Vaccinations", 4.

In early 2021 in the leaders of EU countries whose inhabitants receive vaccination are Malta (12,15) and Denmark (7,26). In 2020 December their number of infections and cases involving death were placed on a medium or low level. In 2021 February an increase of infection occurred in Malta, but the number of deaths remain on a medium level. These countries are characterized by a high level of declarations to accept vaccination. The highest indicator of vaccinability (23,75) was noted in the UK, which was outside the EU. At the end of the third surge (2021 June), in the leaders of the EU countries whose inhabitants vaccinate are again Malta (117.04), the Netherlands (80.75), Hungary (97.56), Cyprus (80.22) and the UK (106.24). Two of these are enthusiasts (MT and NL) and two are sceptics (HU, CY). All have an av-



average number of SarsCov-2 cases and a rather low number of deaths. The exception is Hungary, where the number of deaths is the highest in the EU.

In early 2021 for 17 EU countries the level of vaccinability is on high level between 5 and 6 out of a 100 inhabitants (AT, BE, CY, DE, EE, ES, FI, GR, IE, IT, LT, PL, PT, RO, SE, SK, SI). In 2021 February, in nine of these countries a high number of illnesses and deaths due to COVID-19 was noted: BE, ES, IT, LT, PL, PT, SE, SK, SI. Five of these are vaccination realists: BE, ES, IT, LT, SI; two each: sceptics (PL, SK) and vaccination enthusiasts (PT, SE). In two countries a high number of illnesses and a medium one of deaths were noted: AT (realists), IE (enthusiasts) and in one – RO – a high number of deaths and a medium number of illnesses (realists). In Germany the number of illnesses and deaths are at a medium level, as is the level of declarations of acceptance of vaccination. Two countries with a medium number of illnesses and low number of deaths due to SarsCov2 are characterized by varied declarations regarding vaccination: CY – low, Estonia – moderate. Greece, whose declarations of willingness to accept vaccination are on a moderate level, undertook vaccination despite the fact that the number of illnesses is low and that of deaths is on a medium level. Finland, enthusiastic as regards vaccination, is in the forefront despite the fact that both the number of illnesses and deaths is very low. One should note that in 2020 December when vaccination was begun in this group of countries, there were only two countries with a very high number of illnesses and deaths (BE, SI – realists), 4 countries with a low number of illnesses and deaths (EE, LT: realists, CY: sceptics, FI: enthusiasts), 3 countries where the number of illnesses was low and that of deaths was on a moderate level (IE: enthusiasts; GR, DE: realists) and six countries with a moderate number of illnesses and deaths (SE, PT: a high level of declarations, RO, AT: a moderate one, SK and PL: a low one). Two countries (ES, IT) had a medium number of illnesses and a high one of deaths and at the same time were characterised by a moderate level of declarations of acceptance of vaccination. In 2021 June, only 11 EU countries (SE, DK, IE, FI, IT, ES, DE, BE, AT, LT, LU) have high indicator of vaccinability, but these are above 70 per 100 inhabitants. Most of them have an medium or low level of infections and a rather low number of deaths. Exceptions are LT and LU with very high number of infection and IT and BE with number of death between 2,000 and 2,500. These countries are both vaccination enthusiasts (SE, DK, IE, FI) and realists (IT, ES, DE, BE, AT, LT, LU).

In 2021 February the medium indicator of vaccinability above 4 possessed 4 countries (FR, CZ, HU, NL). France (realists), where a very high number of illnesses and deaths was noted and a moderate level of declarations, the Czech Republic (sceptics) and Hungary (sceptics) with a high number of illnesses and a high number of deaths and the Netherlands (enthusiasts) where the number of illnesses is very high and deaths on a moderate level. It should be noted that in December when vaccination was begun, the number of illnesses and deaths was on a medium level in all these countries, with the exception of the Czech Republic where a high number of illnesses was noted. In June 2021, 8 countries (PT, FR, GR, SI, EE, PL, CZ, SK) have the level of vaccinability above 60 per 100 inhabitants. Among them, there are 4 countries with medium number of infections (FR, PT, PL, EE), three with very high (CZ, SK, LU) and one (GR) with one of the lowest in the EU. They are also characterised by an medium number of fatalities except CZ – high and EE – low. Most are realists (FR, GR, SI, EE) and sceptics (PL, CZ, SK). Only PT was initially enthusiastic.

In 2021 February the least used doses of vaccination for a 100 inhabitants is in 4 member countries of the EU (among these, three with a sceptical attitude towards vaccination: BG, HR, LV and one – LU – with a moderate one). In Bulgaria this is 1,11, in Latvia 2,03, in Croatia 2,94, and in Luxemburg 3,84. In February nearly all these countries were characterized by a high number COVID-19 illness with the exception of Bulgaria, where this number was on a medium level and a medium number of deaths with the exception of Bulgaria and Croatia where a high number of mortal cases was noted. One should note that even in December the number of illnesses and deaths were rather on a medium level, with the exception of Croatia and Luxemburg, where the number of illnesses was high. Six months after the beginning of vaccination, 4 countries (HR, LV, RO, BG) still have low vaccination rates below 60 per 100 inhabitants. Instead of Luxemburg, whose inhabitants have started to be vaccinated, Romania, with its medium level of morbidity and mortality, which so far has shown a realistic approach to vaccination, has appeared in this group.

In 6 (DK, FI, IE, MT, NL, SE) out of 7 countries with a high level of declarations of willingness to accept vaccination, a very high or high indicator of vaccinability was noted, and in one (PT) above 60 – medium. Similarly in countries with a growing trust of vaccination – 7 (AT, BE, DE, ES, IT, LT, SI, LU) out of 12 countries show a high level of vaccination (between 70 and 80) and four medium – France, Greece, Slovenia, Estonia over 60. The ex-

ception is Romania where the indicator is only 44,92. In the group of sceptical countries regarding vaccination 3 countries with the lowest level of positive declarations (BG, HR, LV) despite growing numbers of illnesses and deaths due to COVID-19 have a very low indicator of vaccinability, and 5 countries (CY, CZ, HU, PL, SK) began vaccination. Three of these (CZ, PL, SK) at present show a medium vaccinability and two (CY, HU) a very high one – over 80. It is vital to highlight that since February 2021 the vaccination enthusiast countries dominate in the EU, and since April 2021, the countries with sceptical attitude towards vaccination are no longer observed. This may be indicative of the appearance of a mimesis<sup>14</sup>, whereby disadvantaged countries begin to imitate those communities that have begun to recover from a pandemic crisis thanks to reliable media information.

### 3. THE WAY OF INFORMATION ABOUT COVID-19 VACCINE AS A DETERMINANT OF FEAR OR A BASIS FOR CONSCIOUS ASSESSMENT

In the majority of reports analysed were found the regularities concerning the ways in which inhabitants EU were informed about the COVID-19 vaccines. They are characteristic for definite groups of countries.

The opinions of the COVID-19 pandemic created by media information directly implies positive perceptions of vaccination in enthusiast countries. Among mentioned opinions, there are no negative assessments regarding information in the field of vaccination. Their inhabitants treat information transmitted by the government as complete (PT: 43%); they think themselves well informed (PT: 36%), this is reflected in the high level of trust in respect of the national structures for health affairs (PT: 68%).

The opinions created by the unconscientious media transmission is most visible in the assessments indicated by the inhabitants of sceptic countries. The lack of desire to be vaccinated results from contradictory false information and/or a lack of information (CZ: 66,6%). They maintain that the media provoke unnecessary panic (BG: 76,9%; LV: 31%), COVID-19 is a media

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<sup>14</sup> “Man is the creature who does not know what to desire, and he turns to others in order to make up his mind. We desire what others desire because we imitate their desires.” René Girard, “Generative Scapegoating,” in: *Violent Origins: Walter Burkert, René Girard, and Jonathan Z. Smith on Ritual Killing and Cultural Formation*, ed. Robert G. Hammerton-Kelly (Stanford: Stanford University Press, 1987), 122.

bubble and not a real problem (CZ: 57%). Opinions concerning vaccination are formed in 80% by government communication channels; 79%: information in the media, 67%: information in social media. They do not believe the internet pages spreading conspiratorial theories against vaccination (50%), nor information passed on by the Ministry of Health (66%). In the group of realist countries varied opinions regarding information were noted. Vaccination opinions are formed by the comments of experts (LT: 62%), doctors (LT: 47%), politicians (LT: 8%). The causes of sceptical assessments on the subject of vaccination are put down to feeble information from official sources: RO: 32,6%, to negative opinions appearing in the media: 9,1%, to a lack of knowledge: 6,4%. Supporters of vaccination more often trust official information, and sceptics: social networks. As regards the problem of information - more than half (FR: 68%) judge the action of the government as not awakening trust and 71% as incoherent. 8% need more information regarding vaccination (RO). Analogically according to half of the Rumanian information concerning the national campaign of population vaccination passed on by the government are insufficient (32,6%: sufficient), and 15% judge it to be useless.

Correct information giving definite knowledge about the dangers (infection, deaths) and their consequences intensifies protective action of society in the form of vaccination, noted among realist countries. Whereas a lack of correct information in sceptical countries paralyses the protective action of their inhabitants.

The basic sources of reliable information on COVID-19 vaccines are health professionals: doctors, nurses and pharmacists (61%) and national health authorities (44%). These are the most trusted source of information in 24 of the 27 EU Member States; in the remaining three countries these are the national health authorities. Other sources of information are by the EU (20%), the national government (19%), 'people around you' (15%), regional or local public authorities (14%) and the media (11%). The oldest respondents have the highest level of trust in health professionals and authorities as a source of information on COVID-19 vaccines. The lower respondents' age, the more likely they are to trust the EU, the regional or local public authorities, the media, websites, online social networks and people around them as a source for information on COVID-19 vaccines<sup>15</sup>.

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<sup>15</sup> European Commission, *Attitudes on vaccination against COVID-19: May 2021*. Flash Eurobarometer 494 Report (Brussels: Eurobarometer, 2021), 4.

This collected data allow confirm the postulates of the third hypothesis stating that the fears of EU inhabitants are the result of unreliable media coverage or lack of information about the vaccine, while assessments are the result of reliable, directly given media information.

### CONCLUSION

The aim of the article was a study of the public opinion of inhabitants of the European Union in the field the perception (assessments and fears) of vaccination in the relation to media information mode, based on the Eurobarometer reports: *Public opinion monitoring in the time of COVID-19*, taking into account data from the period from the 20<sup>th</sup> of March 2020 to the 30<sup>th</sup> of June 2021.

In order to solve the title problem I accepted three research hypotheses, of which the majority were confirmed. The first supposed that in the health field, positive assessments of the vaccine prevail, saying that it will help to recover from a pandemic, in the social field assessments concerning the vaccination of priority groups, and in the economic field assessments concerning the purchase of vaccines by the EU.

The highest number of assessments in the health, social and economical fields belong to those countries with a realistic approach to vaccination, with both positive and negative assessments. The fewest marks were given by enthusiasts, with no negative assessments of the vaccine. The number of opinions of sceptics is in the middle with negative assessments prevailing. The opinion that the vaccine will be good was expressed by vaccination enthusiasts and realists (E: PT; R: LT), bad (SI), while the opinion that it will help to fight a pandemic was expressed by inhabitants of all EU country groups (E: PT; R: LT, IT; S: HU), which allows confirming the first hypothesis in the field of health. Positive assessments regarding the preservation of the vaccination order were expressed by inhabitants of all groups, with realists and sceptics being critical of politicians vaccinating out of order (R: GR; S: HU). In the social field, however, the most opinions concern the national vaccination campaign, which is assessed positively (E: PT; R: GR, RO) or negatively (R: FR, IT), thus refuting hypothesis one in the social field. The largest number of economical opinions belongs to realists, but in this area the positive perception of the purchase and distribution of vaccines by the EU prevails (E: PT; R: DE, GR, RO), although some countries

indicate delays, which allows confirming hypothesis one in the economical field.

The second hypothesis assuming that health opinions are dominated by fears about vaccination reactions; social opinions are dominated by fears about the possibility of control through new technologies (the possibility of implanting a chip), while economic opinions are dominated by fears about the availability of vaccination.

Out of 27 EU countries fears in respect of the field of health consequences were expressed by 14 countries (E: 2/7; R: 6/12; S: 6/8). 29 fears were noted (E: 5; R: 16; S: 8). Anxiety is created most of all by fears regarding the post-vaccination reaction: 10 (E: 2/5; R: 6/16; S: 2/8), which allow us to confirm the postulates of the second hypothesis in the health area for all three separated groups of countries.

In social consequences indicated by the inhabitants of 13 EU countries, the most fears were declared by realists of vaccination: 7/12, sceptics: 5/8 and enthusiasts: 1/7. From the data obtained it results that the most fears (6) are generated by the possibility of controlling society with the aid of new technologies, which allows for the confirmation of the postulates of the second hypothesis in the social area, but only for realist and sceptic countries. Fears in the field of economic were expressed by 11 countries (R: 5/12; E: 4/7; S: 2/8). Anxiety is created most of all by the lack of availability of vaccination before the end of 2020: 5 (E: 3/4; R: 2/6) and of the preferred brand (R: 1/6; S: 1/2), which confirms the assumptions of the second hypothesis in the area of economic for enthusiast and realist countries regarding vaccination.

The third hypothesis supposed that the fears of EU inhabitants are the result of unreliable media coverage or lack of information about the vaccine, while assessments are the result of reliable, directly given media information.

The opinions of the COVID-19 pandemic created by media information directly implies positive perceptions of vaccination in enthusiast countries. Among mentioned opinions, there are no negative assessments regarding information in the field of vaccination. Their inhabitants treat information transmitted by the government as complete (PT); they think themselves well informed (PT), this is reflected in the high level of trust in respect of the national structures for health affairs (PT).

The opinions created by the unconscientious media transmission is most visible in the assessments indicated by the inhabitants of sceptic countries. The lack of desire to be vaccinated results from contradictory false infor-

mation and/or a lack of information (CZ). Opinions concerning vaccination are formed by government communication channels, information in the media and information in social media. They do not believe the internet pages spreading conspiratorial theories against vaccination, nor information passed on by the Ministry of Health.

In the group of realist countries varied opinions regarding information were noted. Vaccination opinions are formed by the comments of experts, doctors and politicians. The causes of sceptical assessments on the subject of vaccination are put down to feeble information from official sources, negative opinions appearing in the media and a lack of knowledge (RO). The above information allows the third hypothesis to be confirmed.

The medial, impartial communication openly speaking of definite threats (infection, deaths) and their consequences, intensifies the protective action of society in the form of vaccination. A lack of honest information is the cause of anxiety paralysing protective action and despite the deteriorating situation of society such countries as BG (1-2), HR (2-3), or LV (2-3) remain sceptic in respect of vaccination. When there is no solution to the problem, the chaos caused by the pandemic deepens and aggression is born<sup>16</sup>. The violence imitated by people may prompt the inhabitants of some EU countries to seek a way out of the new stability by scapegoating. In the 21st century, perhaps it would be appropriate to use the mimesis<sup>17</sup> to follow this media coverage, which will avoid the search for the guilty.

#### REFERENCES

- Drwięga, Marek. „O początkach kultury z René Girardem”. *Diametros* no. 11(2007): 142–150. Accessed March 17, 2022. <https://bazhum.muzhp.pl/media/files/Diametros/Diametros-r2007-t-n11/Diametros-r2007-t-n11-s142-150/Diametros-r2007-t-n11-s142-150.pdf>
- Girard, René. “Generative Scapegoating.” In: *Violent Origins: Walter Burkert, René Girard, and Jonathan Z. Smith on Ritual Killing and Cultural Formation*, edited by Robert G. Hammerston-Kelly, 107–130. Stanford: Stanford University Press, 1987.
- Girard, René. *Początki kultury*. Translated by Michał Romanek. Kraków: Wydawnictwo Znak, 2006.
- Girard, René. *Rzeczy ukryte od założenia świata*. Translated by Mirosława Goszczyńska. *Literatura na Świecie* no. 12(1983): 74–182.

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<sup>16</sup> René Girard, *Rzeczy ukryte od założenia świata*, translated by Mirosława Goszczyńska, *Literatura na Świecie* no. 12(1983): 81.

<sup>17</sup> Konrad Lorenz, *L’Agression. Une histoire naturelle du mal* (Paris: Flammarion, 1969; 1963, 56, for: Lucien Skubla, “Paradoks ofiary u Rene Girarda,” *Christianitas* no. 67–68(2017): 119–120.

- Lorenz, Konrad. *L'Agression: une histoire naturelle du mal*. Paris: Flammarion, 1969 (1963).
- Skubla, Lucien. „Paradoks ofiary u Rene Girarda.” *Christianitas* no. 67–68(2017): 116–137.
- Urbańska-Szymoszyn, Anna. „Mimesis i przemoc. U podstaw Girardowskiej teorii kształtowania się zjawisk kulturowo-społecznych.” *Rocznik Antropologii Historii* no. 2(5)(2013): 51–82.
- “COVID-19 Coronavirus Pandemic.” Accessed 1.03.2021. <https://www.worldometers.info/coronavirus/>.
- “COVID-19 Coronavirus Pandemic.” Accessed 1.06.2021. <https://www.worldometers.info/coronavirus/>.
- “COVID-19 Coronavirus Pandemic.” Accessed 1.09.2020. <https://www.worldometers.info/coronavirus/>.
- Coronavirus (COVID-19) Vaccinations. 2020, Accessed December 15, 2020. <https://ourworldindata.org/covid-vaccinations>.
- Coronavirus (COVID-19) Vaccinations. 2021, Accessed January 15, 2021. <https://ourworldindata.org/covid-vaccinations>.
- Coronavirus (COVID-19) Vaccinations. 2020, Accessed February 15, 2021. <https://ourworldindata.org/covid-vaccinations>.
- Coronavirus (COVID-19) Vaccinations. 2020, Accessed June 15, 2021. <https://ourworldindata.org/covid-vaccinations>.
- European Commission. *Attitudes on vaccination against COVID-19: May 2021*. Flash Eurobarometer 494 Report. Brussels: Eurobarometer, 2021.
- European Parliament. *Public opinion monitoring at a glance in the time of COVID-19: 20 March 2020*. Brussels: Eurobarometer, 2020b.
- European Parliament. *Public opinion monitoring at a glance in the time of COVID-19: 27 March 2020*. Brussels: Eurobarometer, 2020c.
- European Parliament. *Public opinion monitoring at a glance in the time of COVID-19: 3 April 2020*. Brussels: Eurobarometer, 2020d.
- European Parliament. *Public opinion monitoring at a glance in the time of COVID-19: 20 April 2020*. Brussels: Eurobarometer, 2020e.
- European Parliament. *Public opinion monitoring at a glance in the time of COVID-19: 27 April 2020*. Brussels: Eurobarometer, 2020f.
- European Parliament. *Public opinion monitoring at a glance in the time of COVID-19: 5 May 2020*. Brussels: Eurobarometer, 2020g.
- European Parliament. *Public opinion monitoring at a glance in the time of COVID-19: 12 May 2020*. Brussels: Eurobarometer, 2020h.
- European Parliament. *Public opinion monitoring at a glance in the time of COVID-19: 19 May 2020*. Brussels: Eurobarometer, 2020i.
- European Parliament. *Public opinion monitoring at a glance in the time of COVID-19: 27 May 2020*. Brussels: Eurobarometer, 2020j.
- European Parliament. *Public opinion monitoring at a glance in the time of COVID-19: 3 June 2020*. Brussels: Eurobarometer, 2020k.
- European Parliament. *Public opinion monitoring at a glance in the time of COVID-19: 9 June 2020*. Brussels: Eurobarometer 2020l.



- European Parliament. *Public opinion monitoring at a glance in the time of COVID-19: 16 June 2020*. Brussels: Eurobarometer, 2020f.
- European Parliament. *Public opinion monitoring at a glance in the time of COVID-19: 23 June 2020*. Brussels: Eurobarometer, 2020m.
- European Parliament. *Public opinion monitoring at a glance in the time of COVID-19: 1 July 2020*. Brussels: Eurobarometer, 2020n.
- European Parliament. *Public opinion monitoring at a glance in the time of COVID-19: 7 July 2020*. Brussels: Eurobarometer, 2020o.
- European Parliament. *Public opinion monitoring at a glance in the time of COVID-19: September 2020*. Brussels: Eurobarometer, 2020p.
- European Parliament. *Public opinion monitoring at a glance in the time of COVID-19: October 2020*. Brussels: Eurobarometer, 2020r.
- European Parliament. *Public opinion monitoring at a glance in the time of COVID-19: December 2020*. Brussels: Eurobarometer, 2020s.
- European Parliament. *Public opinion monitoring at a glance in the time of COVID-19: January 2021*. Brussels: Eurobarometer, 2021a.
- European Parliament. *Public opinion monitoring at a glance in the time of COVID-19: February 2021*. Brussels: Eurobarometer, 2021b.
- European Parliament. *Public opinion monitoring at a glance in the time of COVID-19: March 2021*. Brussels: Eurobarometer, 2021c.
- European Parliament. *Public opinion monitoring at a glance in the time of COVID-19: April 2021*. Brussels: Eurobarometer, 2021d.
- European Parliament. *Public opinion monitoring at a glance in the time of COVID-19: May 2021*. Brussels: Eurobarometer, 2021e.
- European Parliament. *Public opinion monitoring at a glance in the time of COVID-19: June 2021*. Brussels: Eurobarometer, 2021f.
- European Parliament. *Public opinion monitoring in the time of COVID-19*. Accessed 2020a-2021. Archive of reports: <https://www.europarl.europa.eu/at-your-service/pl/be-heard/eurobarometer/public-opinion-in-the-time-of-covid-19>.
- European Parliament. *Public opinion on COVID-19 vaccination. December 2020*. Brussels: Eurobarometer, 2020t.
- World Health Organization. 2021. *Infodemic*. Accessed March 1, 2021. [https://www.who.int/health-topics/infodemic#tab=tab\\_1](https://www.who.int/health-topics/infodemic#tab=tab_1).

TO AVOID A SCAPEGOAT MECHANISM.  
PERCEPTION OF COVID-19 VACCINATION  
AMONG INHABITANTS OF EU  
– A STUDY BASED ON THE REPORTS OF THE EUROBAROMETER

S u m m a r y

Focusing the anger of the community on a single individual the scapegoat makes it possible to stabilise it on new terms and to emerge from the chaos into which it falls in the pandemic. Instead

of scapegoating, the focus should be on solving the problem itself with, for example, mass vaccination against Covid-19. The media play a vital role in promoting appropriate attitudes and behaviour during the pandemic.

The aim of the article is an analysis primarily aimed at demonstrating the relationship between fears (health, social and economical) and assessments of COVID-19 vaccination and media information, based on research of the Eurobarometer, carried out in all member countries of the EU in the period from the 20<sup>th</sup> of March 2020 to the 30<sup>th</sup> of June 2021. Three hypotheses were tested regarding EU inhabitants' assessments and fears of vaccination and the media information that differentiates between vaccination enthusiasts, realists and sceptics. Applied were a quantitative analysis of the content of reports, a qualitative analysis of the contents, comparative and analytical descriptive methods.

**Keywords:** René Girard's theories; scapegoat; anti-Covid-19 vaccination; Eurobarometer; fear; vaccination enthusiasts; vaccination realists; vaccination sceptics; Worldometer's COVID-19 data; media information mode

JAK UNIKAĆ MECHANIZMU KOZŁA OFIARNEGO?  
OPINIA MIESZKAŃCÓW UNII EUROPEJSKIEJ O SZCZEPIENIACH  
PRZECIWKO COVID-19.  
BADANIE NA PODSTAWIE RAPORTÓW EUROBAROMETRU

Streszczenie

Poprzez skupienie swojego gniewu na jednej osobie lokalna społeczność uzyskuje możliwość odzyskania równowagi w nowych okolicznościach i wyjścia z pandemicznego chaosu. Zamiast poszukiwać kozła ofiarnego, należy skupić się na rozwiązaniu samego problemu, na przykład na masowym szczepieniu przeciwko COVID-19. Środki społecznego przekazu odgrywają kluczową rolę w promowaniu właściwych postaw i zachowań w trakcie pandemii.

Artykuł ma na celu przeprowadzenie analizy, przede wszystkim, aby wykazać związek między obawami (w sferze zdrowia, spraw społecznych i gospodarczych) i oceną szczepień przeciwko COVID-19 a informacjami podawanymi przez media, bazując na badaniach Eurobarometru prowadzonych we wszystkich krajach członkowskich UE w okresie od 20 maja 2020 do 30 czerwca 2021. Przetestowano trzy hipotezy dotyczące ocen i obaw związanych ze szczepieniami oraz doniesienia medialne, które dzielą społeczeństwo entuzjastów, realistów i sceptyków szczepień. Zastosowano analizę ilościową i jakościową treści raportów oraz metody porównawcze i analityczno-deskryptywne.

**Słowa kluczowe:** teorie René Girarda; kozioł ofiarny; szczepienie przeciwko COVID-19; Eurobarometr; obawa; entuzjaści szczepień; realisci; sceptycy; dane kowidowe z Worldometer; sposób informowania w mediach