A Hermeneutical Account of Social Distance as a Form of Negative Solidarity
Exploring the Peculiar Case of "Coronationalism"

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Abstract

The overarching aim of this contribution is to make a hermeneutical account of social distance as a form of negative solidarity. This scope brings forth two guiding questions worth considering: 1. How does a collective solidarity narrative that supports inward security influence the execution of restrictive measures such as social distancing? 2. Does a collective solidarity narrative merely focus on prescribing social distance as a universal normative measure or does it involve other sociopolitical

narratives that can cause negative solidarity? In order to answer these questions, I focus on the adverse effects that a flawed collective solidarity narrative can cause in respect to social cohesion. In the sociopolitical sense, I focus on the peculiar case of nationalist politics known as coronationalism. In order to reach this aim, I expound upon various insights found in the hermeneutic tradition, as well as draw from other sources that involve the fields of social ontology and phenomenology.

Keywords: collective solidarity, negative solidarity, social distancing, coronationalism.

Hermenevtični premislek socialne distance kot oblike negativne solidarnosti. Raziskava o nenavadnem primeru »koronacionalizma«

Povzetek

Osrednji namen pričujočega prispevka je hermenevtični premislek socialne distance kot oblike negativne solidarnosti. Takšen zasnutek prinaša dve vodilni vprašanji, o katerih je vredno razmisliti. 1. Kako narativ kolektivne solidarnosti, ki podpira notranjo gotovost, vpliva na izvajanje omejitvenih ukrepov, kakršno je socialno distanciranje (omejevanje socialnih stikov)? Ali se kolektivna solidarnost narativno osredotoča samo na zapovedovanje socialne distance kot univerzalnega normativnega ukrepa ali vključuje tudi druge socialnopolitične narative, ki lahko povzročijo negativno solidarnost? Da bi odgovoril na obe vprašanji, se osredotočim na škodljive učinke, kakršne lahko z ozirom na družbeno kohezivnost povzroči pomanjkljiv narativ kolektivne solidarnosti. V socialnopolitičnem smislu se posvetim nenavadnemu primeru nacionalistične politike, ki jo poznamo pod imenom »koronacionalizem«. Da bi dosegel zastavljeni cilj, obravnavam različne uvide, kakršne je mogoče najti znotraj hermenevtične tradicije, in se obenem nanašam na druge vire, ki vključujejo področji socialne ontologije in fenomenologije.

Ključne besede: kolektivna solidarnost, negativna solidarnost, socialno distanciranje, koronacionalizem.

"Thus the disease, which apparently had forced on us the solidarity of a beleaguered town, disrupted at the same time longestablished communities and sent men out to live, as individuals, in relative isolation. This, too, added to the general feeling of unrest."

Albert Camus: *The Plague*

1. Introduction

The ongoing COVID-19 pandemic has undoubtedly shed light on the way we take part in, as well as experience, social interaction in contemporary times, given that the restrictions and regulations imposed by our European governments have made all future projections of a common globalized world less feasible. The difficulty lies in the very potency of the COVID-19 pandemic, which spurred a multitude of questions surrounding public safety. These questions involve not only matters of health risks, but also the extent of international cooperation and the possibility of a stable socio-economic future. Thus, because of the multifarious nature of the COVID-19 pandemic, it quickly became evident that the problem of contagion cannot be reduced to biology and epidemiology alone, especially if we consider the fact that most of the measures taken by the European governments were met with a considerable amount of civil and political unrest. And yet, for all the interesting reasons that I intend to explore in this article, the call for self-quarantine and social distancing is primarily presented as a broad matter of collective solidarity, either through political discussions, established media outlets, or through the more contemporary online media platforms. By the looks of

things, self-isolation and social distancing have become the sociopolitical and populist means of acknowledging the strength of a *collective we*. What is more, it is as if these solutions took on the role of an ethics, which enables people to master not only the measures taken against the COVID-19 crisis, but also their fear of contagion. In this sense, we are faced with a universalistic type of ethics that tries to substantiate moral agency, as Nancy successfully points out, through "confidence, mastery, and decision" (Nancy in: European Journal 2020). Moreover, these points lead to the proposition that individuals who practice social distancing understand the notion of distance not only as a governmentally instructed normative measure against the spread of the coronavirus, but also as a reasonable way of expressing individual obligation, which, in turn, internally supports the circulation of the present world order. Hence, various accounts of social distancing, such as maintaining appropriate distance from others in the work environment, partaking in online lectures at universities, cancellations of various social events, are generally conducted, or so it seems, through a collective solidarity narrative, i.e., in the form of a universal battle against contagion. At least, if we again refer to Nancy, "this is the image that seems to emerge, or to take shape in the collective imagination" (ibid.).

However, as a recent report prepared by the European Policy Institutes Network clearly shows, the EU member states have been thoroughly perplexed with the question of how to collectively deal with the plight of the COVID-19 pandemic, primarily with regard to the economic repercussions caused by the measures taken against its spreading. One of the main questions that arose during these ongoing discussions concerns the limits of Europe's aid policy toward third-world countries, countries that are still in transition, and also the more underdeveloped EU state members. In a nutshell, the extent of the various economic repercussions makes it difficult to ascertain whether Europe's geopolitical ambition remains unscathed by the COVID-19 pandemic. This brings forth a crucial normative feature of these discussions, one which, to say the least, involves a highly ambiguous collective solidarity narrative. The ambiguity lies in the fact that these discussions mainly revolve around the question of *internal solidarity* among members of the EU, and not so much around the question of whether or not the EU and its member states wish

to support other countries (Debuysere 2020; Poli 2020; Brudzińska 2020; Katsikas 2020). Thus, on the one hand, international cooperation has generally continued as it did before the declaration of the pandemic, although "in a more Covid-19 tailored manner" (Debuysere 2020, 3). This means that most European countries "embraced external solidarity," and "refrained from pitting this practice against internal solidarity" (ibid.). More precisely, they accepted the prospect of external solidarity as a reasonable normative extension of internal solidarity, in the form of a political *good-will*, as it were. In France, for instance, no *France First* slogans were heard during the outbreak (Vimont 2020), whereas countries such as Germany and Spain openly embraced the prospect of external solidarity, soon after they successfully executed internal safety precautions. Still, unlike the question of internal solidarity, external solidarity "has so far stirred very little to no public debate or political discussion" (Debuysere 2020, 3). Apart from the various European right-wing political parties, which publicly opposed external support, the prospect of international cooperation "did not feature much in the public debate" (ibid.), and has, for the most part, remained outside the public forum. Thus, unlike the clear-cut oppositionist response to the possibility of extending help beyond the borders of a country, the prospect of international cooperation did not feature as much in the public debate, as most EU state members remained content with a "broad political consensus" (ibid.). The lack of a more profound debate about the extent of external solidarity suggests that even though the majority of the larger member states accepted the prospect of external solidarity as an extension of internal cooperation, the presence of right-wing populism, which has grown immensely over the recent years, caused many European governments to become "politically and economically inward-looking" (ibid., 4). Consequently, this inconspicuous trend of maintaining internal solidarity in virtue of further self-enclosure gave rise to a peculiar form of nationalism now referred to as *coronationalism* (Debuysere 2020; Mureşan 2020).

Therefore, the argument to be made, here, is that the collective solidarity narrative falls short in grasping the negative implications of social distancing caused by the threat of contagion, precisely because of its situatedness within an ambiguous consensus between the internal and external form of solidarity. These negative implications include, but are certainly not limited

to, negative social phenomena such as *mass panic* and *ethnic blame-casting*. In this regard, it is important to provide a hermeneutical account of how a lack of a more affirmative stance toward external solidarity can give advance to an unwarranted collective solidarity narrative that combines restrictive health governance, which calls for "distancing and severing contacts," with a political narrative "conceived in increasingly nationalist terms" (Aaltola 2020, 5). Moreover, investigating these phenomena in a hermeneutical key provides an avenue for unveiling the presence of *negative solidarity* in the collective solidarity narrative. Unlike the latter, negative solidarity represents an unwarranted form of social cohesion that combines the fear of *a disease* with more palpable cultural images of an outside threat such as *the outsider*, *the foreigner*, *the immigrant*. Hence, the investigation will require two steps. I will start by focusing on the disruptive implications that restrictive measures, such as social distancing, can have for collective solidarity, when observed through the lens of coronationalism. Namely, how does a collective solidarity narrative that supports inward security influence the execution of restrictive measures such as social distancing? Does it merely focus on prescribing social distance as a universal normative measure, or does it involve other sociopolitical narratives that can cause negative solidarity? By focusing on these questions, I will then attempt to show how social distancing can also turn into a skewed form of negative solidarity that causes social antagonism, such as ethnic blame-casting. In order to reach this final aim, I plan on expounding upon the various insights found in the hermeneutic tradition, as well as drawing from other sources, which involve the fields of social ontology and phenomenology.

2. Coronationalism: a collective or a mass phenomenon?

As mentioned in the introduction, coronationalism suggests an overlapping between the restrictive health governance and the nationalist political narrative. As such, it ascribes political value to measures that should primarily concern public health regulations. For example, after the COVID-19 outbreak in Northern Italy, which subsequently lead to satellite outbreaks in other European countries, the EU state members first hesitated to impose restrictions within the Schengen area. According to Aaltola, this hesitation

showed an "open expert debate on the usefulness of significantly restrictive measures" precisely because of the political value "open borders and trade inside the Schengen area" (Aaltola 2020, 6) have for inter-European relations. In mid-March, however, expert advice started to fade into the background, as it was cast aside in the name of more efficient political action. This gave way to "widespread border closures based on national political borders" (ibid., 6), which suggests a stringent politicization of health policies. On the one hand, the politicization of matters that pertain to public safety is not that unreasonable. Legitimate political action is, nevertheless, crucial in the times when preventive and responsive measures have to take place. Put crudely, legitimate politics serve as an "enabler" of the "efficient functioning of expertise," that is to say, an "enactor of health institutions" and a "mobilizer of adequate resources" (ibid., 5). As such, politics play a supporting role in providing funding for health programs, in building the necessary infrastructure, such as health offices, laboratories, check-points, etc., besides imposing restrictive measures such as self-quarantine and social distancing. Legitimate political action, to a degree, underlines the partnership between politics and health governance, inasmuch as political co-option is used to secure efficiency in health regulation. This, again, is made possible exactly because of the "general legitimacy of health governance" (ibid., 6). Without it, people would simply not trust different political administrations, given that health governance usually functions, or at least it ought to, "outside of politics" and various "political leanings" (ibid.).

On the other hand, however, the reciprocal arrangement between politics and health governance heavily favors an inward bound political agenda. It seems that whenever "a sudden disruption" occurs, especially in the form of an uncanny human epidemic such as the COVID-19, the general "collaborative pattern" between politics and health governance can rapidly change into a socially disruptive pattern where "politics easily takes priority over health efforts" (ibid.). This means that the line between what is legitimate and what is considered as purely political tends to be blurred at the very moment, when politicization causes "the paralysis of the underlying mission" (ib.), i.e., when it breaches the domain of efficient health governance in an unwarranted fashion. Affairs such as these echo Agamben's assessment, developed mainly in his work *State of Exception*, that such political breaches are characteristic

for "periods of political crisis" (Agamben 2005, 1), since they serve as the state's "immediate response to the most extreme internal conflicts" (ibid., 2). In this case, utilizing health governance for securing political goals signifies extreme political action, seeing that social distance is used as an illegitimate nationalist term, geared toward further disengagement. Still, does this serve as a legitimate proof of coronationalism? The trend of violating the limits of health governance can nonetheless serve as means to any political end. According to Agamben, the overlapping between negative political co-option and health governance represents one of the many ways, in which regulatory measures such as social distancing play a part of a much larger biopolitical narrative. Hence, what Agamben stresses is not the upheaval of a nationalist political narrative but a "new paradigm of biosecurity" (Agamben 2020a), the aim of which is not only to mollify the threat of contagion, but also to impinge upon the disease-stricken community a sense of urgency, which prescribes the preservation of one's *naked life.* In the blog post "Biosecurity and Politics," Agamben thus declares the COVID-19 pandemic as a governmentally imposed *state of exception*, the main purpose of which is to regulate social interaction within a new world order. From Agamben's standpoint, what is truly at stake, is not the prospect of coronationalism, but "a new paradigm for the governance of men and things" (ibid.), according to which the inherited ways of perceiving and maintaining solidarity will eventually fall victim to a universally imposed ethos of *survival at all costs.*

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Not surprisingly, Agamben's encompassing sense of distrust toward the normative measures taken by European governments was criticized by many as being part of a theoretical *collapse into paranoia* (Cayley 2020; Berg 2020). One of such critiques was also given by Nancy, who considered Agamben's radical anti-governmental critique "more like a diversionary manoeuvre than a political reflection," provided that governments "are nothing more than sad executioners" of derailed "techno-economic powers" (Nancy in: European Journal 2020). However, by defining the COVID-19 pandemic as an *imposed* state of exception, Agamben also stresses the danger of founding a normative frame on the "apparatuses of exception" without entertaining the possibility of observing and defining this frame "beyond the immediate context" (Agamben 2020a) of urgency and self-preservation. Interestingly enough, the same problem

of normative intrusion adheres to the social phenomenon of coronationalism, although in a slightly different manner. Obviously, it would be unreasonable to refer to coronationalism as a universal and omnipotent case of biopolitics, since it does not represent a predominant normative directive. In the narrower sense, coronationalism does not imply "a new wave of nationalism," i.e., a new world order, but rather reinforces the proclivity toward self-enclosure that "was already there" (Debuysere 2020, 4). In a certain way, coronationalism is a product of an underlying sociopolitical dynamic, which diseases, such as the COVID-19 and its precursors, tend to accentuate, rather than a fully integrated form of biopolitics. It is, therefore, primarily an indication of the need to seek solace in autonomy, when facing imminent danger such as that of contagion. As such, it merely highlights the fact that as soon as mass panic sets in, and a nationalist political agenda starts to intersect with health governance, the battle against a "deadly disease outbreak" can turn into a battle against anything that is remotely considered "unfamiliar" and foreign to a state of autonomy or, conversely, to one's own sense of safety. Moreover, this type of nationalist politicization only further intensifies the fear of contagion, given that political action and national integrity take predominance over expert-guided health governance. Consequently, one no longer speaks solely of collective solidarity, health restrictions, and regulations, but also of further self-insulation, stringent border patrols, and avoidance of so-called *hot-zones* at all costs. As Aaltola stresses:

> Throughout the history of states' interaction with epidemics, it has been very difficult to distinguish between their genuine efforts to minimize the health implications of epidemics and their opportunistic attempts to minimize or gain political benefits from an outbreak. (Aaltola 2020, 12)

Arguably, Agamben's insights do indeed point toward this issue, even if it is obscured by his critics, as well as his own theoretical focus on the totalitarian features of biopolitical governance. Namely, the more important question that has to be addressed with regard to the problem of an imposed *immediate context* is not whether the solidarity narrative supports an overarching

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totalitarian paradigm. The question is rather: does this narrative hold fast to an underlying normative requirement or is it merely a prefiguration of social distance inherent to the social strata of a falsely collectivized community? Put differently, is social distancing, understood in the performative sense, i.e., as a normative attitude, a matter of uninterrupted collective cohesion, which holds fast to an underlying normative requirement, or, as Agamben poignantly stresses, a matter of "mass-inversion" (Agamben 2020b)? The guiding answer to these questions can be gleaned from Agamben's reflections found in his contribution entitled "Social Distancing":

> […] what the measures of social distancing and panic have created is certainly a mass—but an inverted mass, so to speak, made up of individuals who at all costs keep each other at a distance. A mass, therefore, that lacks density, that is rarefied and which, however, is still a mass. (ibid.)

154   As one can clearly see, Agamben's notion that one is now required to keep *distance at all costs* does not merely outline the broad questions of state supervision and normative intrusion, the purpose of which is to impose an ethos of survival, but also points to the question of whether we can speak of *a collective* in collective solidarity at all! If observed mainly through the prism of social distance as a form of negative sociality, to keep distance *at all costs* is, in fact, not merely a signification of normative intrusion, intimately appropriated and falsely distributed within a biopolitical agenda. It primarily singles out the fallacy of defining *a mass of people* in collectivist terms. Namely, unlike a mass of people or a crowd, collective solidarity requires a "self-evident communality" that follows a "common establishment of decisions" and a transparent relation between "moral, social, and political life" (Gadamer 1992, 218). On the other hand, if we were to paraphrase Camus' insightful passage from *The Plague*, addressing the crowd as a collective, only adds to the *general feeling of unrest*, meaning that it only forces upon us the solidarity of a *beleaguered* (Camus 2010), i.e., a *disease-stricken community*. In other words, it illuminates the fact that a community, the future of which depends entirely upon the successful containment of a threat, is in no way sustainable as

a collective since it substitutes solidarity and "humanitarian compassion" with "containment" (Aaltola 2020, 5). In a certain way, compassion, understood as one of many attributes belonging to collective solidarity, becomes a form of social contagion, aimed at further containment. With Nancy's words, "compassion is the contagion, the contact of being with one another in turmoil" (Nancy 1991, xiii). And given that it is a form of compassion that thrives in turmoil such as pandemic hysteria, it cannot be neither "altruism" nor collective solidarity, but the "disturbance of violent relatedness" (ibid.).

Arguably, the violent relatedness Nancy speaks of adheres directly to the relation between the "sudden global jolt of aversion and fear" (Aaltola 2020, 5) and the rise of reactionary right-wing politics, which, in turn, maintain the fear of contagion for the sake of further political co-option. More importantly, this also points to the fact that "when a serious infectious disease spreads, a 'threat' is very often externalized into a culturally meaningful 'foreign' entity" (ibid., 1), which can cause various forms of social antagonisms within a preconceived image of national autonomy. Drawing from one of Nancy's more insightful passages from *Being Singular Plural*, one could say that when political thinking becomes "fearful and reactionary," it declares that "the most commonly recognized forms of identification are indispensable," and consequently, if we follow Nancy's argument to a tee, equates the terms "people, nation," with the much more ambiguous terms, such as "culture," "ethnicity," and "roots" (Nancy 2000, 47). In fact, as Nancy would argue, it leads to the diffraction of a community into a "chaotic and multiform appearance," which causes "the dis-location of the 'national' in general" (ibid., 36). Hence, as longs as a nationalist narrative maintains that "the destinies" proper to these identity markers "are used up or perverted" (ibid., 47), in times of crisis, a false sense of communal existence can arise. This point brings back the thought of collective solidarity as a form of mass social contagion, rather than a collective performative attitude. Similar to a virus, which, as Derrida points out, "is in part a parasite that destroys, that introduces disorder into communication," so, too, can solidarity become a form of negative association that "derails a mechanism of the communicational type" (Derrida 1994, 12). This derailment of communication not only causes a fallacious sense of internal solidarity, but also unwarrantedly transfers one's sense of endangerment to those that

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do not fall into the politically co-opted sense of public safety. Consequently, the fear of *a disease* permeates through the more palpable cultural images of an outside threat, only to further obfuscate the difference between negative association, wherein biological fact and political co-option intersect, and what one might consider as the genuine prospect of collective solidarity. This, in turn, causes an unwarranted sense of safety, as though the virus can only come from the outside, i.e., in the form of a foreigner, and not from within a nationally homogenous group setting. To this point, Agamben quotes a passage from Canetti's work *Crowds and Power*, which further illustrates Agamben's assessment about social distancing as a product of *mass-inversion*, although this time, paradoxically, also with regard to the process of overcoming the fear of infection by becoming a part of the crowd. According to Agamben:

> While men usually fear being touched by the stranger and all the distances that men establish around themselves arise from this fear, the mass is the only situation, in which this fear is overturned to become its opposite. (Agamben 2020b)

Agamben's words reflect Canetti's following statement:

> It is only in a crowd that man can become free of this fear of being touched. That is the only situation in which the fear changes into its opposite. […] As soon as a man has surrendered himself to the crowd, he ceases to fear its touch. […] The man pressed against him is the same as himself. He feels him as he feels himself. Suddenly it is as though everything were happening in one and the same body. […] This reversal of the fear of being touched belongs to the nature of crowds. The feeling of relief is most striking where the density of the crowd is greatest. (Canetti 1973, 16)

Judging by the points made thus far, it would be quite plausible to argue that the nature of the threat that is coronationalism lies exactly in the twofold manifestation of mass fear, which, on the one hand, causes a fallacious sense of collective agency, whereas, on the other hand, facilitates further political

co-option that mainly supports an internal form of solidarity, i.e., one that is essentially bound to autonomy and containment. As mentioned, this inward-bound inclination of coronationalism, in effect, gives rise to a negative form of solidarity, seeing that it causes the underlying social antagonisms found in the ethnocentrically contrived narrative of efficient health governance to resurface. A pandemic, as the ongoing practice of imposing restrictive measures suggests, can nevertheless also be "territorialized, nationalized, ethnicized, and racialized" (Aaltola 2020, 1), meaning that it can also arise in the form of social antagonism that produces "*difference*, *exclusion* and *marginalisation*" (Giddens 1991, 6). I intend to focus on this issue more in the next segment by introducing some of the latest insights from the fields of phenomenology and social ontology. Through this, I will attempt to argue that the social phenomenon of coronationalism not only contorts the perception of collective agency by relying on mass hysteria, but is itself a fundamentally anti-collective social phenomenon.

3. Coronationalism as an anti-collective social phenomenon

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Recent studies in phenomenology and social ontology have shown an increased interest in the dynamic of collectivization, mainly by tackling the open-ended question of what exactly is the nature of interpersonal understanding, social interaction, and social participation. Moreover, many scholars, such as De Warren, Ferran, and Szanto, would agree that sociality is not only a matter of *intersubjectivity*, i.e., the relations between subjects as established relations between a *you* and an *I*, but also in the sense of a *you and an I* relating *to a we*, which may or may not be situated against a *them*. On the one hand, the notion of a *We* or an *Us* underlines *the positive third*, that is, a statutory group, to which the subject, as its constituent, pledges himself. If we were to understand social distancing as such a pledge of solidarity, then one would primarily denote a "bound to certain obligations, duties, and norms of the group" (De Warren 2016, 320). These obligations, in turn, would then represent "an objective guarantee" that "protects and inhibits me from becoming *Other*," that is, protects me "from exiting and/or betraying the group" (ibid.), regardless of whether the other is present or not. On the other

hand, however, there is also the view of the third as a "group in fusion," i.e., a form of collective agency, in which "individuals are reciprocally bound to each other" through a "common praxis" (ibid., 315). Unlike the statutory group, the process of cohesion concerning the group in fusion is "still in flux," meaning that a group in fusion "comes into being through a spontaneous emergence of a concerted praxis of individuals in view of a common objective" (ibid.). For instance, individuals that wear a mask can be seen as sharing a similar goal (containing the spread of the contagion), and yet remain determined by individual self-interest at the same time (primarily taking care of their own health and well-being). The same applies to individual purpose (remaining uninfected) and the possibility of conflict with others (scarcity of masks, disinfectants, etc.), as both factors rely on a string of contingent events that could either end up in a "cooperating praxis," which follows a "genuinely common objective" (ibid.), or a complete lack thereof. Drawing from Sartre's *Critique of Dialectical Reason*, De Warren suggests that it depends on the way "the disruption of habit" or "the disruption of seriality" manifests itself. A group in fusion is thus "neither genuine collective agency nor complete absence of concerted movement," which is the same reason why it remains open-ended with regard to the possibility of a "new social configuration" (ibid.).

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However, unlike the binding force of a pledge, which binds the subject to a common *praxis* of a statutory group, the possibility of a new social configuration is set against the other, i.e., another group. This makes the *group in fusion* primarily a *reactionary* formation, the unity of which, as De Warren argues, "is negatively determined" by "an external threat" (ibid., 316). Moreover, this external threat becomes "interiorized within the group" as "individual constituents come to recognize each other as belonging to a unified group on the basis of acting in concert" (ibid.). Similar to Agamben's point about the way mass panic inverts the uncanny exterior into the interior, so does the encounter with an external threat shape "the 'totalization' (or 'synthetic unification') of different actions," such as keeping appropriate social distance, into "common praxis" (ibid.) as, for instance, an overcoming of the fear of contagion. According to Sartre, the active and passive elements in the formation of a *group in fusion* are "often impossible to differentiate, that is, whether the group differentiates itself internally or in reaction to an

external threat" (ibid.). This is the main reason why the interiorization of an outside threat can take different shapes and forms, either that of fear of the virus or that of overcoming the very same fear by taking a representative role within a mass of people. According to De Warren, Sartre's insights regarding the process of interiorization can be divided into three distinct dimensions: 1. the psychological interiorization of a common objective and reciprocal recognition of other individuals; 2. the sociological interiorization as a group delimits itself from other groups; 3. the material interiorization within a field of action (De Warren 2016). All three dimensions, in some form of another, correspond to the interiorizing process of mass-inversion characteristic for the phenomenon of coronationalism, but perhaps it is the third that best captures the gist of subverting health governance by seeking refuge in a mass. Namely, material interiorization invokes a "territorialization of physical space" and for this reason alone demarcates a line between "us" and "them." Each individual within a group in fusion is, thereby, a "self-determining individual" and an individual who determines himself or herself according to what Sartre calls "the third" (ibid., 316), or, in the case of coronationalism, a nation, a sense of ethnic belonging, etc. In a nutshell:

> Insofar as I see myself as a part of a group, I determine myself from the point of view of the group, or as "the third." As Sartre stresses, this unification, or "totalization," is *practical* insofar as I realize a common *praxis* through my own individual *praxis*. […] I have interiorized a common interest, means, and an objective into my individual praxis, such that the group acts "in" me, *is* me, much like the savvy U.S. Army recruiting slogan, "Army of One." (De Warren 2016, 317)

However, stating that an individual takes a representational role within a mass of people, i.e., that one executes a common ideal by way of individual commitment, does necessarily imply the sort of representation that holds fast onto a collective goal. Following Szanto's insights into the nature of collective agency, when speaking of a collective, one has to take into account that collective normative requirement necessarily outflanks individual agency. Put differently, it makes individuals, as bearers of a

common goal, "interchangeable," for every individual, perceived as a part of a collective, "is considered to be co-responsible" for what is understood as being of "communal value" (Szanto 2016, 304). In short, only a collective can enable the type of representation characteristic for "the principle of 'non-representable' solidarity" (ibid.). To represent a mass of people or a crowd, on the other hand, signifies the opposite. Unlike the collectivist type of representational agency, seeking ethical value in a mass, i.e., the type of collective, which is merely a *group in fusion*, is essentially an anti-collectivist worldview and, much to the same effect, essentially non-representational. As already indicated above, the mass is constituted by violent relatedness, i.e., the type of social contagion, which relies on the inexplicit probability of an outside threat, and not on an established moral framework. This, in turn, not only makes the prospect of collective solidarity hard to imagine, but also endangers the possibility of collective solidarity within a pluralistic spectrum, i.e., in the form of a *pluralist community*. Namely, unlike a mass, whose act of sharing a prescribed norm depends on a skewed, i.e., internally compromised normative attitude, a pluralist community signifies a group of like-minded individuals whose adherence to a prescribed norm denotes an autonomous exertion of solidarity with a degree of singular variation. In this sense, a pluralist community also qualifies as anti-collectivist, given the fact that one's individual capacity for moral agency ought not to be overridden by representation, as this would only further obfuscate the distinction between "what actually is a 'real We' and what is not" (Loidolt 2016, 52). Unfortunately, due to the conceptual limitations of this contribution, I will not have the chance to explore this argument further. Instead, I will merely emphasize that neither a collective, understood as an aggregation of different individuals into a unified whole, nor a pluralist community, understood as a social unit, which holds fast onto the variability of its constituents, promote the type of social cohesion that rests on "emotional contagion and identification" (Ferran 2016, 225). Hence, the primary argument to be made, here, is that a mass functions "at the level of sensations," and, for this reason alone, lacks "ethos or responsibility" (ibid.).

To this point, numerous accounts of ethnic blame-casting that have been occurring throughout Europe and the U.S. only serve as additional proof of

the ambiguities surrounding the collective solidarity narrative, given the fact that they mainly support a sensationalist form of solidarity, bound to internal autonomy. According to Aaltola:

> Epidemic encounters tend to involve situations where political legitimacy is contested and events contain a strong judgmental note. These legitimacy crises can easily be used to criticize the authorities or to construct alternative visions of a "healthier" sense of national cohesion. Such dramatic moments of judgement and legitimacy tend to come with a plot: They involve a fight by the presumed protagonist – often in the guise of the whole nation or even the international/global community – against the negative elements of perceived antagonism. The protagonists include such stock figures as watchful authorities, proactive doctors, efficient national and international health agencies, and politicians who 'did their job'. The disease and disease-causing agents, on the other hand, easily become associated with some ethnically, nationally or ideologically defined minority, non-vigilant authorities, and self-serving/corrupt politicians. (Aaltola 2020, 7)

For instance, during the SARS outbreak in 2003, many countries associated SARS with China or the ethnic Chinese. This happened because of the many stereotypical depictions of the Chinese as "secretive, closed, incompetent and somehow corrupt," which provided sufficient material for further propagating SARS as an exclusively Chinese virus. Not only that, SARS was also interpreted as a call "for domestic political reform in China," so that it could be "safely allowed into the mobility-based global system" (ibid., 9). A similar kind of narrative applies to the case of the COVID-19. Namely, during the beginning stages of the COVID-19 outbreak, many European countries, including the U.S., decided to restrict the entry of Chinese nationals, alongside those who resided in mainland China. However, unlike the case concerning SARS, these restrictions started to take the shape of a full-blown blame game, resulting in racist terms, such as the *Chinese Virus* or even *Kung Flu*, if we refer to Trump's insensitive choice of words. Another example of coronationalism occurred in Belgium. Belgium's global response to the COVID-19 pandemic caused a fair

amount of discontent among the Flemish nationalist parties such as Vlaams Belang and the Flemish nationalist NVA, who denounced 450 million euro of "EU corona support" (Debuysere 2020, 5) meant for Morocco, even though the money in question was only a re-distribution of existing funds governed by the EU Neighbourhood Policy. However, given that Moroccans constitute the largest group of immigrants in Belgium, the denouncement of funds did not come as a surprise. As a consequence, various politicians were accused of xenophobia and racist bigotry, even though some would argue that their intentions were to protect Belgium's national interest. In Italy, for instance, the right-wing political parties put the blame on the refugees kept in the Sicilian detention centers, whereas in Germany, the popular consensus was that it is the Italians and Spaniards that are most culpable for the spreading of the virus, primarily because of poor health governance.

By drawing from these various occurrences, one can see a pattern between the nationalist narrative that supports an externally bound association between individuals, i.e., a mass, and the discriminatory acts of ethnic blame-casting.[1] The latter, in effect, represents the enaction of the negative relation between political co-option and health governance, either in the form of an unwarranted nationalist narrative or an upscaled sense of urgency and mass paranoia. As already stated above, the inward-bound inclination of political co-option causes a negative form of solidarity, which gives rise to underlying social antagonisms found in the ethnocentrically contrived narrative of efficient health governance. And in spite of particular differences between countries, primarily in terms of their political systems, the fact remains that representatives of such forms of solidarity "do not show self-consciousness"

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1 The same applies to several spurious statements given by the spokesperson for the Slovenian crisis headquarters Jelko Kacin, namely, for instance, that public gatherings in Slovenia should not involve people with "different cultural and national backgrounds." Statements such as these paint an overall picture of the political climate in Central Europe, which has since 2015 fallen under the influence of a strong nationalist movement led by the likes of Viktor Orbán or Janez Janša. Orbán has even stated, in one of his interviews, that in spite of being under continuous scrutiny by "Brussels' bureaucrats," who accuse him of using the COVID-19 crisis for political gains, sooner or later, all EU state members will take up Hungary's "well-conceived system," which is designed to regulate the transit of those with a different nationality.

(Ferran 2016, 225), which inevitably hampers the capability of expressing solidarity toward anyone located outside the preconceived social frame, either that of nationality or of ethnic origin. In fact, the boundaries with the other "are essentially blurred" (ibid.) within a mass-produced sense of public safety, which is perhaps one of the main reasons why the talk of national autonomy seems to be prevalent in the times of a pandemic crisis.

4. Conclusion

To conclude, let us return to the initial questions. How does a political narrative that supports inward containment influence the dynamic of collective cohesion? Does it actually succeed in prescribing social distance as a necessary normative restriction, or does it further intensify mass panic and alternate forms of negative solidarity? The answer to the first question can be gleaned from the subject matter of this contribution. It was stated that unlike a more open-ended solidarity narrative, the sort of social cohesion that functions exclusively within a preconceived sense of national autonomy, that is to say, inwardly, can, on the one hand, help constrain the spread of disease. However, as a byproduct of its exclusivist narrativity, it can also cause negative solidarity, wherein the distinction between *them* and *us* becomes prevalent, even if the cause for this distinction cannot be seen by the naked eye. According to Aaltola, "co-option and pretense are one of the leading ways a state can use the outbreak of a lethal infectious disease" as a political excuse "for politically motivated actions," such as "restrictive manoeuvring or economic sanctions" (Aaltola 2020, 12). An epidemic can "enable states to divert people's anxiety and frustrations away from its own actions or lack of action," and also use it "to justify its actions against perceived threatening elements" (ibid.) such as foreign nationalities, ethnic groups, or illegal immigrants. The answer to the second question inhabits the same ambiguity as the first one. On the one hand, social distancing is indeed a prescribed norm, which, to a certain extent, advocates an obligation or a sense of duty toward fellow man. On the other hand, however, if it is politically co-opted, then the outcome becomes the opposite of what social distancing is supposed to represent. Instead of prescribing a health measure meant to constrain the fear of contagion as well as the contagion itself, it becomes the means of its further intensification.

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