ON COVID-19 & ANTI-ASIAN VIOLENCE
UNLV Asian & Asian American Studies Program

All of us in the Asian & Asian American Studies program are deeply concerned about the state of the world as COVID-19 wreaks havoc on people’s bodies and lives. Given how suddenly and dramatically our lives have changed over the last month, we are hoping that you, especially students, are taking good care of yourselves and loved ones and doing the best you can to make it through the days. As with most, we are feeling a bit anxious, unsettled, uncertain, annoyed, unnerved, and overwhelmed all at once. Part of this is because we aren’t quite sure what we, as a program, can do to help during this global pandemic. This statement, we hope, is a start.

As the number of confirmed COVID-19 cases and deaths continue to rise (as expected) around the world, so too have cases of anti-Asian violence and sentiment. In the U.S. alone, there have been over 1,500 reported cases of violence against Asians and Asian Americans ranging from verbal harassment (with threats of violence) and being spat or coughed on to physical assault and acid attacks. And those are just the reported cases between March 19 and April 24. Asian American students (including our own) are afraid of making long road trips home, fearing that a stop for gas or snacks will make them targets. Asians and Asian Americans, young and old, are thus confronting two threats: coronavirus and violence.

The AIS program denounces all forms of violence against Asians and Asian Americans. This should be obvious, and it’s rather absurd to be in a position to have to denounce it— to condemn people for racist attacks in 2020. And yet, we know that part of the problem is that many of the aggressors do not believe themselves to be racist or xenophobic at all, but as feeling and acting on a completely “common sense” and “normal” reaction to a virus that spread from Wuhan, China.

This particular type of thinking and behavior is not common sense, logical, or normal. It is the exact opposite. It is wildly illogical and irrational, based on assumptions and leaps of logic that cannot and should not be validated: it assumes that one can accurately tell the infected from the non-infected based solely on race; from there, it assumes one can determine if the perceived Asian person under scrutiny is from Asia; then, if that Asian person is from China; and finally, that the Chinese person is from—in a country covering 3.7 million square miles with over 1.38 billion people—Wuhan. This is impossible to do. Besides, it misses the point. People suffering from coronavirus are victims, not enemy combatants.
ON "YELLOW PERIL"

The anti-Asian racism and xenophobia we are witnessing and experiencing in the U.S. under COVID-19 is equal opportunity: it is neither picky nor does it care about differences between Chinese, Filipino, Thai, Vietnamese, Korean, or Japanese. It confuses Chinese with Asian; Asian with Asian American; Asian/Asian Americans with Asian governments; and Asian/Asian American as a foreign disease to America. Both the violence and idea of Asian/Asian Americans as diseased threat are nothing new. They have a long history, working together to dehumanize, ostracize, and literally exclude Asians from the nation. In the late 1800s, for instance, violence against Chinese and Chinese Americans was wide ranging and widespread—a lethal combination of lynching, massacres, expulsions, arson, surveillance, laws, policies, and everyday practices. The notion of Chinese as an inherently diseased and pestilent race and Chinatowns as infectious served as a justification for the violence. Chinese food habits, as with coronavirus, attracted a great deal of scrutiny as a source of contagion. In particular, newspapers and magazines depicted Chinese as rat eaters, which became so ingrained in the American imagination that images of Chinese eating rats appeared in popular advertisements and children’s books.

The idea of Chinese as disease-ridden pollutant (one that would be reapplied to other Asians) that needed to be eradicated no doubt reflected growing concerns about immigrants, disease, and public health. But it also captured deeper fears and frustrations of white Americans. In other words, it was never just about the spread of scientific disease. Disease was metaphor for all the ways Chinese and other Asians were believed to be infecting and decimating America—economically, socially, culturally, and politically: they “stole jobs,” “depressed wages,” and undermined the quality of life for the “white working man”; they could not assimilate and thus become fully American; they married white women; they were unfit for citizenship. This “yellow peril” threatened America’s national identity and culture, prosperity, and global power. This is why the images and stereotypes of Chinese as diseased exploded into incredible physical violence. It was not because of disease itself. And this is the most important lesson for our own moment, as COVID-19 is rapidly becoming a powerful metaphor that traffics in longstanding angst and anxieties about the rise of China and America’s place in the world.

ON WHAT’S IN A NAME

We have a chance to learn from this history. That is why we believe calling COVID-19 or coronavirus the “Chinese virus” or “China virus” is outdated, irresponsible, and dangerous. Names are not just labels without meaning. What we name a virus or a disease matters, especially one as destructive as this one because it naturalizes viruses as only coming from Asian/Asian Americans.

The medical community confronted this issue in the 1970s when a team of researchers, including from the Centers for Disease Control and Prevention, identified a deadly viral
fever in the Yambuku village of Zaire (present-day Congo). Although naming it Yambuku virus was an obvious choice—in line with the tradition of naming viruses and diseases after places of origin—the team chose not to do so. They did not want to risk stigmatizing the village or its people, which they knew had already happened to the town of Lassa in Nigeria after the naming of Lassa virus in 1969. They decided instead to name it after a river 60-miles away: “Ebola.” So the Ebola virus was not from Ebola at all. Naming the virus after a river detached it from a specific place and, more importantly, a specific group of people. It showed a level of increased awareness about the consequences of naming a deadly virus and disease. The World Health Organization has followed suit. In 2015, it published new guidelines asking for more care and mindfulness in naming human diseases to “minimize unnecessary negative effects on nations, economies and people.”

In the spirit and vision of these changes, we oppose the use of “Chinese virus,” “China virus,” or any other name that links coronavirus to a specific place, region, country, or people. We oppose it for two reasons:

First, the naming of viruses or diseases after places of origin is outdated. It’s true that many well-known viruses and diseases were named after specific countries and places—Spanish flu, Lyme disease (Old Lyme, Connecticut)—and that such a practice was common. But that was by and large a late 19th and early 20th century phenomenon. As Ebola illustrated, there have been few since the 1970s (with the exception of MERS, or “Middle Eastern Respiratory Syndrome,” in 2012) because of a better understanding of the potential for harm and stigma, particularly for marginalized populations. Experts recognized that just because it was common practice didn’t mean it was a good or helpful one. To our knowledge, this shift has not made it more difficult to fight the spread infectious diseases.

Second, it’s irresponsible and dangerous. Choosing to use “Chinese virus” or “China virus” disregards the effects of racial and ethnic stigma and stereotyping—that criticizing the so-called backward behaviors of some Chinese gets applied to all Chinese and by extension all Asian/Asian Americans. This is not simply about being “offended,” protecting feelings or political correctness. It’s dangerous. “China virus” and “Chinese virus” are not circulating in a vacuum, but at a time when the number of violent attacks against Asian/Asian Americans directly related to COVID-19 are on the rise (if Spanish flu fueled attacks against Spaniards in the U.S., or if residents of Old Lyme, Connecticut endured intense anti-Old Lyme violence or anti-American sentiment, we imagine Spanish flu and Lyme disease would have been renamed). Anti-Chinese violence in the late 1800s alone teaches us how associating Asians with disease can quickly turn dangerous and deadly. “China virus” or “Chinese virus” can’t reduce violence against Asian/Asian Americans—only incite it.
Still, and in direct response of calls to stop using these names, there are many who defend the use because they feel it is more important for the name to be “accurate” than the potential (and unnecessary) danger it could mean for Asian/Asian Americans. Proponents argue there is nothing wrong (or racist) with using “Chinese virus” or “China virus” because the coronavirus originated in China. It is not about vilifying Chinese or China, they contend, but about accuracy and facts. The facts, however, are still unfolding and being debated by medical experts and scientists every day. It was widely accepted and believed early on that the virus originated in bats and jumped its way to an unregulated wet market in Wuhan via the wildlife trade where it infected humans. However, this well-fixed origin story has yet to be proven as conclusive fact. Experts are now even debating it. More, a place where a virus is identified does not necessarily mean that is where the virus originated.

Others push the use of “Chinese virus” and “China virus” to blame China and the Chinese government and pressure them to take responsibility for starting the global pandemic. They feel concerns over racial or cultural stigma are silly and a barrier, and believe the most urgent emergency is that people are dying and economies are collapsing as a result of the backward, disease cultivating way of life and habits of Chinese and the Chinese government’s failure or refusal to address them. Not only do these accusations rest on the “wet markets” origins theory that is being disputed, they also ignore the fact that the so-called disgusting Chinese cultural practice of wildlife trade and eating exotic meats are products of China’s globalization and economic liberalization—supported and applauded by the U.S.—that generated a wealthy class of Chinese (or the “Crazy Rich Asians”) who buy and consume wildlife to flaunt their status. They are in the minority. And, of course, blaming China absolves any responsibility the U.S. has in coronavirus’ spread throughout the country and does little to sharpen our assessment of what we can do to mitigate or flatten the curve.

Growing numbers of Asians/Asian Americans are bearing the brunt for a pandemic they had absolutely no role in starting other than that they racially represent “China.” While proponents want us to believe that blaming China and the Chinese government in no way influences the treatment of Asian/Asian Americans—that American society is fully capable of seeing that Asian Americans have nothing to do with the outbreak—the history of Asian American experiences and the evidence of attacks against Asian/Asian Americans continuing to pour in proves otherwise and shows that if indeed we are capable, we are terrible at it.

**ON WHAT WE CAN DO**

What we can do is have conversations with our family members and loved ones about why it’s not ok to label a global pandemic as a “Chinese virus” because of who it targets and what it does to Asian/Asian Americans. We can share with them that this is part of a
longer legacy of dehumanizing Asian/Asian American bodies as “diseased carriers,” that can lead to negative mental and physical health.

But we can also share that Asian American Studies has a long history of recognizing that stereotyping, othering, and engaging in racist acts against Asian/Asian Americans are not simply about isolating our own struggles. We can look to our own history and what’s happening in the contemporary moment to teach us that anti-Asian violence is not our own to bear. We stand in solidarity with communities who have also been adversely affected by this horrible virus. COVID-19 has unmasked how much inequality affects poor, working-class communities’ critical access to health care. Namely, African Americans, Indigenous and First Nations people, Latinx communities, and undocumented migrants. Some of these folks work on the front lines as “essential employees”; they are our bus drivers, custodians, nurses, doctors, our gig economy workers who deliver our groceries, prepare our food for takeout, or work in poultry plants preparing our food for shipment. We must be mindful to stand in solidarity with all marginalized communities who have been disproportionately affected.

In essence, COVID-19 and anti-Asian sentiment is about Asian/Asian Americans but it’s also not just about Asian/Asian Americans. What we are seeing—the convergence of public health, globalization, disease, race, nationalism, and xenophobia—is having a profound impact on Asian/Asian Americans right now. But it’s an issue that has and continues to impact people around the world. In fact, Asian/Asian Americans can be active participants too, as the current discrimination of African nationals in Guangzhou, China is tragically showing.

As an academic program, our role in this pandemic is to research, study, and educate not simply for the sake of Asian/Asian Americans but to prevent the possibility of this kind of violence from happening to anybody, especially society’s most vulnerable. We can do the work of equipping our students—and ourselves—with more knowledge and ways to think so that we know what we are talking about, to better connect the dots, make informed decisions, and chart courses of action. We can document, trace, and make sense of the effects of COVID-19 on Asian/Asian Americans, including on psychological well-being and mental health as faculty in our program and around the country are doing. This is how we can contribute.

**ON WHAT WE MUST DO**

As we learn from the past and present, let’s not forget to dream up new worlds and possibilities—to dream up a future. We need to do this now more than ever. More importantly, this pandemic is a collective issue that requires collective action and dreaming. Perhaps we can follow Indian literary author Arundhati Roy’s call to see that the COVID-19 pandemic is a portal to imagine differently, to avoid our “return to normality” because our current world is fraught with inequities across the globe. The
The pandemic is forcing us to rethink how we got here, what we need to do as global citizens, and how we want to envision a world that allows us to embrace our humanity, demonstrate empathy, and to exist in a world that holds powerful nations accountable to its citizens. To return to Roy’s powerful words, we must be “ready to fight for it.” And if we can take on the fight with love and kindness, when that new world comes, we’ll be ready.

**RESOURCES AND READING**

If you’ve experienced anti-Asian racism and wish to document it, please consider reporting on the following websites:

- Asian Pacific Policy and Planning Council: Stop AAPI Hate
- Asian Americans Advancing Justice: Tell Your Story
- Racism is Contagious

More readings, helpful guidelines and resources:

- Treating Yellow Peril: Resources to Address Coronavirus Racism” (compiled by Jason Oliver Chang, Associate Professor of History and Asian American Studies at the University of Connecticut)
- Association for Asian American Studies Statement
- Stanley Thangaraj, “Coronavirus, Racism, and the Health of Our Communities,” Tropics of Meta, March 22, 2020
- “How to Respond to Coronavirus Racism,” Teaching Tolerance, March 20, 2020
- Andrew Liu, “Blaming China for coronavirus isn’t just dangerous. It misses the point,” The Guardian, April 10, 2020
Christopher St. Cavish, “Commentary: No, China’s fresh food markets did not cause coronavirus,” Los Angeles Times, March 11, 2020

“A real, not-clickbait, average Chinese wet market,” Chinese Cooking Demystified, April 5, 2020

Marco della Cava and Kristin Lam, “Coronavirus is spreading. And so is anti-Chinese sentiment and xenophobia,” USA Today, January 31, 2020

Asian American Psychological Association Statement on COVID-19

Suyin Haynes, “As Coronavirus Spreads, So Does Xenophobia and Anti-Asian Racism,” Time Magazine, March 6, 2020

James Griffiths, “Taiwan’s coronavirus response is among the best globally,” CNN, April 5, 2020

Max Fisher and Choe Sang-Hun, “How South Korea Flattened the Curve,” April 10, 2020