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Xenophobia and Racism Against Asian Americans During the COVID-19 Pandemic: Mental Health Implications

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Anti-Asian sentiments have spiked since the start of the COVID-19 pandemic. The Asian Pacific Policy and Planning Council received over 18,00 reports of COVID-19 related discrimination from Asian American individuals across the U.S. in an 8-week period (Borja et al., 2020). Examples include Asian Americans being physically assaulted, verbally harassed, coughed on, kicked out of shops and restaurants, discriminated at jobs, and subject to property vandalism (Cheung et al., 2020). Xenophobic insults demand Asian Americans to “go back to [their] country,” which reflects ostracization of Asian Americans as foreigners (i.e., the perpetual foreigner stereotype) despite their citizenship and ancestry in the U.S. (Gover et al., 2020; Tessler et al., 2020). The politicization of COVID-19 (e.g., “Chinese virus”) by the Trump administration (Rogers et al., 2020) further instigates anti-Asian racist incidents (Borja et al., 2020).

Although the measured psychological impact of COVID-19 anti-Asian xenophobia and racism is presently unknown, it poses an additional stressor that could seriously compromise Asian Americans’ psychological well-being on top of the already formidable pandemic itself (Misra et al., 2020). Previous research on massive trauma and disease outbreaks indicates an increased likelihood of mental health concerns (e.g., depression, anxiety, substance abuse) and subclinical stress responses (e.g., anger, fear, sleep issues) that can last for months or years (Goldmann & Galea, 2014; Jeong et al., 2016). For Asian Americans, vulnerability to these mental health concerns is compounded not only by existing mental health access disparities (e.g., White House Initiative on Asian Americans and Pacific Islanders, 2014), but also by COVID-19 anti-Asian racism. The alienation resulting from pandemic politicization and scapegoating (e.g., propaganda asking people to avoid Asian-owned businesses; Hay & Caspani, 2020) can have severe and long-lasting negative impacts (Z. Chen et al., 2008) and may result in heightened suicidal thoughts and ideation (Z. Chen et al., 2020).

Further, Asian Americans may experience race-related traumatic stress (Carter, 2007) from being cast as the “enemy” and cause of the national health crisis. They are also taxed with witnessing and experiencing anti-Asian verbal and physical assaults (Ahrens, 2020) and feeling unwelcome or endangered in their own homeland (i.e., America)—a psychological state that predisposes them to developing acute stress or traumatic symptoms like hypervigilance, anxiety, persistent fear, anger, guilt, or shame. A helpful parallel to understanding the cumulative consequences of COVID-19 anti-Asian xenophobia and hostility is seen in research on Asian American Vietnam War veterans, who encountered racial ostracization due to their phenotypic resemblance to Vietnamese opponents. These experiences predicted symptoms of posttraumatic stress disorder and general psychiatric concerns above and beyond war exposure and military rank (Loo et al., 2001).

COVID-19 anti-Asian xenophobia and racism will negatively contribute to Asian Americans’ mental health and sense of self and identity, particularly among youth and young adults. For example, there is evidence indicating that higher levels of racism experiences (e.g., discrimination) are associated with lower levels of self-esteem, especially for youth (Benner et al., 2018; Schmitt et al., 2014; Priest et al., 2013). Moreover, the xenophobic ostracization of Asian Americans can heighten Asian Americans’ self-consciousness, discontent, or even shame, about their body image and phenotypic features. Pertinent studies found greater levels of racism experiences (e.g., discrimination, racial teasing, perpetual foreigner stereotyping) were associated with increased body image concerns (e.g., body dissatisfaction, body image scrutiny, body shame) in Asian American young adults (Cheng, 2014; Cheng et al., 2016; Cheng et al., 2017; Reddy & Crowther, 2007), even after adjustment for controls (e.g., body mass index, self-esteem).

Mental health professionals will need to understand COVID-19 anti-Asian xenophobia and racism so that they discern rather than dismiss the added layer of racial stress that their Asian American clients might be dealing with. Educators are recommended to affirm their Asian

American students' personal worth and identity, particularly because incidents of COVID-19 racial bullying of Asian American youth have been reported (e.g., Capatedis, 2020). Finally, Asian American parents are advised to familiarize themselves with Asian American history and systemic racism, and also to help their children understand and situate COVID-19 anti-Asian sentiments within the broader context of structural racial injustice. Parenting practices should also include coaching Asian American youth on coping with COVID-19 racial bias and discrimination so that the youth can thrive during and beyond the pandemic.

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