



Outlook & Perspectives

# Asian Americans suffer within-community discrimination related to COVID-19

Wei-Ti Chen<sup>a,\*</sup>, Franco R. Lee<sup>b</sup>, Poy Yamada<sup>c</sup>

<sup>a</sup>School of Nursing, University of California Los Angeles, Los Angeles, CA

<sup>b</sup>Palos Verdes Peninsula High School, Palos Verdes, CA

<sup>c</sup>School of Nursing, University of California, Irvine, CA

ARTICLE INFO

Article history:

Received 24 March 2022

Received in revised form 6 May 2022

Accepted 27 May 2022

Keywords:

Asian Americans

COVID

Within community

Stigma

Discrimination

May is the Asian American and Pacific Islander Heritage Month. Asian Americans are suffering within-community discrimination as well as external stigma related to the COVID-19 pandemic. Studies have shown that even after recovery from COVID-19, individuals continue experiencing fatigue, cognitive issues, and other co-morbidities, as well as discrimination (Grover et al., 2021). In particular, the COVID-related discrimination experienced by people in Asian communities have been widely discussed (Oh, Zhou, & Banawa, 2021). Yet, within-community discrimination is under appreciated.

Within-community discrimination occurs when COVID-19 positive individuals are discriminated against by their friends and family members within their social networks. Issues regarding discrimination heavily

impact Asian Americans, brought about early in the pandemic when Asian Americans were identified as SARS-CoV-2 carriers due to influences of external stigma (Viladrich, 2021). Thus, Asian Americans who have been diagnosed with COVID-19 struggle with decisions of whether or not to disclose their COVID diagnosis to their friends and families. As Asian Americans socialize more within their own communities (e.g., in local Chinatowns, Korean towns, little Tokyo) and local organizations (e.g., temples and churches), experiences of within-community discrimination rise, negatively affecting rates of COVID testing, diagnosis, and disclosures of infection. Due to concern of stigma from their social networks, Asian Americans might decide against COVID testing even though they are symptomatic in order to avoid disclosing their status. Grover et al.'s study done on a homogeneous ethnic community in India, showed 20% of the study participants reported stigma came for their family, and 50% of the external discrimination came from their neighbors and society (Grover et al., 2021). In China, hatred and violence has been widely reported on since the pandemic began (Yang, Sun, Li, & Lyu, 2022). Yet in the U.S., only limited articles have discussed the within-community discrimination among Asian Americans.

In the United States, 57% of Asian Americans were born in another country (Budiman & Ruiz, 2021). And within this group, 71% of them were adults when they migrated to the United States (Budiman & Ruiz, 2021). With the popularity of global social media (Facebook, Tweeter) and instant text messaging Apps (WhatsApp, WeChat, Line), so many Asian Americans continue to have close ties with Asia and often follow, and are influenced by, the practices and policies of their country of origin instead of health guidelines from the U.S. The

\*Corresponding author: Wei-Ti Chen, School of Nursing, University of California, Los Angeles, Los Angeles, CA 90095.

E-mail address: [wchen@sonnet.ucla.edu](mailto:wchen@sonnet.ucla.edu) (W.-T. Chen).

0029-6554/\$ -see front matter © 2022 The Author(s). Published by Elsevier Inc. This is an open access article under the CC BY-NC-ND license (<http://creativecommons.org/licenses/by-nc-nd/4.0/>)

<https://doi.org/10.1016/j.outlook.2022.05.016>

news Asian-Americans get from Asia include COVID-related border closings, quarantines, enforced testing and contact tracing, and facility closures. Currently, some Asian countries are still using contact-tracing to mitigate COVID-19 transmission (e.g., China) while countries are closing their borders (e.g., Japan, China and Taiwan) to control transmission. Almost all Asian countries require 7 to 28 days quarantine periods for visitors from other countries, regardless of a person's vaccine status. For example, in Taiwan and China, those who test positive in the arrival airport may be directly sent to group quarantine facilities or hospitals with negative pressure rooms until their viral load decreases. Passengers who test negative in the arrival airport are required to stay in quarantine facilities or stay in a suite room alone at their own expense. In addition, all travelers are given polymerase chain reaction and antigen tests many times until the cycle threshold value passed to a certain value. Those who arrive from overseas and test negative are quarantined in designated "quarantine hotels", or empty houses (Taiwan) where only foreign travelers can stay to avoid potential variants of the virus transmit to local communities. In Taiwan, every afternoon, the officers at the local Centers for Disease Control (CDC) announces how many cases were detected - the daily report not only stresses people due to the "overblown" mindset surrounding COVID but also because it reinforces that COVID-19 is scary and lethal. The general public in China and Taiwan especially feel that those with COVID-19 should be quarantined in a remote place that is separate from the general population or should be "locked up" in hospitals for medical attention ([Taiwan Centers for Disease Control, 2022](#)). China and Hong Kong have even stricter regulations surrounding COVID-19 surveillance and testing ([Embassy of the People's Republic of China, 2022](#)).

As a result of the Asian mass media continuing to present COVID as a dreadful condition, Asian Americans have been overwhelmed with messages to avoid COVID infection and less about how to live with a SARS-CoV-2 diagnosis. The images delivered through the internet, instant messaging, and social media from friends and families in Asia greatly influence Asian Americans in the United States. These Asian Americans, regardless of their acculturation levels, are very concerned about disclosing any flu-like symptoms to their Asian American networks in the United States, as their friends and family might suspect that they have COVID-19. During social gatherings, for example, these individuals are likely to say that they have cold, influenza or allergy symptoms instead of COVID. In addition, because of potential discrimination from their close-knit community, they may not seek COVID-19 testing. The situation becomes one of "don't ask, don't tell" and ends up potentially leading to the further spread of COVID-19 in such gatherings.

Some Asian Americans choose to disclose their COVID-19 diagnosis to the people they have been recently been in contact with and advise them to get tested, as the U.S. CDC advises. Even after completing

quarantine for 5 to 10 days per current CDC policy, they may experience more community discrimination than those who do not know their COVID-19 status, or do not disclose their COVID-19 diagnosis to their social network. Asian Americans with COVID-19 are asked to stay away from church or temple worship services even after they clear the virus and/or after the required quarantine period. For example, some Asian-American churches have formed a "caring team" to make sure all known church-goers whom have received a COVID-19 diagnosis do not mix with other members, so as to prevent further spread of the disease. Even after several months after a COVID-19 diagnosis, members of these churches are still checking whether the recovered members show up to services. If they do show up, they will be asked to leave and participate in the worship from Zoom or via live streaming. In smaller gatherings, when a child who has recovered from COVID is taken to private lessons within their community, parents need to request approval from the instructor's family to attend the classes and masks will be donned upon the child's arrival.

Taken together, these subtle microaggressions within Asian American communities negatively impact COVID-19 prevention, testing, treatment, disclosure and mental health. Since global COVID-19 policies impact the local practices in the United States, health departments in Asian American communities should focus on implementing updated regulations to combat COVID-19 but also educate Asian Americans that the chances of surviving a SARS-CoV-2 diagnosis have improved with both vaccination and the use of medications to treat it. Education campaigns targeting Asian American communities about the care of COVID-19 individuals is essential. In addition, health care providers and outreach workers should promote the normalcy of COVID-19 infections as the pandemic becomes endemic in the U.S.

---

## Author Contributions

This collaboration, Wei-Ti Chen is the correspondence author of this study, responsible for conceptualization, and manuscript writing. Franco Lee and Poy Yamada are responsible for providing the content accuracy and manuscript validation. All authors have reviewed the submitted manuscript and approve the manuscript for submission.

---

## Acknowledgments

This publication resulted (in part) from research supported by NIMHD under award number [R03MD011210; PI: Chen, Wei-Ti] and under Award Numbers NIMH [P30MH058107; PI: Shoptaw, Steven J.]. The contents of this article are solely the views of the authors and do

not represent the official views of the National Institutes of Health.

#### REFERENCES

- Budiman, A., & Ruiz, N. G. (2021). *Key facts about Asian Americans, a diverse and growing population*. Retrieved from <https://www.pewresearch.org/fact-tank/2021/04/29/key-facts-about-asian-americans/>
- Embassy of the People's Republic of China. (2022). *Notice on China-bound foreign passengers' application of health code (January 2022)*. Embassy of the People's Republic of China. Retrieved Feb, 11, 2022 from <https://china.usembassy-china.org.cn/covid-19-information/>.
- Grover, S., Sahoo, S., Mishra, E., Gill, K. S., Mehra, A., Nehra, R., Suman, A., Bhalla, A., & Puri, G. D. (2021). Fatigue, perceived stigma, self-reported cognitive deficits and psychological morbidity in patients recovered from COVID-19 infection. *Asian J Psychiatr*, 64 102815, doi:10.1016/j.ajp.2021.102815 <https://doi.org/>
- Oh, H., Zhou, S., & Banawa, R. (2021). The mental health consequences of discrimination against Asian American/Pacific Islanders. *Psychiatr Serv*, 72(11), 1359, doi:10.1176/appi.ps.202100224.
- Taiwan Centers for Disease Control (2022). *COVID-19 coronavirus disease 2019 Taiwan centers for disease control*. Retrieved from [https://www.cdc.gov.tw/En/Category/QAPage/SbkmmM5v0OwdDMjJ2tL\\_xw](https://www.cdc.gov.tw/En/Category/QAPage/SbkmmM5v0OwdDMjJ2tL_xw)
- Viladrich, A. (2021). Sinophobic stigma going viral: Addressing the social impact of COVID-19 in a globalized world. *Am J Public Health*, 111(5), 876–880, doi:10.2105/AJPH.2021.306201.
- Yang, F., Sun, J., Li, J., & Lyu, S. (2022). Coping strategies, stigmatizing attitude, and cyberbullying among Chinese college students during the COVID-19 lockdown. *Curr Psychol*, 1–9, doi:10.1007/s12144-022-02874-w.