

Episode: Ethics Talk Videocast Transcript – Spread of Anti-Asian Racism and Xenophobia During COVID-19 Pandemic

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[bright theme music]

TIM HOFF: Welcome to another special edition of *Ethics Talk*, the *American Medical Association Journal of Ethics* podcast on ethics in health and health care. I'm your host, Tim Hoff. This episode is an audio version of a video interview conducted by the Journal's editor in chief, Dr Audiey Kao, with Dr Jennifer Ho. Dr Ho is the Director for the Center of Humanities and the Arts and a Professor of Ethnic Studies at University of Colorado, Boulder. She joined us to talk about understanding and combating the spread of anti-Asian racism and xenophobia during the COVID-19 pandemic. To watch the full video interview, head to our site, JournalofEthics.org, or visit our [YouTube channel](#).

DR AUDIEY KAO: Hello, Professor Ho, thank you for being a guest on *Ethics Talk* today.
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DR JENNIFER HO: Thanks for having me.

KAO: So, the question, "Where are you from," is one that Asian Americans, even those whose families have lived in the U.S. for generations, are oftentimes asked by others. Being seen and treated as foreign is nothing new in U.S. history. Neither is the racialization of disease. Can you provide our audience with some historical context before we delve into the spread of anti-Asian racism and xenophobia that has arisen from this pandemic?

HO: Absolutely. And actually, if I can make just a small plug before we begin in case people want some future literature to refer to. If you look at the [@DrJenHo](#), that's my Twitter handle. And if you go to my Twitter feed, I have a pinned tweet where you can see a PowerPoint slide deck that I put together that addresses issues of anti-Asian racism and COVID-19. And I actually provide some history about anti-Asian racism starting in the 19th century.

So, that's really where we have to begin, is the 19th century in California when the first large wave of immigrants from Asia, in this case China, came into the United States. So, I should say immigrants from all over the world came into California because of the gold rush. But then specifically with the building of the transcontinental railroad, Chinese laborers were recruited to come into the United States to build the western portion of the transcontinental railroad. After the railroad was completed, you then had all of these Chinese laborers who were looking for jobs because they couldn't afford to just go back to China.

And then what that created was rhetoric that we hear today about immigrant labor, which is these foreign, heathen Chinese who were stealing jobs from good, White working men. And in fact, Denis Kearney, who is Irish American, formed the White Workingmen's party

specifically to protest against Chinese labor, which then led to the 1882 Chinese Exclusion Act.

So, we can see from the mid- to late-19th century, there was rhetoric about Chinese men being a threat, Chinese men being diseased, Chinese being foreign, Chinese women being diseased. And that really was because Chinese women were kind of tricked into coming into the United States saying that there was a job as a domestic worker. And then when they got to San Francisco, they were, of course, told—and again, this is a narrative that is old as time—that that job was no longer available, but there was this other job at a brothel. And that, by the way, because of all the transportation costs, they owed these people X amount of money.

KAO: Right.

HO: And then, of course, Chinese women got associated with venereal disease. So, this idea that Chinese are diseased started in the United States in the 19th century, has continued in various forms. And then, of course, was, I guess, transferred to other Asian ethnic groups. And so, when we're seeing languages of disease and contagion related to Chinese and Asians around the globe and in the United States, to me, that's nothing new.

KAO: Yeah. So, now fast forward to today. Since the pandemic began, not surprisingly probably, there have been widespread reports of people who look Asian being verbally harassed and physically harmed. In response to such racist acts, some in the Asian-American community have called for Asian Americans to do more to prove their status as Americans. Asian Americans need to quote-unquote "step up, help our neighbors, donate protective gear, vote, wear red, white and blue, volunteer, fund aid organizations, and do everything in their power to accelerate the end of this crisis." What do you think about this response to rising anti-Asian racism and xenophobia?

HO: My short answer is that it's not going to work. In other words, the idea is that Asians in America have to be more patriotic than any other ethnic or racial group as a way to prevent racism from befalling them? We have many historical instances of that not working. The second thing I would say is that if Asian Americans want to do these things, that's fine, right? If Asian Americans want to be patriotic, if they want to fly the flag and do things that will aid our current moment, that's fantastic. That's actually what I would hope every single person is doing. But it is certainly not an obligation that Asian Americans somehow have to prove themselves more loyal, more American. And definitely it is true that Chinese in America and Chinese Americans have absolutely no responsibility of taking extra steps to prove that they belong here.

KAO: Yeah. Now for Asian Americans the Vincent Chin story is a touchstone. So, for those in our audience who don't know the story, Vincent Chin, whose ancestry was Chinese, was targeted and killed in 1982 during a time of despair and frustration about rising unemployment. Many Detroit auto workers blamed their economic woes on the Japanese auto companies, and by extension, all Asians. But you can't invoke the name and story of Vincent Chin when there are Ahmaud Arberys happening today to Black and brown people. When we stand up for Vincent Chin, we also have to stand up for the Ahmaud Arberys of the world, but we don't always do that. What does this say about us? And then is this the dark side of the so-called model minority that Asian Americans have been labeled with?

HO: So, I guess a few things. Number one is we actually do have historic examples of some key individual Asian-American activists who have been social justice warriors. Yuri Kochiyama was with Malcolm X when he was assassinated. In fact, there's a very famous photograph of her holding his head in her hands as others are trying to find his bullet wounds and trying to save him. And then there's the example of Grace Lee Boggs in Detroit who worked tirelessly with her African-American friends and neighbors and worked towards social justice for all people, especially within her neighborhood of Black Detroit people. But really, she was a social justice activist for all people. And certainly there are many people I know. Grace Yoo at San Francisco State, who's a professor of Asian-American Studies, and she's offering a summer class on sewing masks and teaching people how to sew. And those masks are going to be donated specifically to Indigenous populations here in the United States and other vulnerable groups. So, I think we may not see these examples as readily. Partly that's because in our curriculum, we're not really taught these names—Yuri Kochiyama, Grace Lee Boggs—as much as we should be.

I do take your point, though. In general, Asian Americans are not seen as being on the front lines of social justice activism, along with African-American, Latinx, and Indigenous people. So, for example, we don't tend to think about Asian Americans being at Standing Rock when those protests are going on or being in Ferguson to protest the murder of Michael Brown. I do think it's important to note that there are individual people who have been on the front lines in my local former community of North Carolina. There is an activist, Heather Redding, who was very, and is very, active in social justice circles.

I think one of the things that I would hope people will take away from our current moment of seeing the rise of anti-Asian racism related to COVID-19 is that if you're an Asian American and you haven't really been thinking about race and racism before, but are realizing that you are being targeted, I hope this is a moment when you also think about systemic racism that is impacting other communities and has impacted other communities for centuries. So, in other words, I think this is the teacher me would say, this is an educational moment. This is a teachable moment for all of us where, if you haven't been aware of the ways in which anti-Black racism has caused great inequity in the African-American population, such that we are seeing higher numbers of fatalities related to COVID-19, here's your chance to understand why, why this is happening. That it's not just an epidemiological issue. This is actually a social issue related to social inequality from systemic racism that has happened to African Americans for well over two centuries.

KAO: Yeah. So, can I maybe press you a little bit to talk about, do you think this label of "model minority," how should we think about that now and going forward?

HO: So, the label "model minority" sounds, it sounds good, right? It sounds like we're great! We're this [laughing] model minority that is succeeding.

KAO: Right.

HO: But the flipside to that is it is also saying there are other minorities that are not model. So, it's a title that was formed in the 1960s that was used really as a wedge to say, "Here are the good minorities, and here are the bad minorities." So, it's not something that the Asian-American community created for itself. It's something that was imposed on them by a White journalist to suggest, "Here are the good minorities. Here are these Japanese Americans who come over as immigrants and they don't know the language and they learn it. And they're the ones we should be supporting," as opposed to the Civil Rights

movement that was happening at the time where African Americans were very rightly fighting for enfranchisement.

The other thing is that the model minority is just simply not true. So, in other words, if you look, if you drill down into specific ethnic groups, and you look specifically at Hmong and Burmese and Laotian, those are specific ethnic groups in the United States that are not succeeding in the way that we assume the title “model minority” would mean, that these groups would succeed. So, in other words, in terms of rates of high school graduation, in terms of socioeconomic class, these Southeast-Asian groups are actually following in the lower tier, especially when you look at the statistics of percentages.

KAO: Yeah. No, I think you make some excellent points. And I think that these labels that we are aware of, as you just noted, are labels that are imposed by the majority on the minority. And I think that’s an important historical point to note. Having also heard what you just said, do you think that, some have talked about this notion of competition, of suffering, so-called my minority group has suffered more than yours. How do you think that plays out in terms of individual and collective behavior or inaction during times like this?

HO: That’s a really great question, because I think that it’s normal for people to think, well, my group has also suffered, and so therefore, why should I— You know, you kind of, especially in survival flight or fight mode, we tend to kind of think tribally. Those tribes may be by race, they may be by ethnicity, they may be by specific community or other identarian factors in terms of gender or sexuality or religion. So, the first thing is I think that’s normal in terms of our kind of basic human instincts. But I also think that we have rational minds that can work through these kind of fight or flight responses. So, I guess what I would say is I think very collectively about human rights. And I think that I can’t say that I am enjoying human rights if I see that there are other people suffering. That for me, an understanding of the way that systemic racism, to be very specific, has impacted people in the U.S. unequally, is really important for me to understand that the struggles of Latinx people and the fact that there are children that are being held in cages on the southern border, that is an issue that should concern me as a human being and as an American citizen.

And so, I would say that I would hope that people’s sense of empathy and compassion are enough that you can take care of yourself and your family and your tribe and then also think more expansively about the tribe of people in the United States, the tribe of human beings. And that what we want, and what I specifically would assume anyone watching this particular video series would want in the medical profession, is an end to suffering.

KAO: Yeah. No, I think your points are well made. We’re not a race of Black people, a race of brown people; we’re the human race. And so, I think that understanding that basic notion is so central during times of stress and uncertainty.

HO: Absolutely. And I also think that, again, a lot of what I think about is the way that we just simply don’t know these stories. So, I was trained with a PhD in English, and I love stories. I had as a kid. And when I got to college and I realized that there were these other stories that, first of all, the stories told in History that I had access to in college that I’d never had access to in my K through 12 years. And then the stories of collaboration and community building that happen across races. What I do know is this: there has never been a social justice or human rights movement that has succeeded when only people of that group got involved.

KAO: Yeah.

HO: We always need allies.

KAO: True, true.

HO: We always need people to step up and say, "I may not share this identity or this subjectivity, but I see that my needs are also being met by this group. And so, I'm also going to work collectively to ensure the social justice, the human rights of this particular issue."

KAO: Yeah, I think those are excellent points. If we could narrow our focus a little bit on a particular professional group. You may or may not know that more than 22 percent of U.S. medical students and more than 17 percent of physicians practicing in the U.S. identify as Asian. Health care professionals of Asian descent on the front lines of care in this pandemic are reportedly encountering patients who do not want to be treated by them. Some patients claim that they aren't being racist, but simply don't want to catch the virus. How do you think health professionals, and probably more importantly, health care institutions and beyond, should respond when patients refuse to be cared for by a Chinese doctor or a Filipino nurse?

HO: So, I will say this is definitely outside of my wheelhouse, but luckily, I have medical professionals who are in my family. And I actually asked this of my uncle who's now retired, and he talked about how he encountered that prior to COVID-19 about a White patient who did not want to be seen by him because that White patient made certain assumptions about his expertise as a non-White person. And that my uncle went in and explained to the patient, you know, "I'm fully qualified. I can give you the medical care that you need. If you refuse to be seen by me, you are now going to have to wait for the next available doctor to treat you, and that is going to delay your care. So, you can choose to be seen by me, and I promise I will deliver the best care possible to you because I have made a medical oath to do so, or you're going to have to wait. And we don't know when you can be seen."

I then followed up and asked him because again, my assumption is that there are hospitals and medical clinics that must have encountered this pre-COVID-19. That we have African-American, Latinx doctors, non-White doctors, doctors of different religions where a patient may say, "I'm not comfortable being seen by a doctor wearing a headscarf. I'm not comfortable being seen by a Jewish doctor." So, my assumption is that these health care clinics and hospitals must have policies in place to deal with these kinds of issues and that those policies should be invoked. So, again, if someone's saying, "I don't want to see you because you're going to give me coronavirus," I think this is an educational moment in which either the doctor or an administrator says, you know, "You have the right to refuse medical care. But we are stretched really thin, and we don't know when we can get you care. And we have all made an oath. And the idea that you're going to get coronavirus from one of our medical staff because of their ethnicity is simply not true. So, if you want to persist in that false belief, you can persist in that false belief. And then unfortunately, you're going to delay your own care. Or you can choose to be seen by our very qualified medical professionals."

KAO: Yeah. Well, I certainly appreciate your candor that this is not in your wheelhouse. I think it's important to know what we don't know sometimes. Having said that, I think your uncle speaks powerfully to some of the things that need to be done. I think it probably

wouldn't surprise you if not all health care institutions have formal policies in place to respond to these types of encounters. And you're right: this occurred long before the COVID-19 pandemic, and the *AMA Journal of Ethics*, they covered many of these issues earlier. And we'll be sure to include some of those sources as part of this videocast.

As we're nearing the end of our interview today, May is Asian Pacific American Heritage Month, as you know, which celebrates the generations of Asian and Pacific Islanders who have enriched America's history and contributed to its success. What do you see as the value, and maybe even possibly some of the shortcomings, of these heritage months? More importantly, what do you think each of us can do in our own way to express and define our shared humanity during and after this pandemic?

HO: So, I'm the president of the Association of Asian American Studies, which means that I definitely support Asian Pacific Islander American Heritage Month. In fact, every day on my Facebook page, I highlight a different APIA person to signal that we should be recognizing the contributions of Asian Pacific Islander Americans. I suppose the drawback is somehow feeling like there's only this one month devoted to Asian Pacific Islanders and that the rest of the months we can ignore them. I know that's definitely what I've heard when there've been critiques about African-American Heritage Month.

KAO: Right.

HO: I think that that might be true. But I would also say that something is better than nothing, and that we have to try and move the needle as best we can. So, do I want people to know who your Yuri Kochiyama is every day of the year? Absolutely. Am I glad that people are spotlighting Yuri Kochiyama now because it's Asian Pacific Islander Heritage Month? Yes, absolutely. I also think that if we're going to celebrate Asian Pacific Islander American Heritage Month, it's pretty easy. Because I would guess, especially, again, given the statistics you gave earlier about the number of Asian-heritage people who are in the medical profession, you know someone! You may not be close friends with them, but there is someone in your working group, in your personal life, hopefully, that you know who is Asian Pacific Islander. And it's really as simple, I would say, as just deciding that you're going to learn more about that person.

Now, I know this is tricky, right? Like, I have gotten this question like, "Who are you? Where are you from?" And you don't want to feel like someone is being unduly invasive. So, the first thing is you don't necessarily have to go to your friend who's Japanese American and ask them all sorts of questions about the things that they eat or their immigration status. But the Internet is a great place to start to find information about Asian Pacific Islanders. If you go to my Twitter—I know I'm really promoting myself—but if you go to my Twitter feed and you look at that slide deck, there's actually a section about further reading. So, really, people can be reading about Asian Pacific Islanders. And that kind of reading that is on my slide deck is a little bit more dense, but there's a number of wonderful novels. And if somebody wants to tweet me and ask me for a recommendation about movies or novels or TV series, I'm more than happy to provide that.

So, I think what we can do right now as we're leaning into the last days of the month is just simply learn about who Asian Americans are. And then hopefully, that will give people a better awareness and appreciation. And even if you are yourself Asian American, you may know about your own specific ethnic group. Learn about a different ethnic group, right? Learn about Hmong people or learn about Filipinos or learn about Vietnamese or Taiwanese.

KAO: Well, on that positive instructional note, I want to thank Professor Jennifer Ho for sharing her expertise and insights with our audience today. Jennifer, thank you for being a guest on *Ethics Talk*.

HO: It's been my pleasure. Thank you very much.

KAO: Finally, on a personal and professional note, it deeply saddens me to see reports of frontline clinicians who are risking their health, doing their jobs, being discounted, abused, and maybe even harassed because they are seen as a source of the novel coronavirus. I encourage my health professional colleagues to share their experiences of abuse and harassment at my email address below. I will continue to do my small part to shine a light on racism and xenophobia as we work together to eradicate this scourge from our society. So, to our viewing audience out there, be well, be safe, and be strong. We'll see you next time on *Ethics Talk*. [bright theme music plays]