

Spring 5-1-2022

## Asian American Discrimination Through United States History, Disease Outbreaks, and the COVID-19 Pandemic

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**Asian American Discrimination Through United States History, Disease Outbreaks, and  
the COVID-19 Pandemic**

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January 23, 2021

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## **Abstract**

Since the beginning of the Covid-19 pandemic, anti-Asian hate crimes have increased sharply. Although this is one of the first instances where a larger portion of the population is actively participating in discussion on this topic, Asian discrimination has woven itself throughout American history. Concepts like the model minority myth, racial triangulation, and panethnic fate have been common tales within the Asian American diaspora. Ostracism in tandem with valorization applies from the mid-1800's California Gold Rush to Reagan era affirmative action cases. In some aspects, Asian people are tokenized, while in other instances, they are labeled as foreign and alien. Asian Americans have also endured a long history of medical scapegoatism in multiple epidemics, receiving backlash during the smallpox and bubonic plague outbreaks to the more present SARS and coronavirus pandemics. Solutions to racial discrimination require a multifaceted approach that integrates political, health, and educational institutional sectors to shift society into celebrating diversity.

## **1. Introduction**

Do people infect people? During the onset of a disease outbreak, people often place blame not on the contagion itself, but on a group of people. In 14th century medieval Europe, Jewish people were accused of spreading the bubonic plague by poisoning wells and streams (Mcneil, 2009). In the era that became known as the Black Death, Jewish people were blamed and slaughtered by Christian mobs (Cole, 2020). Greater than 200 Jewish communities were wiped out during the pandemic's peak from 1348 to 1351. Fast-forward to the 21st century, American politicians blamed Mexico and Mexicans in other countries for the Swine Flu outbreak of 2009. The blame was also politically driven, during a time when American politicians wanted to close the border (Mcneil, 2009). Now, the world is in the midst of the coronavirus pandemic,

and Asian people have been scapegoated for spreading the virus. Yet, this is not the first time this minority group has been met with extreme hate. Asian American discrimination is and has been prevalent in the United States throughout the country's political history, disease history, and the current Covid-19 pandemic. Better education of Asian American history in the U.S. will lead to more effective solutions to curtail the rise in recent hate crimes.

## **2. Definitions and Theories**

### *2.1 Model Minority Myth*

One of the most common theories connected to Asian American studies is the model minority myth. Under this perception, the minority group is deemed uniformly successful with high levels of educational attainment and income (Chen et al. 2020). The model minority myth affirms that Asian Americans are a monolithic group who have enjoyed great success in American society due to a cultural emphasis on strong work ethic, natural intelligence, importance of education, and achievement within families (Gover et al., 2020). Since the mid-1960s, Asian Americans were valorized relative to Black people via the model minority myth. The public generalizes Asian American with values of diligence, family solidarity, education, and self-sufficiency, and believes that the group's material success is attributed to cultural distinctiveness. Asian Americans are also perceived to engage in limited political activism (Chen et al. 2020), as they are viewed to be too busy getting ahead and making money to worry about politics (Kim, 1999). In Figure 1 (Appendix), these characteristics of the model minority are listed and compared to those of the underclass. Portrayals of Asian Americans "excelling" are even demonstrated in today's media, including movies like *Crazy Rich Asians* and *Bling Empire* (Kim et al., 2021).

The myth suggests that Asian Americans prosper despite their apoliticalness. In turn, this belief disparaged the politically active African American community in the 1960s and cautioned Asian Americans from seeking political involvement (Kim, 1999). In an ABC News Article “‘We’re being scapegoated’: Asians and Asian Americans speak out against spate of violence”, the authors write, “White America tends to privilege Asians and Asian Americans in ways that they do not our Black and LatinX community members” (Kim et al., 2021). The myth confirms the belief that the U.S. does not have racial discrimination problems and that racial groups operate on an equal playing field (Gover et al., 2020). This is done by implying that if the Asian American community excels, then no racial issues exist for all minority groups.

Although the model minority myth suggests upward mobility, it creates a fallacy that Asian Americans do not experience struggle or racial discrimination. A 2018 Pew Research Center study found that Asian Americans experience the largest income inequality gap as an ethnic and racial group in the U.S., and the NYC Mayor’s Office of Operations 2016 report shows that Asian immigrants have the highest poverty rates in the city (Lang, 2021). The model minority myth disregards the heterogeneity within the group and generalizes all Asian Americans under one bounding stereotype of “confucian work ethic” (Blackstock & Choo, 2020).

## *2.2 Panethnic Fate*

The model minority myth not only exaggerates Asian American prosperity, but also homogenizes the diverse population (Kim, 1999). There is often the perception of Asian-looking people as simultaneously Chinese, Asian, and foreign (Tessler et al., 2020). Psychologist Derald Wing Sue argues that Asian panethnicity is an “invalidation of interethnic differences”. Because Asian Americans are frequently associated with East Asians, this contributes to the erasure of visibility and perspectives of other Asian communities (Chen et al., 2020).

### *2.3 Racial Triangulation*

In 1999, political scientist Claire Jean Kim proposed the theory of racial triangulation (Blackstock & Choo, 2020), which created a “field of racial positions” to shift the conceptualization of racial dynamics “beyond Black and White” (Kim, 1999). Figure 2 (Appendix) presents the concept of racial triangulation between White, Black, and Asian American communities through a two-dimensional representation. There are two axes: the x-axis ranges from foreigner to insider, and the y-axis ranges from inferior to superior.

White people are perceived as insiders and superior in society. Black people are perceived as insiders in society, but inferior compared to White people. Asian Americans are perceived as foreigners and somewhere in between the superiority of the White community and the inferiority of the Black community. There is the stereotype that Asian Americans are “perpetual foreigners” - meaning that individuals directly link phenotypical Asian ethnic appearance with foreignness, regardless of Asian immigrant or generational status (Tessler et al., 2020). These categorizations translate into the triangulated pattern displayed on the graph. For the past century and a half, Asian Americans have been “racially triangulated” vis-à-vis White and Black people in the field of racial positions (Kim, 1999).

The racial triangulation plot also illustrates Kim’s concepts of relative valorization (the dashed lines) and civic ostracism (the solid line). In relative valorization, the dominant group (White Americans) valorizes subordinate groups (Asian Americans) relative to other subordinate groups (Black Americans) on cultural and racial grounds to dominate both of the groups (Kim, 1999). Thus, racial valorization of Asian Americans by White people serves as a way to further dominate the Black community (Blackstock & Choo, 2020). In civic ostracism, the dominant group (White Americans) constructs the subordinate group (Asian Americans) as foreign and



unassimilable on cultural and racial grounds to ostracize them from political and civic membership (Kim, 1999). The theory of racial triangulation simultaneously valorizes and ostracizes Asian Americans to maintain the superiority of the majority White population.

#### *2.4 Hate Crime*

Under the Hate Crime Statistic Act, a hate crime is defined as “crimes that manifest evidence of prejudice based on race, gender and gender identity, religion, disability, sexual orientation, or ethnicity”. The Department of Justice (DOJ) states that a hate crime involves a “criminal act, including violent crime such as harassment, assault, murder, arson, vandalism, or threats to commit such crimes against a person or their property due to their real or perceived race, color, religion, nationality, country of origin, disability, gender or sexual orientation” (Gover et al., 2020).

#### *2.5 Othering*

In the othering theory, the dominant group marginalizes a non-dominant group out of prejudice and fear. Othering is a process whereby the group at the top of the racial hierarchy seeks to maintain the status quo by defining which members of society belong or do not. Racial groups with the most power in the U.S. believe that they have “civic belonging” - contrasting with the aforementioned civic ostracism - to stigmatize and distance individuals who are racially different. Othering reinforces the dominant groups’ notions of their own normality (Gover et al., 2020).

#### *2.6 Racial Discrimination*

Discrimination is defined as prejudicial attitudes, beliefs, behaviors that contribute to a person’s marginalized social status and that decrease their ability to control their environment.

They exist in the form of blatant and subtle actions that produce unpredictable and threatening interpersonal interactions (Chen et al., 2020).

Racial discrimination is the negative differential treatment of racial and ethnic minorities by individuals and social institutions. Racial discrimination is associated with worsened psychological and physical health outcomes - including pain, disability, higher all-cause mortality, reduced life satisfaction and self-esteem, increased anxiety and depression, and suicidal ideation. Literature to date suggests that discrimination exacerbates chronic health conditions, such as cardiac disease, respiratory conditions, and pain among Chinese, Vietnamese, and Filipino populations in the U.S. (Chen et al., 2020).

### *2.7 Microaggressions*

Microaggressions are brief everyday exchanges that send denigrating messages to people of color because they belong to a racial minority group. They are also linked to increased mental health problems (Chen et al., 2020).

### *2.8 Trauma Theories*

Psychiatric epidemiologist Ilan Meyer explains that the minority stress theory is the result of an accumulation of prejudice, discrimination, and internalized stigma that contributes to poor mental and physical health in minorities through physiologic pathways mediated by stress. Acute stress leads to an increase in cortisol levels, blood pressure, and heart rate. Whereas, chronic stress contributes to an allostatic overload on the body (Chen et al., 2020).

Carter's race-based traumatic stress theory claims that the experience and magnitude of the trauma is linked to an individual's perception of their ability to cope with the event (Chen et al., 2020).

### 3. Asian American History

The past reveals what is known to be true today - that is the cyclical recurring nature of history. The themes of racial triangulation, foreignness, and the model minority myth weave in and out through time. Here is an overview of important events and narratives that have shaped the perceptions of Asian Americans through the course of U.S. history.

#### *3.1 California Gold Rush & the Chinese Exclusion Act of 1882*

The first large group of Asian immigrants came to the continental U.S. during the California Gold Rush in the mid-1800s (Gover et al., 2020). White businesses and political elites in California voted to enter the Union as a “free” (non-slave) state, but the desire for economic growth needed cheap labor. Hence, Chinese immigrant labor solved this problem (Kim, 1999). While early Chinese immigrants were admired for their industry and frugality (Trauner, 1978), they were forced to work for less than their White counterparts in dangerous mining operations and railroad construction (Gover et al., 2020).

Likewise, newspapers across the nation mimicked these sentiments of labor exploitation. These East Coast newspaper editors wrote, “While the Chinese were not biologically suited for America’s melting pot, it would be foolish not to exploit their cheap labor before shipping them back to China.” A California newspaper similarly wrote, “We desire only a White population in California” (Kim, 1999).

The 1850s Gold Rush was followed by the 1870s California economic depression and Anti-Chinese exclusion movement (Kim, 1999). Chinese immigrants were viewed as “a social, moral, and political curse to the community.” J.B. Trauner in his 1978 journal article *The Chinese as Medical Scapegoats in San Francisco, 1870-1905* explains the 6 arguments the general population used against the Chinese people in the 19th century. First, the economic

argument, which was advocated by nativist and workingmen's groups, proclaimed that cheap Chinese labor undermined wage rates and adversely affected employment practices on the West Coast. The cultural argument stated that Chinese civilization was corrupt and backward and that Chinese immigrants represented the lowest classes in China. The assimilationist argument believed that Chinese people did not desire to merge into the American mainstream. The belief also identified Chinese people as having "abounding vices" of prostitution, gambling, and opium-smoking, unaffected by the "loftier ideals" of Western civilization. The racist argument declared that America should maintain a homogeneous population, since national degeneration would result from permitting an inferior race to mingle with a superior race. The biological argument viewed Chinese people as "inferior in organic structure, in vital force, and in the constitutional conditions of full development." Lastly, The medical argument asserted that Chinese people ignored all laws of hygiene and sanitation and that this population bred and disseminated disease, endangering the national welfare (Trauner, 1978).

Soon later, Congress enacted the Chinese Exclusion Act of 1882, which banned Chinese people from immigration and eligibility for U.S. citizenship. Congressmen used "Chinese invasion" rhetoric to propagate support for this piece of legislation (Gover et al., 2020). The law's significance rests in that it was the first immigration law to exclude an entire ethnic group (Chen et al., 2020). Chinese immigrants were accepted conditionally as laborers, expected to fulfill a temporary purpose (Kim, 1999). In the span of 30 years, these immigrants who were once welcomed became excluded from the nation.

### *3.2 Racial Triangulation Before & After the Reconstruction Era*

As this dynamic shift occurred, the “Mongolian/Asiatic” racial category was placed via triangulation - in tandem with relative valorization and civic ostracism - in the field of racial positions.

Prior to the Civil War, state legislation prohibited Black people from becoming citizens, voting, holding public office, serving on juries, testifying against White people in court, attending White public schools, and homesteading public land. The courts interpreted and applied some of these laws to Chinese people, who were seen as lazy, dishonest, irresponsible, docile, and thieving - vices that were attributed to Black people at the time. Cartoons portrayed Chinese immigrants with “Black” features sometimes. In Wild West minstrel shows, the “Heathen Chinese” character often appeared with the Black “Sambo” character (Kim, 1999).

Nevertheless, Chinese immigrants were demonized less uniformly and insistently than Black people. During the Joint Congressional Committee hearings on Chinese immigration in California 1879, Charles Wolcott Brooks - a former U.S. consul to Japan - testified the following:

“I think the Chinese are a far superior race to the negro race physiologically and mentally...I think that the Chinese have a great deal more brain power than the original negro. The negro[‘s]...mind is undisciplined and is not systematic as the Chinese mind. For that reason the negro is very easily taught; he assimilates more readily...The Chinese are non-assimilative because their form of civilization has crystallized.” (Kim, 1999)

Brook’s language demonstrates both Chinese superiority and Chinese foreignness simultaneously. He valorizes Chinese people for being a “far superior race” and having “more brain power”. Yet, he ostracizes them for being “non-assimilative” due to “their form of

civilization”. Thus, Chinese people are racially triangulated in relation to Black and White society.

Following the Civil War, Southern elites sought cheap labor for plantations and railroads. One Georgia Planter believed that Chinese immigrants were “said to be better laborers[,] more intelligent and can be had for \$12 or \$13 per month and rations.” In Mississippi, Chinese Americans moved from near-Black status during the late-1800s to near-White status during the 1920s (Kim, 1999). C.J. Kim, the author of the journal article “The Racial Triangulation of Asian Americans” expands on the difference in struggles between the Black and Asian communities post-Civil War. The author writes, “If the Black struggle for advancement has historically rested upon appeals to racial equality, the Asian American struggle has at times rested upon appeals to be considered White (and to be granted the myriad privileges bundled with Whiteness).”

In the Reconstruction Era, there is a return to the concept of Chinese immigrants as good laborers. Yet, while they are uplifted in their work ethic, the White superior race again ties the group below in society, shackled within the field of racial positions.

### *3.3 Late 19th Century Housing Segregation*

Towards the end of the 19th century, Chinese American communities were met with housing segregation policies. In response, these communities formed Chinatowns in major U.S. urban centers, where they constructed governing bodies to maintain community order. Chinese people avoided racially-motivated maltreatment in mines and factories by choosing self-employment through restaurants, retail establishments, and laundries. Nonetheless, there were violent and deadly attacks by the White majority. Homes were burned, and residents ran out of these towns (Gover et al., 2020).

### 3.4 Court Cases for Aliens

Despite the establishment of Chinatowns as an inclusive environment for Chinese Americans and immigrants, the judicial system alienated this racial group from the mid-1800s to the early 20th century. Asian immigrants are the only group in American history to be legally rendered “aliens ineligible to citizenship” (Kim, 1999). The concept of Asian people as “perpetual foreigners” is omnipresent in American society (Lang, 2021). The following court rulings adhere to this belief.

The outcome for *People v. George Hall (1854)* was based on a California state legislature law from 1850, which states that “No Black, or Mulatto person, or Indian shall be allowed to give evidence for, or against a White man” in criminal courtroom proceedings. California Supreme Court Chief Justice Murray ruled that a Chinese testimony against a White man was inadmissible according to the 1850 law. Murray argued that “Black” encompassed all non-White people, and his ruling paved the way for future anti-Chinese legislation and court cases. In 1870, Congress amended the Naturalization Law of 1790 to allow Black people naturalization, but not Chinese people. Consequently, for *In re Ah Yup (1878)*, the circuit court of California ruled that Chinese-born Ah Yup could not naturalize because he was a member of the “Mongolian” race, therefore not Caucasian. 40 years later, U.S. Supreme Court Justice Sutherland cites from *In re Ah Yup* for *Takao Ozawa v. United States (1922)*. Sutherland ruled that Japanese-born Ozawa was a member of the “yellow” race, thus not White. In the following year, the Supreme Court further ruled that a Caucasian Hindu was not White “in accordance with the understanding of the common man” in *United States v. Bhagat Singh Thind (1923)*. This succession of cases reveal how the courts were determined to maintain a boundary between White and Asian Americans (Kim, 1999).

### *3.5 Japanese Exclusion*

The anti-Japanese exclusion movement began in the early 1900s, following Japan's appearance on the world stage during the 1905 Russo-Japanese War (Kim, 1999). In 1908, the U.S. and Japan signed the Gentleman's Agreement, in which Japan agreed to stop further labor immigration to the states. In 1924, lawmakers made an amendment to the former Chinese Exclusion Act. The new amendment denied citizens from any Asian nation to immigrate to the U.S. (Gover et al., 2020).

The concept of the "yellow peril" became omnipresent at the turn of the 20th Century. Under this stereotype, Asian people were seen as dirty, diseased, sinister, sexually depraved, invasive, and perpetually foreign (Chen et al., 2020). The public believed that Asian people were threatening agents bent on world domination, and American society othered Asian Americans as bloodthirsty, sneaky foreigners who were not to be trusted in the same way as Americans of other ancestries (Gover et al., 2020).

Hence, the "yellow peril" belief coupled with the U.S.'s involvement in World War II led to the internment of Japanese Americans (Kim, 1999). Two months after the attack on Pearl Harbor in December 1941, President Franklin D. Roosevelt signed an executive order, which forced the removal of the entire Japanese population on the U.S. west coast (Gover et al., 2020). Nearly 120,000 people of Japanese ancestry were relocated and incarcerated into concentration camps (Chen et al., 2020). Anyone who was one-sixteenth or more of Japanese blood was eligible for removal (Gover et al., 2020). This focus on lineage was so severe that Japanese Americans were boxed into remaining foreign. During WWII, General J.L. Dewitt expressed, "Racial affinities are not severed by migration. The Japanese race is an enemy race and while many second and third generation Japanese born on United States soil, possessed of United



States citizenship, have become ‘Americanized,’ the racial strains are undiluted” (Kim, 1999). Any notions of integration into American society were stripped. The Los Angeles Times mimicked an identical sentiment: “A viper is nonetheless a viper wherever the egg is hatched - so a Japanese American, born of Japanese parents, grows up to be a Japanese, not an American” (Kim, 1999).

Despite the immense amount of hatred Japanese Americans faced during WWII, Chinese Americans were viewed more favorably during the war. Yet, this sub-racial hierarchy proved challenging to anyone within the Asian community. After the war had ended, news media and local organizations encouraged Chinese Americans to distinguish themselves from Japanese people. Meanwhile, Japanese Americans were encouraged to show Americanism and patriotism to gain acceptance by the White majority (Tessler et al., 2020). With the racial hierarchy displayed holistically, Asian Americans remained in their position of inferiority and foreignness in relation to their White counterparts.

### *3.6 Post-Civil Rights & the Model Minority*

By 1965, Congress passed a new Immigration Act, which struck down race as a barrier for immigration. As a result, new waves of East Asian immigrants entered the U.S. in the mid-late 20th century (Gover et al., 2020). Within the context of the post-civil rights era, the field of racial positions changed and became elaborated in nonracial and cultural terms. Opinionmakers claimed that certain group cultures are more successful than others. In particular, Asian American cultural values were seen as more conducive to success than Black cultural values. Consequently, Asian Americans were valorized as the model minority (Kim, 1999).

The model minority myth occurred in two movements. First, from the mid 1960s to the early 1970s, conservatives embraced formal colorblindness to delegitimize the Black Power

movement and to arrest the growth of race-conscious social programs. The myth was first articulated in a *New York Times Magazine* article in 1966. In the article “Success Story, Japanese-American Style”, author William Petersen valorizes Asian Americans relative to Black people on cultural and racially coded grounds. He wrote that Japanese Americans have succeeded in American society because they hold “Tokugawa” values - including diligence, frugality, and achievement. However, coupled with this valorization, Petersen ostracizes Japanese Americans and the foreignness of their culture (Kim, 1999).

The paradox of this article lies in the fact that Japanese immigration was barred from 1924 to 1965. Therefore, the Japanese American population in 1966 was mostly composed of native-born U.S. citizens. Petersen’s claims on the foreignness of Japanese culture convey the implicit suggestion that culture is a matter of blood or biological race (Kim, 1999).

The second movement of the model minority myth began in the early 1980s. During the Reagan administration, there was a rollback on earlier minority gains, which included challenges against affirmative action programs and redistricting plans. In a *Newsweek*’s article “Asian-Americans: a ‘Model Minority’”, the writers expressed that Asian culture accounts for the group’s astonishing achievements. Nonetheless, the myth served to show Black people as deficient and that one should ignore politics to pursue prosperity. Conservative author Thomas Sowell shared these sentiments:

“[T]hose minorities that have pinned their greatest hopes on political action have made some of the slower economic advances. This is a sharp contrast to the Japanese American, whose political powerlessness may have been a blessing in disguise, by preventing the expenditure of much energy in that direction.”

Sowell uses the myth to deter any minority group from engaging in societal discourse by stating the false consequences of economic decline. The myth also depicts Asian Americans as docile and compliant to White prerogatives (Kim, 1999).

### *3.7 Conflict Between Minority Communities*

In addition to the model minority myth, affirmative action pitted Black and Asian communities against each other. During the Asian American admissions controversy in the 1980s, Asian American admission rates did not have a comparable increase. There was the possibility that schools employed racial quotas to keep Asian American admission rates low in order to preserve the Whiteness of student bodies. Conservatives shifted this narrative to paint Asian Americans as victims of “reverse discrimination” from the affirmative action programs that were designed to benefit Black and Latino students (Kim, 1999). The greater White majority placed the blame amongst minority groups to deter attention from their responsibility and power to allow higher admission rates for people of color.

White society draws from conflicts between minority groups to feed into the model minority myth. One of these conflicts include the 1990 Flatbush Boycott. Since the 1970s, there have been conflicts between Korean immigrant merchants and Black communities within which they operate stores. In 1990, Black and Haitian activists led a highly organized, year-long retail boycott and picketing campaign against two Korean-owned grocery stores in central Brooklyn. The media broadcasted this boycott as a morality play - greedy, demagogic Black people scapegoating an innocent, apolitical model minority (Kim, 1999).

Within this decade, four police officers were accused of beating Rodney King. As a result, Koreatown suffered property damage after the 1992 Los Angeles riots, but received little protection from police authorities compared with majority White areas (Chen et al., 2020). The

contrast between expressed sentiments and inaction from the White majority proves the point that Asian Americans and the model minority myth serve solely to further the White people's agenda.

In the modern era, Asian Americans are portrayed as the model minority. Nevertheless, White opinion makers use the myth to shift the attention away from White racial power through controlling the dominant narratives of affirmative action and the Black-Korean conflict. In 1850, racial triangulation allowed White people to exploit Asian immigrants as workers and deny them civic membership. Whereas in the present day, racial triangulation allows White people to conscript Asian Americans into a war of racial retrenchment while denying genuine equality (Kim, 1999).

### *3.8 The Murder of Vincent Chin*

Just as Asian Americans were persecuted during social and political shifts, fear and blame arose during economic downturns, too. On June 19, 1982, Chinese American Vincent Chin was murdered in Detroit (Vang, 2021). Two White men - Ronald Ebens and his stepson Michael Nitz - beat him to death with a baseball bat, and Chin died in the hospital four days later (Little, 2020). The men assumed Chin was Japanese and blamed him for the influx of Japanese cars into the U.S. auto market. They claimed that Chin represented the downturn of the auto industry in Detroit (Tessler et al., 2020).

The murder was not reported on the national news that summer. Until March 16th the following year, Wayne County Circuit Judge Charles Kaufman ruled that the murder was the outcome of no more than a barroom brawl and found Ebens and Nitz guilty of manslaughter. Each received a \$3,000 fine, \$780 in court costs, and three years probation. Neither received

prison time. Judge Charles Kaufman explained why Ebens and Nitz did not deserve harsh repercussions for their actions:

“These aren’t the kind of men you send to jail. We’re talking here about a man who’s held down a responsible job for 17 or 18 years, and his son is employed and is a part-time student. You don’t make the punishment fit the crime, you make the punishment fit the criminal.”

The personalized and tailored ruling by Judge Kaufman received backlash from the Chinese community. Kin Yee, the president of the Detroit Chinese Welfare Council mocked that sentences amounted to “a license to kill for \$3,000, provided you have a steady job or are a student and the victim is Chinese” (Little, 2020).

Ebens and Nitz’s sentences made national news and sparked protests across the country. American Citizens for Justice (ACJ), a Pan-Asian American civil rights organization, protested and petitioned the U.S. Department of Justice to investigate Vincent Chin’s murder as a civil rights violation. These protests proved successful, and the U.S. District Court sentenced Ebens to 25 years in prison. However, Ebens appealed and received a retrial. By 1987, he was cleared of all charges by settling a civil suit out of court. Nitz was ordered to pay \$50,000 to the Chin estate over the following ten years, and Ebens was ordered to pay \$1.5 million. The sum grew to \$8 million as the total went unpaid and accumulated interest for decades (Little, 2020).

Renee Tajima-Peña, a professor of Asian American studies at UCLA and the co-director of *Who Killed Vincent Chin?*, explained the importance of this court case: “It was the first time Asian Americans were protected in a federal civil rights prosecution. Before that, Asian Americans were seen as not being a protected class” (Little, 2020). While overcoming this feat

calls for celebration, the reality remains in that the White class of Americans are simply pardoned and do not have to face harsh consequences for carrying out a murder.

### *3.9 Microaggressions in Cinema*

In addition to media portrayals of Asian Americans in the news, Asian representation in modern cinema influences and confirms preconceived notions of the minority group. Actor Bee Vang wrote an opinion piece for NBC News that was published on February 17, 2021. Vang starred as the lead Hmong role opposite Clint Eastwood in the film *Gran Torino*, which was released in 2008. The film told a tale of two people transcending differences to form an unlikely human bond. While the film's release was a historic cinematic moment for the Hmong people, there were many anti-Asian slurs scattered throughout the movie. In his opinion, Vang recalls that White audiences would always defend with "Can't you take a joke?" Vang wrote, "I found it unnerving. The laughter that the slurs elicited in theaters with predominantly White audiences." While *Gran Torino* increased Asian American representation, the movie simultaneously mainstreamed anti-Asian racism. Vang states that "the laughter weaponized against us has beaten us into silent submission" (Vang, 2021). The dominant White majority audiences and film industry did not acknowledge these blatant microaggressions seriously. Asian Americans continued to be othered as foreign and alien in reality and in fictional stories.

### *3.10 University of Connecticut Roundtable Discussion*

The common themes of Asian American history and their effects that span centuries are present today. After the murders in Georgia from early 2021, in which six out of the eight victims were Asian, the University of Connecticut - partnered with the Executive Board of the Association for Asian American Faculty and Staff, the Asian American Cultural Center, and the Asian and Asian American Studies Institute - hosted an online panel discussion to bring

awareness to the surge in Asian hate crimes. A panel of students and faculty shared their experiences and thoughts on invisibility as Asian Americans, microaggressions at the university, and the model minority myth.

When asked about Asian American invisibility, Glenn Mitoma, an Assistant Professor of Human Rights and Education, shared his childhood experience growing up in the 1970s. Mitoma was constantly asked “What are you?” and “Where are you from?” His grandparents were placed in the Japanese internment camps, and later his family moved to Flint, Michigan. While growing up, he was reminded to assimilate in order to survive. Mitoma stated, “Invisibility does not allow us to be who we are, but still puts a target on our backs.” Similarly, Na-Rae Kim, an Assistant Professor in Residence and the Associate Director at the Asian and Asian American Studies Institute, told her story as an immigrant. Kim is a green card holder from South Korea and a first generation Asian American. Yet, she repeatedly questions herself, “Does this country want me as a citizen?” (Cheng et al., 2021). Asian American invisibility feeds the concepts of foreignness, alien, and other. While Asian Americans and immigrants try to assimilate into American culture, their presence and acceptance is often denied.

In recent years, Asian American students have faced microaggressions at the university. UConn alum Shaina Selvaraju recalled people approaching her with “namaste” on unprompted occasions. Masters student Aubrey Tang spoke on the misconstrued notions of her identity. Some of her peers would often say “no offense, but...”, followed by some rude remark about her Asian culture or appearance. Furthermore, when complimented on her appearance, the compliment would mention her Asian identity, such as: “You are one of the coolest/prettiest Asians I have met.” Tang expressed her confusion in why her ethnicity or race needs to be emphasized. Her classmates would stereotype her with prejudice about her intelligence with comments like “We’ll

just have Aubrey do the math. She's Asian!" and "Math and Science is in your DNA!" (Cheng et al., 2021).

Stereotypes and prejudice on the idea that Asian people have heightened intelligence and achieve greater success contribute to the model minority myth. Kim disclosed that because of the myth, Asian Americans feel that they need to measure up to certain standards to feel adequate. The expectations for this minority group are so high that anything below what is expected is deemed insufficient. During the discussion, Mitoma admitted that he himself, along with the other professors on the panel, carry the myth with their positions in higher education. Yet, Mitoma voiced that he has to actively deny the misconception that representation in academia means that Asian people do not suffer racism (Cheng et al., 2021). The model minority myth breeds false standards and expectations for the minority group.

From past to present, racial triangulation, foreignness, and the model minority myth simultaneously valorize and ostracize Asian people in American society. Janet Yang, a Hollywood film producer, summarized Asian American History in a podcast interview with Robert Scheer:

"I have seen this incredible seesaw effect. We can go back to the turn of the century, when Chinese were the only people to be legally excluded from this country because people were so fearful of the jobs they were taking. That was seemingly a place that we would never go to anymore, that level of vitriol. We've seen it, though in waves since then: World War II, we had an Asian enemy; Korean War, we had an Asian enemy; Vietnam War, we had an Asian enemy. And then we had Asian enemies that were economic in nature." (Gover et. al., 2020)



Yang highlights the repetitive presence of an Asian enemy through American history. Legislation, court cases, and personal anecdotes demonstrate and highlight these themes that shape the misconstrued identity of Asian Americans and immigrants.

#### **4. Scapegoatism in Disease Outbreaks**

In addition to the social and political hardships Asian people have encountered throughout the centuries, medical scapegoatism and health discrimination during major disease outbreaks are prevalent narratives in Asian American history. Yet, the general pattern of assigning blame to groups of people is a common occurrence for many widespread epidemics.

Experts have supported and defended the scapegoat phenomenon. Jesse Verschuere, from a Belgium-based international medical humanitarian organization Doctors Without Borders, asserts that there is “a pattern of stigma against others in every disease outbreak,” in which the stigma strips people’s humanity away. Objects of prejudice include health-care workers, minorities, immigrants, and outsiders (Cole, 2020). Furthermore, Dr. Liise-anne Pirofski, Chief of Infectious Diseases at Albert Einstein College of Medicine and an expert on the history of epidemics, explains that “[w]hen disease strikes and humans suffer, the need to understand why is very powerful. And, unfortunately, identification of a scapegoat is sometimes inevitable” (Mcneil, 2009).

Because people are looking for a justification or an explanation for why a terrible situation has taken place, people often find a tangible postulation to blame and to connect with the unfortunate events. Mark Schaller, a professor of psychology at the University of British Columbia and the co-author of *Social Psychology of Prejudice*, suggests that the link between disease and blame is rooted in evolution. Schaller proposes the concept of a “behavioral” immune system, a psychological parallel to the physical immune system, where the aversion to

unfamiliar outsiders is an instinctual and unconscious response to avoid risk of infection. While Schaller gives a psychological and evolutionary reason for the link between disease and blame, he encourages people to avoid falling into this psychological and evolutionary pattern: “This underlying psychology evolved in a different world, before modern medicine or public health, and is no longer adaptive. But, we’re stuck with our ancient psychology, leaving us wary and with negative consequences for today” (Cole, 2020).

Consequently, the tangible postulations often place blame on groups of people considered as other, outsiders, and foreign. Tahseen Shams, an assistant professor of sociology at the University of Toronto and the author of *Here, There, and Elsewhere: The Making of Immigrant Identities in a Globalized World*, observes that when external threats occur, immigrant groups are often seen “as the link bringing the threat inside our borders, closer to home” (Cole, 2020). In addition, returning to Bee Vang’s opinion piece, Vang writes that “[b]lame is easier to assign when communities are rendered as un-nuanced monoliths by shallow indictments and stereotypes” (Vang, 2021). Therefore, blame is usually attached to minority communities as a method to suppress them even further.

As for the case with Asian people in the U.S., this group has been othered with the minority myth in times of peace and economic security, while contrastingly othered as a scapegoat in times of economic adversity, wars, or pandemics. Throughout Asian American history, pandemic-related health crises are associated with stigmatization and “othering” of people from Asian descent (Gover et al., 2020). These patterns strengthen the structures of White supremacy, which equate White bodies with purity and innocence and non-White bodies as unclean, uncivilized, and dangerous (Tessler et al., 2020). Asian stigmatization in relation to epidemics mirror the economic, social, and political narratives in Asian American history.

Unfortunately, as time progresses, the same patterns of scapegoatism and blame repeat themselves.

#### *4.1 19th Century Medical Scapegoats*

In the last quarter of the 19th Century, there was anti-Chinese prejudice in the formulation of public health policy on the West Coast. Chinese people became medical scapegoats, and local health officials rationalized the failure of their sanitary programs by tracing all epidemic outbreaks to living conditions among Chinese communities (Trauner, 1978). Chinese people were blamed for spreading smallpox, venereal disease, and leprosy.

In 1870, San Francisco had the largest concentration of Chinese people in California, making up 5 percent of the total San Francisco population and 24.4 percent of the state's Chinese population. During this time, the White community blamed Chinese people for any negative outcome in the city. An astute physician said in 1876, "The Chinese were the focus of Caucasian animosities, and they were made responsible for mishaps in general. A destructive earthquake would probably be charged to their account" (Trauner, 1978). Hatred against the Chinese community was so severe, that they would be blamed for a natural disaster.

As expected, the White population in San Francisco blamed Chinese people for the smallpox epidemic of 1875 to 1876 - with 1,646 reported cases and 405 deaths. City health officer J.L. Meares scapegoated Chinese people for spreading the disease: "I unhesitatingly declare my belief that the cause is the presence in our midst of 30,000 (as a class) of unscrupulous, lying and treacherous Chinamen, who have disregarded our sanitary laws, concealed and are concealing their cases of smallpox" (Trauner, 1978). Meares's unhesitant declaration that portrays Chinese people as "unscrupulous, lying, and treacherous" and that

condemns the minority group as the source of the smallpox epidemic delegitimizes the group's worth in society and uplifts the dominant White population.

For venereal disease, Dr. H.H. Tolland - the founder of Toland Medical College, now known as the University of California Medical School - investigated Chinatown's conditions in 1877. Tolland found that 9 out of 10 venereal disease cases in San Francisco traced directly back to Chinese prostitutes. However, most Chinese houses of prostitution were patronized by White people. This detail was downplayed and hidden so that Chinese prostitution appeared as "the source of the most terrible pollution of the blood of the younger and rising generations" (Trauner, 1978). Again, this historical event demonstrates the lack of responsibility taken by the White community and the blame that is placed solely on the minority group.

In addition to small pox and venereal disease, leprosy cases broke out in the region. In 1875, leprosy was presumed hereditary, contagious, and incurable, but likely to disappear with hygiene. The city health officer claimed that leprosy among Chinese people was "simply the result of generations of syphilis, transmitted from one generation to another." By 1876, an amendment was added to the general police law of California. The amendment deemed that it is unlawful for persons afflicted with leprosy to live in ordinary intercourse with the population of the state and that these persons should "be compelled to inhabit lazarettos or leper's quarters." In 1878 and 1883, health authorities extrapolated lepers out of Chinatown and placed them in Twenty-Sixth Street Lazaretto. From July 1871 to April 1890, 198 lepers were admitted to the lazaretto. 115 were classified as "Mongolians," and 83 were shipped back to China (Trauner, 1978). Rather than help the region that was afflicted with disease, health officials used the disease outbreaks as an excuse to ostracize and expel Chinese people from the country.

As these epidemics spread through the era, new schools of thought on how to understand disease emerged simultaneously. Nevertheless, these elementary concepts circled back to justify the preconceived notion that outsiders are the ones to blame. There was the miasmatic theory of disease, which enforced that epidemic outbreaks were caused by the state of the atmosphere or by poor sanitary conditions affecting the local atmosphere. Thus, many traced this theory back to Chinatown's "foul and disgusting vapors." Regarded as a primary source of atmospheric pollution within the city, Chinatown generated "unwholesome odors" and was a "laboratory of infection." One city health officer labeled Chinatown as "the moral purgatory" (Trauner, 1978). This depiction was exacerbated by the newspapers, too. Figure 3 (Appendix) shows a newspaper illustration of Chinatown and the diseases that infected the city.

By the 1880's, scientists began to consider the renowned Germ Theory. Yet, the San Francisco Board of Health issued a resolution that condemned Chinatown a "nuisance":

"The Chinese cancer must be cut out of the heart of our city, root and branch, if we have any regard for its future sanitary welfare...it is a shame that the very centre be surrendered and abandoned to this health-defying and law-defying population. We, therefore, recommend that the portion of the city here described be condemned as a nuisance; and we call upon the proper authorities to take the necessary steps for its abatement without delay." (Trauner, 1978)

The San Francisco Board of Health compared Chinese people to a "cancer," and were adamant in driving this group out of main society. This resolution was later followed by a San Francisco Board of Health regulation in June 1884, which detained vessels arriving only from Asiatic ports for inspection, fumigation, and disinfection (Trauner, 1978).

After the time that followed the Chinese Exclusion Act of 1882 and the amendments of 1884, there was a greater amount of scientific research on disease transmission, and scapegoatism became less intense (Trauner, 1978). Nevertheless, the disease outbreaks at the turn of the century repeated similar public reactions.

#### *4.2 Bubonic Plague*

The bubonic plague occurred during the transition from the 19th to the 20th century. The public believed that the bubonic plague was a “racial disease” in which only Asian bodies could be infected and White bodies were immune (Tessler et al., 2020). As a result, different regions in the U.S. lashed out at Asian communities.

In December 1899, two cases of the bubonic plague were reported in Honolulu’s Chinatown (Trauner, 1978). As a precautionary measure against the disease, Honolulu officials quarantined Chinese people and burned Chinatown to the ground (Chen et al., 2020). 4,500 Chinese people were removed from their homes to a quarantine camp. The Hawaiian Board of Health depopulated the area and burned infected homes (Trauner, 1978). Figure 4 (Appendix) depicts a newspaper illustration of health officials destroying Chinatown.

Back in San Francisco, the city’s Board of Health ruled on December 16th, 1896 that all Chinese and Japanese people be sent to the city’s quarantine station. All of the city people were inspected, but only Asian people were subject to detention. By March 6th, 1900, a Chinese man was found dead with bubonic plague as the probable cause (Trauner, 1978). On the next day, the city implemented measures to quarantine residents and to regulate food and people in and out of Chinatown. The public blamed the “unclean” food and Asian population for being the cause of the epidemic (Tessler et al., 2020). On March 9th, Chinatown was released from quarantine by the city, but the guards remained at each exit point. Houses were inspected, and sewers were

disinfected with sulfur dioxide and bichloride of mercury. Then, months later, the quarantine was reinstated (Trauner, 1978).

On May 21st, 1900, Surgeon General of Marine Hospital Service Dr. Waler Wyman requested authority from President William McKinley to issue regulations regarding interstate travel by Asian people. This request resulted in travel restrictions in which Chinese and Japanese people were prohibited to leave the state of California without certificates of Haffkine prophylactic vaccination from Marine Hospital Service. Transportation corporations denied services to Asian people as well. The Southern Pacific Railroad stopped selling tickets to Asian people. Later, the U.S. circuit court ruled against these travel restrictions from a petition by the Chinese Six Companies. Federal health officials attempted to create a detention camp to quarantine Asian people, but the circuit court denied this attempt (Trauner, 1978).

Many Chinese people died from the bubonic plague by April 1905. One publication wrote that the bubonic plague was “an Oriental disease, peculiar to rice-eaters.” Yet, during the second wave from May 1907 to March 1908, there were 167 cases and 89 deaths, and only eight of the victims were Chinese. That time, there was no denial of a plague's existence and no concealment of cases. There was a citywide campaign to get rid of the rat population. Most importantly, there was no medical scapegoatism (Trauner, 1978). The change in dynamic by the local and national health authorities and the general public blatantly demonstrate how when disease affects a group that is perceived as less than, that community is burned, destroyed, and scapegoated for spreading disease. Whereas, when disease affects a group that is known to be superior, those in power work efficiently to solve the crisis.

### 4.3 Healthcare Discrimination

While there is racism and inequality in health policies and regulations, there is also discrimination in healthcare and treatments. During the aforementioned outbreaks, health discrimination was prevalent in San Francisco, California. In the 19th century, city officials were reluctant to finance health services for the Chinese population even when Chinatown was popularly viewed as “a laboratory of infection”. Left with no help for treatments, Chinese immigrants grouped into associations based upon loyalty to clan (family associations) or place of origin (direct associations) to build their own healthcare system. Chung Wah Kung Saw - now known as Chinese Consolidated Benevolent Association of Chinese Six Companies - created small “hospitals” in Chinatown. Many of these hospitals violated city health codes, but local officials allowed their operation (Trauner, 1978).

As for hospitals outside of Chinatown, Chinese people were often denied admission. An 1881 article from the *San Francisco Chronicle* “No Room for Chinese: They are Denied Admission to the County Hospital” wrote that a Board of Health resolution closed the City and County Hospital to Chinese patients. Instead, they were assigned to a separate building on a 26th Street hospital lot. There were low admission rates of Chinese people to the San Francisco City and County Hospital and to Almshouse. For the San Francisco city and county hospital from 1870 to 1897, less than 0.1 percent of the hospital inpatients were Chinese. The Chinese population at the time in the city was 5 to 11 percent of the total city population. For Almshouse from 1871 to 1886, there were 14,402 admissions, and only 14 admissions were Chinese patients (Trauner, 1978). Figures 5 and 6 (Appendix) show the low numbers of admissions for Chinese patients to San Francisco city and County Hospital and Almshouse respectively.



In 1901, the San Francisco Board of Supervisors appropriated funds for a hospital in Chinatown. However, the city auditor declared the appropriation illegal, and the hospital was never constructed (Trauner, 1978)

Along with access to healthcare, local authorities were hesitant to provide sanitary services within Chinatown. Dr. A.B. Stout, a physician and member of the California Board of Health, testified before a congressional investigating committee in 1877: “The city authorities undertake to clean the city in other parts, but the Chinese are left to take care of themselves and clean their own quarter at their own expense” (Trauner, 1978). The city’s inaction to help in preventative measures for everyone but Chinese people was a targeted act of racism. There were disease outbreaks outside of Chinatown that the city helped to control. Thus, the only reason for this contrast of aid was based solely on race.

Limited access to healthcare, treatments, and sanitation for Asian Americans and immigrants were tactics to further exclude this minority group from main society. Healthcare discrimination remains a prevalent issue with a deep rooted history in its past.

#### *4.4 SARS*

Nearly a century later, modern epidemics still elicit irrational fear. During the severe acute respiratory syndrome (SARS) outbreak from 2002 to 2004, East Asians around the globe experienced stigmatization (Gover et al., 2020). Discourse in the U.S. was the same as hundreds of years before: Chinatown was the epicenter of disease. 14 percent of Americans reported avoiding Asian businesses, and Asian Americans experienced increased threat and anxiety during the SARS epidemic (Tessler et al., 2020). After decades of scientific advances and research in disease transmission, the general population reverts back to primal instincts of fear and scapegoatism to rationalize epidemics.

The Asian community is one of the many minority groups in the U.S. that has been blamed and scapegoated for spreading disease. Asian people were blamed for smallpox, venereal disease, and leprosy in the late 19th century. Asian communities were burned to the ground during the bubonic plague. In addition to being the target of condemnation, Asian people were denied access to treatments and healthcare. In 2003, there was a public fear of Asian Americans (Chen et al., 2020), a precedent that led to an eruption of hate and violence that emerged in the midst of the Covid-19 pandemic.

## **5. COVID-19 and Anti-Asian Racism**

As mentioned before, from the late 19th century to mid 20th century, the yellow peril projected the Western fear of uncivilized, nonwhite Asian invasion and domination. Historical legacies of Whiteness and citizenship led individuals to interpret Asian Americans as foreign and presenting a higher risk of disease transmission (Tessler et al., 2020). These same sentiments dominate the current social atmosphere around the coronavirus pandemic.

### *5.1 FBI Warns an Increase in Hate Crimes*

In March 2020, an intelligence report compiled by the Federal Bureau of Investigation (FBI) Houston office was distributed to local law enforcement agencies across the country (Kim, 2020). The FBI issued a warning that due to Covid-19, there may be an increase in hate crimes against Asian Americans. The organization assumed that a portion of the U.S. public would associate Covid-19 with Chinese and Asian American populations (Tessler et al., 2020). The FBI wrote, “The agency assesses hate crime incidents against Asian Americans likely will surge across the United states...due to the spread of coronavirus disease...[thus] endangering Asian American communities” (Kim, 2020).

Subsequently, what was monitored in the following months matched the FBI's predictions. Stop AAPI (Asian American and Pacific Islander) Hate is a U.S.-based website created in March 2020 to track attacks against Asian Americans (Chen et al, 2020). From March 19th to April 23rd in 2020, there were 1,500 alleged instances of anti-Asian bias. 42% of the reports were from California, and 17% of the reports were from New York. A majority of the attacks took place in diverse metropolitan areas, including New York City, Boston, and Los Angeles (Tessler et al., 2020). More specifically, the New York City Police Department reported a 1,900% increase in anti-Asian sentiment hate crimes in 2020 (Lang, 2021).

There were incidents in 45 states, and 127 Asian Americans filed reports of physical assaults in those four weeks. 70% of coronavirus discrimination against Asian Americans involved verbal harassment, and there were 90 reports of Asian Americans being coughed or spat on. 80% of the self-reported anti-Asian incidents took place outside people's private residences, such as grocery stores, local businesses, and public places (Tessler et al., 2020). By April 28th, 2020, NBC News disclosed that 30% of Americans have personally witnessed someone blaming Asian people for spreading coronavirus (Tessler et al., 2020). Then, by the end of 2020, Stop AAPI Hate reported a total of 2,808 anti-Asian discrimination incidents that year (Lang, 2021).

While these are the statistics collected in the U.S. through the Covid-19 pandemic, there is evidence to suggest that Asian Americans under-report crimes (Tessler et al., 2020). After the Hate Crime Statistics Act of 1990 was passed, the federal government collected data about crimes motivated by race, religion, sexual orientation, and ethnicity. There are two main federal surveys - the FBI's Uniform Crime Report (UCR) and the Bureau of Justice Statistics' (BJS) National Crime Victimization Survey (NCVS). There have been discrepancies between UCR and NCVS numbers due to underreporting of hate crimes to the police (Gover et al., 2020). This

inaccurate representation may be a byproduct of systematic factors. For instance, recent immigrants may lack an understanding of the legal system and the crime reporting process in the U.S. (Tessler et al., 2020).

The stories and numbers of attacks against Asian Americans coincide with each other. Even before the FBI issued a warning, on January 28th, 2020, Vicha Ratanapakdee - an 84 year old Thailand American - was shoved to the ground while taking a morning walk in San Francisco. Two days later, Ratanapakdee died in the hospital. 19 year old Antoine Watson was charged with and pleaded not guilty to murder and elder abuse (Lang, 2021). Watson's lawyer explained that his client had no "knowledge of Mr. Ratanapakdee's race...since his face was fully covered" with a mask and a hat. His lawyer argued that the attack was not racially motivated, but due to "a break in the mental health of a teenager" (Kim et al, 2021).

On March 14th, 2020, a family from Myanmar was attacked in a Sam's Club in Midland, Texas. The perpetrator stabbed three victims, which included a two year old girl and a six year old boy (Gover et al., 2020). Jose Gomez, age 19, was charged with three counts of attempted capital murder and one count of aggravated assault with deadly weapons (Kim, 2020). Gomez attacked the family with acid, an umbrella, and a log (Tessler et al., 2020). An FBI intelligence report by ABC found that Gomez attacked the family because he thought they were "Chinese and infecting people with the coronavirus" (Kim, 2020).

In California, a 64 year old Vietnamese grandmother was assaulted and robbed in San Jose, and a 91 year old man was thrown to the ground in Oakland (Lang, 2021). A myriad of anti-Asian assaults also occurred in New York City during the onset of the Covid-19 pandemic. A 61 year old Filipino man's face was slashed with a box cutter on the subway (Lang, 2021). On February 5th, 2020, a man physically and verbally assaulted an Asian woman wearing a

facemask in a Chinatown subway station. On March 10th that year, a Korean American woman in Midtown Manhattan was grabbed by the hair, shoved, and punched in the face by an assailant. The perpetrator yelled, “You’ve got coronavirus, you Asian (expletive). Where’s your (expletive) mask?” The victim had a dislocated jaw after the altercation. On April 5th, an Asian American woman was doused with acid by a man who snuck behind her as she was taking out the trash. She suffered second degree burns to the body, face, and hands. In late March, a 26 year old Asian American man took the Brooklyn subway, and a man spat in his face. The perpetrator shouted, “You (expletive) Chinese spreading the coronavirus!”, and then proceeded to unzip his jacket and pointed a weapon (Gover et al., 2020).

These instances of hate in correlation with the spread of Covid-19 in the U.S. reveal how some pockets of the population still resort to scapegoatism to justify the start of a pandemic. Although scientific research and information has expanded exponentially since the days of smallpox and the bubonic plague, there is this pattern in disease onslaught, where a minority group is blamed for their identity.

### *5.2 Covid-19 in the Media & the Age of Trumpism*

While Asian Americans were abused and mistreated throughout the country, media coverage of these attacks and the lack thereof did not help. Many of these attacks did not make national news or were downplayed by mainstream media early in the pandemic. U.S. media coverage focused primarily on seafood market hygiene in Wuhan and wild animal consumption as the possible causes for the coronavirus pandemic. Memes and jokes about bats and China circulated on social media (Tessler et al., 2020). Natural language processing analyses of social media platforms tracked an increase in sinophobic slurs from October 2019 to March 2020 (Chen

et al., 2020). Asian American actor Daniel Dae Kim expressed his grief for the attacks against Asian elders and his frustration towards mainstream news networks:

“It was a very visceral response. I got very angry because I thought, this is now a year of these kinds of things going on. They’re attacking our most vulnerable population, and no one in the mainstream media outside of the Asian American echo chamber is picking up this story.” (Kim et al., 2021)

Kim highlighted how stories of Asian hate crimes only existed within the Asian American echo chamber during the onset of the pandemic. Contrastingly, the mainstream media was focused on stories that encompassed a separate echo chamber - former President Donald J. Trump and his supporters.

During Donald Trump’s candidacy, there was high anti-Asian and anti-immigrant messaging through the 2016 election. The discriminatory policies that followed in his first year in office led to increased feelings of panethnic linked fate among Asian Americans (Le et al., 2020). As the coronavirus outbreak emerged, President Trump and other political leaders used inflammatory language when discussing the disease. On Twitter from March 16th to 18th, 2020 and during the March 19th White House press conference, President Trump referred to the coronavirus as the “Chinese virus” and “China virus”. The president justified his rhetoric, saying “it’s from China. That’s why. It comes from China. I want to be accurate.” Former Secretary of State Mike Pompeo called Covid-19 the “Wuhan virus”. A White House Staffer used the term “kung flu”. Senator John Cornyn from Texas spoke at a press conference on March 18th and revealed that China was to blame for the Covid-19 spread because they are a “culture where people eat bats and snakes and dogs and things like that”. Later, on April 17th, President Trump posted a tweet that criticized House Speaker Nancy Pelosi for making a February trip to San

Francisco's Chinatown in support of Asian American owned businesses, and he emphasized that he had "closed the BORDER TO CHINA". This failure to distinguish the residents of San Francisco's Chinatown and foreign nationals from China reinforces the idea of "enduring foreignness" for Asian Americans (Gover et al., 2020).

Community leader and Oakland native Connie Wun Ph.D. observed that the number of anti-Asian incidents grew dramatically with the pandemic in correlation to President Trump's anti-Asian rhetoric (Kim et al., 2021). These observations fit with a research study conducted by Professor Russell Jeung of the Asian American Studies department at San Francisco State University and co-founder of Stop AAPI Hate. Professor Jeung found that the number of "hate incidents" reported in the media increased in response to xenophobic language by public officials. The timing of a sharp rise in hate incidents coincided with the president's use of the phrase "Chinese virus" (Gover et al., 2020).

A separate research study on President Trump's rhetoric examined how negative rhetoric toward one Asian American nationality group often leads to an increase in hate crimes against Asian Americans of a different nationality. The researchers - Danvy Le, Maneesh Arora, and Christopher Stout - hypothesized that President Trump's attacks on Asian Americans (in combination with the election) may heighten perceptions of discrimination among Asian Americans and activate panethnic linked fate. Their results concluded that Asian Americans who were asked after the 2016 election and a year after the election had significantly higher levels of panethnic linked fate than those asked one week before the election. Respondents who expressed increased feelings of panethnic linked fate noted the impact of President Trump's incendiary hate speech. One respondent shared, "I feel us Asians and other minorities have to stick together and

be loyal to each other in the light of hatred perpetuated by this new President. I feel only us Asians can truly understand each other and what we go through” (Le et al., 2020).

Language portrayed in the media and spoken by political leaders has a profound impact on the way humans interact with one another. Unfortunately, these outlets fostered and heightened anti-Asian sentiment across the nation. The repercussions for the spread of this socially mediated “secondary contagion” proved to have a more direct impact on young Asian Americans growing up in this day and age.

### *5.3 Bullying and Mental Health for Asian Americans*

Since the beginning of the coronavirus pandemic, there has been an increase in bullying incidents among Asian American youth. Stories include high school boys following a 14 year old student back home in Dallas, Texas. The boys coughed on him and shouted, “Ching chong! You have Chinese virus!” A 17 year old received social media messages that their “insides are full of (expletive) bats” and they should kill themselves because they are “dirty (expletive) dog eaters”. An 18 year old who went grocery shopping was called “chink” and told to go back to where they came from (Wang, 2020).

Stop AAPI Hate Youth Campaign, a high school internship program, tracked the numbers of bullying incidents through the beginning phases of the pandemic. In this campaign, 87 Asian American high school students interviewed around 1,000 Asian American young adults in the summer of 2020. 8 out of every 10 respondents expressed anger over the epidemic of hate against Asian people. There were 341 reports of racism and discrimination against Asian American youths nationally, and adults present in nearly half of these cases almost never intervened. In reaction to President Trump’s use of “China virus” and “kung flu”, half of those interviewed expressed sadness and depression about the situation, and a quarter of those



interviewed were scared for themselves and their families. In addition, the California Healthy Kids Survey data revealed that in California public high schools, AAPI students are the racial group that is most likely to be bullied (Wang, 2020).

The repercussions of bullying detrimentally affect the mental wellbeing of others. Rebecca Wu, a junior at Alhambra High School explained that “[f]ear is really damaging to a person’s self-esteem and sense of identity. The rise in anxiety about you and your family in public can lead to many other concerning mental health issues. It also prevents you from speaking out” (Wang, 2020). There has been a historical precedent that foreshadows Covid-19-related racial discrimination and its harmful effects on Asian American health. When Japanese Americans were directed into internment camps in WWII, this population experienced double the rate of suicide and cardiovascular disease compared to their noninterned counterparts (Chen et al., 2020). Since the emergence of Covid-19, there has been a 22% increase in people accessing the Mental Health America anxiety screening tool and a 39% increase in Asian American respondents. Therefore, there is a clear correlation between racialized victimization and poor mental health (Gover et al., 2020).

As Covid-19 spread through the country, there was a surge in racially motivated hate crimes involving physical violence and verbal harassment (Gover et al., 2020). While the coronavirus disease has shifted the dynamics of daily life, the pandemic has revealed social structures and prejudices that ostracize Asian people in American society. Patterns of scapegoatism and foreignness on Asian Americans from the past permeate into the present day. The scientific community has taken grand leaps to create vaccines and treatments for this deadly disease. Yet, other sectors must take action to address the anti-Asian hate speech and hate crimes that have been showcased throughout the Covid-19 pandemic.

## 6. Solutions and Future Directions

Solving centuries-long racial bias and inequities require systematic and individualistic shifts in American society. Because Asian discrimination is deeprooted in American history and disease history, intentional steps must be taken to detangle this issue. U.S. political leaders must be held accountable for the policies they implement and the language they deliver. Further examination into Asian people within the healthcare and education systems is essential for determining the gaps that need to be filled.

### *6.1 Federal, State, and Local Responses*

Federal, state, and local governments have taken some initiative to combat the rise in Asian hate crimes. On the last week of March 2020, Congresswoman Grace Meng (D-NY) introduced a resolution calling for public officials to condemn anti-Asian discrimination (Gover et al., 2020). The resolution passed in the House, but was proved partisan due to 164 Republicans in opposition. Congresswoman Meng recalled receiving voicemails with the phrases “karate kid virus” and “Chinese virus” when she was advocating for this resolution:

“There was just so much hate, and even though I and so many Asian Americans were born and raised in the United States of America, there are always instances where we are made to feel that we are foreigners, that we are not good enough in some people’s eyes to be American.” (Kim et al., 2021)

Despite some pushback, the resolution passed and other federal and national organizations began to take action. Federal law enforcement agencies planned to address the pandemic-related hate crimes through data collection, documentation, and investigation (Gover et al., 2020). Chinese for Affirmative Action, Asian Pacific Policy, and the Planning Council created a platform where individuals can record incidents of racism and coronavirus discrimination (Tessler et al., 2020).

On April 2nd, 2020, the National Council on Asian Pacific Americans and the Center for American Progress submitted a joint letter calling on mayors and governors to help. The organizations expressed, “While many elected officials have denounced this racism, we believe everyone should be united in overcoming Covid-19 and rejecting hate” (Kim, 2020).

Although there were efforts to combat the rise in hate, some of the top government institutions, including the Department of Justice (DOJ) and the Centers for Disease Control and Prevention (CDC) have done very little in action. This lack of action contrasts with these departments’ reactions to past crises. The CDC respond quickly to prevent racialized violence during the 2003 SARS outbreak, and the DOJ acted quickly after the 9/11 terrorist attacks. Subsequently, in May 2020, twelve democratic senators wrote a letter to the U.S. Commission on Civil Rights, requesting official guidance on a federal response. The senators wrote, “There has not been a concerted effort from federal agencies to prevent and address anti-Asian sentiment related to the Covid-19 pandemic” (Gover et al., 2020).

State and local political leaders also took steps to address the anti-Asian hate crimes. New York Attorney General Letitia James established a state hotline for reporting hate incidents and hate crimes. On February 13th, 2020, Los Angeles county officials held a news conference denouncing racist incidents against the Asian community (Gover et al., 2020). Many cities established contacts for where to report hate crimes. Citizens of Los Angeles County could report to the 221 hotline, Chicago residents could report to the police, and people in New York City could report to the Attorney General’s office hotline (Chen et al., 2020).

While some political leaders have taken steps to react and document after the hate crimes have occurred, more needs to be done, and this includes preventative measures to curb hate speech and physical altercations.

## *6.2 Nomenclature is Important*

When coronavirus first made major news headlines, some media outlets and public officials used terminology such as “Chinese virus” and “kung flu” in place of the scientifically accurate name Covid-19. As explained in the previous section, the use of these slang terms coincide with the number of hate crimes and verbal harassments against Asian Americans.

Because speech has a profound impact on how the public perceives and reacts to information, naming the disease is important. A publication by the World Health Organization (WHO) “Best Practices for the Naming of New Human Diseases” advises leaders and officials to avoid using language that offends cultural, social, national, regional, professional, and ethnic groups. Dr. Keiji Fukuda, the WHO Assistant Director and General for Health Security warns that inadequate disease names create significant consequences in the backlash against religious and ethnic groups (Gover et al., 2020). Hence, when the 2009 swine flu pandemic happened, WHO avoided naming the disease “Spanish flu”, “Hong Kong flu”, or “Asian flu”. Instead, the WHO shifted from “swine flu” to “H1N1” to “A (H1N1 S-O.I.V.)” (swine-origin influenza virus) to “Pandemic (H1N1) 2009” (Mcneil, 2009). This was all in an attempt to steer blame away from any specific group of people.

The number of hate crimes could have been less if top U.S. officials refrained from using incendiary speech when talking about the virus. Although turning back the clock is not an option, future leaders must take what occurred during the Covid-19 pandemic and apply this knowledge to possible pandemics in the future. One of these big takeaways is to call the disease for what it is, by using its scientific name. This preventative measure could reduce the amount of scapegoatism, hate, and blame directed at a certain group of people.

### *6.3 Health and Research*

While the political climate needs to evolve, the scientific and health community also should consider new ways of incorporating vulnerable populations to strive for greater racial equity. This includes more efforts to diversify health education, research studies, and mental health access.

For health education, the U.S. medical school diversity statistics from 2016 reveal that the student population is composed of 0.3% Native American students, 6.3% Latino students, 7.1% Black students, 21.3% Asian American students, and 51.3% White students. Black American physicians are more likely to practice primary care and work in medically underserved areas. While Black people make up 13% of the U.S. population, Black American only represent 4% of physicians. Therefore, Black grade school students have minimal exposure to physicians who look like them (Blackstock & Choo, 2020).

To create a more equal health system, Asian American healthcare workers can work in solidarity with Black Americans to fight against institutionalized racism and White supremacy. This includes calling out narratives that reinforce the model minority myth, refusing to be used in statistics that flaunt “diversity” gains, and nominating Black peers and colleagues for job positions, awards, and committees. Speaking up and fighting against structural racism across the healthcare system helps advocate for a diverse workforce. Institutions should dismantle institutional policies that might be functioning to effectively pit one race against each other (Blackstock & Choo, 2020). More specifically for Asian Americans, institutions should embrace representation diversity in leadership positions in the medical field and beyond. Although Asian Americans are admitted into medical school, not many are in leadership roles (Choo, 2021).

In addition to healthcare equity, the scientific community should embrace more diverse clinical trials in research studies. Recently, in vaccine development, there was a lack of diversity during phase 1 clinical trials for the Moderna coronavirus vaccine. Diversity inclusion is important in clinical trials as this will increase who wants to receive the vaccine (Choo, 2021). Researchers should increase sampling of different racial groups as well as a range of Asian ethnic groups (Chen et al., 2020). As mentioned before, panethnic linked fate can homogenize the Asian community and discount the sheer diversity of subgroups within the Asian population. Therefore, including different Asian ethnicities can help prevent this phenomenon in research studies.

Health institutions should also emphasize mental health treatments and resources. Racial discrimination can lead to reduced access to health services and discourage help seeking. Asian Americans are among the lowest utilizers of mental health services. This is driven by factors, such as the model minority stereotype and cultural values that deemphasize psychological explanations and solutions. Thus, clinicians and researchers should continue to develop interventions for the negative health effects of racism (Chen et al., 2020). Efforts to destigmatize the discussion around mental health are encouraged as well.

#### *6.4 Asian American Education*

Another route to address mental health encompasses preventative measures to lessen bullying incidents among Asian American youth. Student researchers have shared policy recommendations to curb anti-Asian racism in schools, which include anti-bullying training for teachers and administrators, anonymous reporting sites on social media, affinity groups and coalitions to empower Asian students on campuses, and restorative justice to foster communication and empathy between victims and perpetrators (Wang, 2020). In particular,

training for teachers and administrators can help them be better models and mediators for their students. Professor Russell Jeung explained how sometimes teachers do not recognize racial stigmatization and thus do not intervene:

“Asian Americans are targeted for their racial differences and linguistic or immigration status differences. Part of this is because teachers don’t always recognize when Asian Americans are being bullied and stigmatized. They may not acknowledge that certain gestures, like pulling your eyes slanted can be offensive.” (Wang, 2020)

While training for teachers and administrators is necessary, an evolution in the education system will help inform the next generation of American citizens. Amanda Young, a senior at Campolindo High School in the Bay Area city Moraga, noted that Asian American history in California public schools is rudimentary. Yet, California is the state that has the largest Asian population in the country. Young admits, “For the most part, the Chinese Exclusion Act and the Japanese internment camps were the extent of our lessons.” Therefore, student researchers have also been advocating for ethnic studies courses in secondary school curricula so that young people can learn about U.S. history through the lens of communities of color. Through these courses, students can develop a deeper understanding of the roots and ramifications of racist policies and attitudes (Wang, 2020).

Solutions to racial discrimination are multifaceted and require effort from all sectors within society to see positive advancements. While some of the pathways require institutional and systemic changes, there are also individual approaches that help create a more accepting environment for minority groups. These steps begin with education and learning from the past so that those lessons can be applied to a brighter future.

Asian Americans have faced racial discrimination from the past to present day. These patterns have followed through political history as well as disease outbreaks through time. Significant actions have been taken by members of American society to curb Asian hate and harassment. Currently, Asian Americans make up 5.6% of the U.S. population and are the fastest growing racial group in the U.S., with a 7.2% population increase from 2001 to 2015. Asian Americans are projected to become the largest immigrant group by 2055 (Chen et al., 2020). As this minority group becomes more prevalent in modern society, steps should be taken to implement and include Asian Americans in the discourse. Professor Jeung summarizes the need for people coming together to combat racist attacks:

“We’re calling not necessarily for more punitive measures, but restorative justice models that break the cycle of violence, ethnic studies to teach people about racial solidarity, community mediation efforts to not only hold people accountable, but to work together to resolve issues.” (Lang, 2021)

Only when everyone can come together, recognize the current issue at hand, and work towards a solution, will this country be able to make grand strides in creating a more inclusive and equitable future for all Americans.



## Appendix

Table 1  
*The Model Minority Versus the Underclass*

The Model Minority	The Underclass
Diligence	Laziness
Discipline	Lack of discipline
Strong family values	Weak family values
Respect for authority	Criminal inclinations
Thriftiness	Inability to defer gratification
Morality	Deviance
Self-sufficiency	Dependency
Respect for education	Tendency to drop out

Figure 1. Model Minority characteristics compared with Underclass characteristics (Kim, 1999)

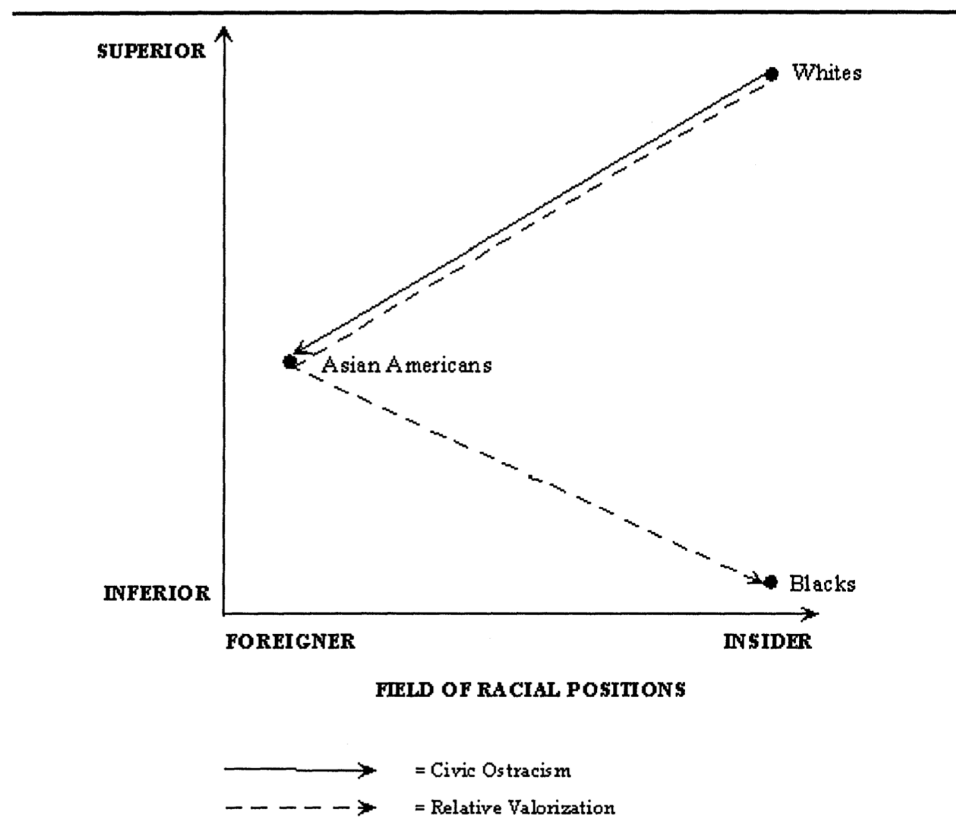


Figure 1. Racial triangulation.

Figure 2. Racial Triangulation plot (Kim, 1999)



*San Francisco's "Three Grapes"—malaria, smallpox, and leprosy—stalked the city throughout the '70's and '80's, and health officials incorrectly traced them to Chinatown's "vapors" and crowded conditions.*

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Figure 3. Illustration of Chinatown in the 1870's and 1880's (Trauner, 1978)



Figure 4. Illustration of health officials destroying Chinatown (Trauner, 1978)

ADMISSIONS TO SAN FRANCISCO CITY AND COUNTY HOSPITAL, 1870-1897

YEAR	TOTAL S. F. POPULATION <sup>1</sup>	CHINESE POPULATION <sup>2</sup>	% CHINESE IN S. F. POPULATION	HOSPITAL ADMISSIONS <sup>3</sup>	"YELLOW" PATIENTS <sup>4</sup>		NATIVITY	
					NO. ADMITTED	NO. DEATHS	CHINA	JAPAN
1870	170,250	8,600	5.0%	2,942	25	10	9	2
1871	172,750	9,000	5.2%	2,737	34	11	34	—
1872	178,276	10,000	5.6%	2,388	11	3	11	—
1873	188,323	12,000	6.4%	2,863	9	1	9	—
1874	200,770	14,500	7.0%	3,231	8	1	6	2
1875	230,132	19,000	8.2%	3,921	21	1	11	1
1876	272,345	30,000	11.0%	3,376	4	4	4	—
1877	300,000	30,000	10.0%	3,012	8	0	1	5
1878	300,000	30,000	10.0%	3,007	9	6	6	2
1879	300,000	30,000	10.0%	3,174	18	1	8	10
1880	305,000	22,000	7.2%	2,955	21	3	10	11
1881	234,520	22,000	9.4%	3,204	27	3	10	12
1882	234,520	22,000	9.4%	3,151	17	2	6	8
1883	250,000	22,000	8.8%	3,002	12	1	1	7
1884	270,000	22,000	8.1%	3,288	20	2	5	13
1885	270,000	22,000	8.1%	3,191	29	4	7	22
1886	280,000	22,000	7.9%	3,140	39	6	3	36
1887	300,000	22,000	7.3%	3,128	31	4	8	23
1888	330,000	30,000	9.0%	2,914	20	4	8	12
1889	330,000	30,000	9.0%	3,022	*28	5	10	20
1890	300,000	30,000	10.0%	3,466	*34	6	1	41
1891	330,000	18,000	5.5%	3,468	*19	6	0	30
1892	330,000	18,000	5.5%	4,393	unavailable		2	62
1893	330,000	18,000	5.5%	3,614	—	7	0	36
1894	330,000	18,000	5.5%	3,782	—	4	1	39
1895	330,000	18,000	5.5%	2,680	—	6	0	14
1896	360,000	18,000	5.0%	3,422	—	5	7	32
1897	360,000	18,000	5.0%	3,583	—	10	15	28

<sup>1</sup> *Municipal Reports*, 1898, p. 200.

<sup>2</sup> *Ibid.*, p. 201.

<sup>3</sup> *Municipal Reports*, 1899, p. 626. Statistics on admissions exclude birth figures.

<sup>4</sup> Compiled from annual *Municipal Reports*, listings of admissions to City & County Hospital. The listings include a breakdown by race: "white," "yellow," and "other."

<sup>5</sup> *Ibid.*

\*Note: Discrepancy between "yellow patients" admitted and total based on nativity. No explanation given in *Municipal Reports*.

Figure 5. Admission rates to San Francisco City and County Hospital from 1870 to 1897  
(Trauner, 1978)

ADMISSIONS TO ALMSHOUSE, 1871-1886

Year	Total Patients Under Care <sup>1</sup>	Chinese Patients Under Care <sup>2</sup>
1871	626	2
1872	628	0
1873	603	1
1874	713	2
1875	832	0
1876	763	2
1877	960	4
1878	913	1
1879	938	1
1880	1,066	0
1881	1,103	0
1882	1,045	1
1883	1,008	0
1884	1,060	0
1885	1,110	0
1886	1,034	0

<sup>1</sup> Compiled from annual *Municipal Reports*, listings of admissions to Alms house.

<sup>2</sup> *Ibid.* Patients not separated according to race in listings of admissions. Figures based on country of birth.

Figure 6. Admission rates to Alms house from 1871 to 1866 (Trauner, 1978)

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