





COVID-19: PUBLIC COMMUNICATIONS

Covid-19 and the rise of racism

Melanie Coates foundation year 2 doctor in emergency medicine

North Middlesex University Hospital, London N18 1QX, UK

Over the past few months covid-19 has dramatically changed how we live. The media and the government have rightly been concerned with the global health and economic implications of this pandemic, but they have neglected to acknowledge the simultaneous spread of prejudice and xenophobia.

Fear leads to the desire to understand and control situations. From this we see a surge of prejudice and discrimination, prescribing an "otherness" to disease to feel protected and ascribing blame to justify prejudicial rhetoric. This stigma has recurred throughout history: Jewish persecution during the Black Death, LGBTQ communities during the rise of HIV, and people of west African descent during the Ebola outbreak. This time is no exception, with many examples of racist abuse reported.

Jonathan Mok, a Singaporean student, was attacked on Oxford Street in London.² The owner of a Chinese takeaway was spat on by a customer.³ An Nguyen, a Vietnamese artist, was disinvited from the Affordable Arts Fair by an exhibitor as she would "create hesitation on the part of the audience to enter the exhibition space." An NHS nurse, Reizel Quaichon, was physically and verbally assaulted on her way to a night shift in Brighton.⁵ Despite this, the government and media have done little to allay fears and prevent prejudices from spreading and escalating.

In this torrent of fear and anxiety, we cannot afford to isolate people even more through stigma and xenophobia; we each have a responsibility to support each other and advocate for a better society. Those with the loudest voice—the government and media—must speak out to condemn these actions. They have a duty to educate the public, protect the vulnerable, and hold people accountable for prejudice and discrimination. By staying silent we let xenophobic narratives—specifically, anti-Asian sentiment—and racist attacks damage our society, the repercussions of which will likely persist beyond the pandemic.

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Full response at: https://www.bmj.com/content/368/bmj.m919/rr-0.

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