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Coronavirus threat escalates fears — and bigotry

By Ashley Abramson February 11, 2020

Psychologists are pointing to their research to help quell anxiety about a possible pandemic.

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The coronavirus gives rise to more than flu-like, potentially lethal symptoms: It's also stoking people's anxieties and even xenophobia. Psychologists are relying on research on both anxiety and racism to help people cope.

The risk of contracting the virus is low at this time for most people in most parts of the world — the threat of contracting influenza (https://www.washingtonpost.com/health/time-for-a-reality-check-america-the-flu-is-a-much-bigger-threat-than-coronavirus-for-now/2020/01/31/46a15166-4444-11ea-b5fc-eefa848cde99_story.html) remains far higher. Yet some psychologists are seeing an out-of-proportion hypervigilance in response to the coronavirus, which causes a potentially deadly respiratory illness.

Robin Gurwitch, PhD (https://psychiatry.duke.edu/gurwitch-robin), a faculty member in the Duke University department of psychiatry and behavioral sciences, says the ambiguity of the coronavirus might be one reason people are experiencing more anxiety.

"There are thousands of people that pass away every year from influenza. But I think because we get a flu shot as protection, there's less anxiety about it," she says. "Coronavirus is a novel virus, and there's not a shot, which makes it a little more frightening."

People's fears are also being fueled by a lack of information about coronavirus, says psychologist Baruch Fischhoff, PhD (https://www.cmu.edu/epp/people/faculty/baruch-fischhoff.html), of the Institute for



Politics and Strategy, and department of engineering and public policy at Carnegie Mellon University.

Especially during the early stages of pandemics, there's typically limited information as scientists continue to research the organism and its health implications, says Fischhoff. Without reliable information, people may behave in ways that don't align with the risk. For example, the Centers for Disease Control and Prevention (CDC) doesn't currently recommend (https://www.cdc.gov/media/releases/2020/t0130-novel-coronavirus-update-telebriefing.html) using surgical masks to prevent the spread of coronavirus, but lack of clear information and anxiety has caused some Americans to purchase and wear masks anyway.

"My advice is to identify a few trustworthy sources, such as CDC, the World Health Organization and nonsensational news media, and ignore everything else," Fischhoff says.

And some media are sensationalizing the virus by using enormous fonts or accompanying articles with frightening photos, which can exacerbate people's anxiety, says psychologist Roxane Cohen Silver, PhD (https://faculty.sites.uci.edu/rsilver/), a professor of psychological science, medicine and public health at the University of California-Irvine. "It can be a tough cycle to extricate oneself from."

In addition to encouraging his patients to stay connected with credible sources of information, Silicon Valley-based clinical psychologist Ali Mattu, PhD (http://alimattu.com/), is telling people to align their prevention practices with official recommendations. For example, avoiding going out in public to a restaurant or the park may not help — instead, this avoidance can spike anxiety.

"If you start changing your routine when there hasn't been a recommendation to do that, it can make the anxiety stickier and harder to shake," he says.

Research also shows it's important for psychologists to help people differentiate between possibility and probability, Gurwich says. While it's possible someone could become infected with the coronavirus, it's not currently probable for most people in the United States. "That distinction can help reduce people's anxiety," she says.

Meanwhile, psychologists are also concerned about the connection between coronavirus-related hostility and racism (https://www.theguardian.com/commentisfree/2020/jan/27/coronavirus-panic-uk-hostile-environment-east-asians). According to Sherry Wang, PhD

(https://www.scu.edu/ecp/faculty/counselingfaculty/sherry-wang-phd/wang.html), assistant professor of counseling psychology at Santa Clara University, it's common for people to racialize infectious disease against individuals of color. During the Ebola virus outbreak (https://www.bbc.com/news/blogs-echochambers-29714657), the racial profiling and overt racism against black people was described as "Ebola racism," facilitating discrimination, racial profiling and anti-foreigner sentiments based on skin color.

Wang says psychologists are already seeing racist and xenophobic assumptions and behaviors toward Asian people who appear Chinese — for example, there are reports (https://www.latimes.com/business/technology/story/2020-02-06/asian-uber-drivers-passengers-racism-amid-coronavirus-fears) of Uber and Lyft drivers refusing to pick up Asian riders.

Racism on its own has been shown to have negative psychological and health outcomes, and Wang says she worries if racism surrounding a pandemic will keep people from going to the doctor, delaying the care they need if they're sick.

To combat this racism, Wang says it's important to consider the real risk factors associated with the coronavirus. "The initial spread of the disease is linked to a geographical location and not to a race or national origin," she says.

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