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Religion, ‘the Chinese virus,’ and perceptions of Asian Americans as a moral and medical menace

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The early months of 2020 saw several acts of vandalism targeting Asian Buddhist communities across North America. At Thien Hau Buddhist Temple in Austin, Texas, vandals broke into the temple yard, destroyed furniture, and damaged stone statues, leaving one headless (Hall 2020). At Wat Lao Santitham in Fort Smith, Arkansas, a vandal destroyed three statues of Buddha (Saccente 2020). And in Montreal, vandals shattered statues and religious objects at two Buddhist temples. One of the Montreal temples, Chua Quan Am, had already suffered a sledgehammer attack on its statues a few weeks earlier (CBC News 2020). The destruction at these Buddhist temples drew media attention in part because in the United States and Canada, anti-Buddhist attacks happen less frequently than Islamophobic attacks on mosques and anti-Semitic attacks on synagogues. The timing of these attacks may offer some explanation for their occurrence: the vandalism coincided with the emergence of SARS-CoV-2, the novel coronavirus that first became publicly known in China. For this reason, the assault on Buddhist temples—along with other acts of hostility directed toward people of Asian descent—drew many people, including the members of the Buddhist communities whose temples were vandalized, to see these attacks as linked to the coronavirus and to the widespread backlash against Asian people, who were being blamed for the global pandemic.

These acts of temple vandalism were a few of several hundred hate incidents that targeted Asian Americans during the COVID-19 pandemic, a public health crisis for which Chinese Americans, and Asian Americans more broadly, have been scapegoated. But while the precipitous spike in anti-Asian discrimination and harassment caught some people by surprise, the coronavirus laid bare what has in fact existed for centuries in the United States and Europe: the belief that Asian people pose a moral and medical threat to white Christian society. This chapter puts anti-Asian hate during the COVID-19 pandemic into a broader context and argues that contemporary fear of Asian people as a ‘yellow peril’ draws on longstanding ideas about race, religion, and disease. To be sure, the precise way that race, religion, and disease operate together to animate antagonism toward Asian people is highly dynamic and culturally and historically specific. My point, however, is to identify critical continuities that link the anti-Asian
hate of the present with that of the past and to illuminate how the resilience of yellow peril rhetoric resembles how a virus survives: by manifesting itself anew in response to changing circumstances.

The yellow peril and the history of religion, race, and health in the United States

The perception of Asia and Asian people as a medical and moral menace is deep-rooted in the European American imagination. Since ancient times, Europeans have constructed East and West in opposition to one another, with ideas about the environment, character, and human physique contributing to notions of fundamental differences between Europeans and Asians. For example, Hippocrates, the Greek ‘father of medicine,’ believed that Asians differed from Europeans ‘in every respect,’ in part due to their location in a region with rich harvests. The climate caused Asians to be indolent, debauched, and inclined toward despotism, he argued, and compared to Europeans, they were less energetic and appeared afflicted with jaundice (Okihiro 2010).

The Orientalist idea that Asia is Europe’s weak and wicked opposite proved durable throughout the centuries, finding new expression as it intersected with geopolitical, social, religious, and medical developments. By the nineteenth century, Europeans described China as ‘the sick man’ of Asia, a name that articulated the Western critique of China as a particularly uncivilized and unsanitary country. During this period, Europeans blamed China for being the ‘original home of the plague’ and the ‘cradle of smallpox.’ The complex overlap of religion and health reinforced notions of Asian inferiority, immorality, and epidemiological threat, as the idea that China was ‘the cradle of smallpox’ relied on missionary accounts and converged with interests in proselytization and beliefs that smallpox was divine punishment for human sin (Heinrich 2008).

In the United States, immigration policy was an arena where yellow peril discourses about moral and medical threats merged, producing what Alan Kraut called ‘medical nativism’ (Kraut 1995). American immigration laws in the late nineteenth and early twentieth centuries prioritized white, Christian, able-bodied people and excluded those who did not adhere to these norms. Thus, due to ideas about race, religion, and health, Chinese immigrants were the first group that federal laws targeted for exclusion. Anti-Chinese activists emphasized that Chinese people were heathens who threatened Protestant ascendancy and racial pollutants who contaminated the racial purity of the nation. Moreover, they argued that the Chinese were dirty and disease-ridden (Lew-Williams 2018). Supporting their claims were nativist physicians and public health experts who produced studies such as ‘Chinese Immigration and the Physiological Causes of the Decay of the Nation,’ in which they blamed Chinese people for spreading smallpox and leprosy (Molina 2006).

Fear of Chinese contagion shaped the lives of immigrants who, as merchants and students, were still allowed to migrate to the United States between 1882 and 1943, the years when Chinese exclusion was in effect. Considering Chinese immigrants a danger to public health, US Public Health Service officials conducted extensive health examinations of newly arrived Chinese immigrants, thus enforcing what Nayan Shah has described as ‘medical borders’ (Shah 2001). They searched for signs of mental illness, contagious diseases, and, in particular, parasites commonly associated with China. Although parasites such as hookworms and roundworms were treatable and did not pose serious threats to the American population, having them was grounds for detention. Chinese leaders considered these medical exams and detentions discriminatory and protested accordingly (Lee 2003). Angry Chinese immigrants
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detained at Angel Island Immigration Center even scratched poetry on the walls to express their rage at the unjust scrutiny of their bodies:

I thoroughly hate the barbarians because they do not respect justice. 
They continually promulgate harsh laws to show off their prowess. 
They oppress the overseas Chinese and also violate treaties. 
They examine for hookworms and practice hundreds of despotic acts

(‘Angel Island Immigration Station Poetry’ n.d.)

Beyond the immigration station, there were other efforts to contain Chinese residents of the US and the harm that they could bring to American health and virtue. For one, Chinese immigrants found themselves confined to Chinatowns; San Francisco’s Chinatown was, as historian Charlotte Brooks argued, ‘the first segregated neighborhood in America’ (Brooks 2009). Public health officials often focused their attention on Chinatowns, which they scrutinized as centres of disease and depravity. Moreover, they blamed the neighbourhood’s residents for the poor sanitary conditions, despite the fact that the Chinese immigrants did not own the buildings nor the land and had limited political or social power to push for structural improvements (Molina 2006).

Fears of contagious disease intensified efforts to contain Chinese immigrants. In 1903, for example, an outbreak of the bubonic plague in San Francisco prompted city officials to quarantine Chinese immigrants. Federal courts intervened, declaring the quarantine unconstitutional. The outbreak and quarantine had far-reaching consequences, as public health officials in San Francisco contacted public health officials in Los Angeles, where there ensued a vigorous effort to find ‘Chinamen affected with contagious diseases.’ City officials investigated both Chinese and non-Chinese cases of potential plague, but they only publicly discussed the Chinese cases, reinforcing the view that Chinese immigrants were the source of contagion. Ultimately, health officials did not find any proof of the bubonic plague in Los Angeles, but the damage to the reputation of Chinatown and its residents had already been done (Molina 2006).

Religion continued to shape how white Americans enacted these discriminatory public health measures. After a fire destroyed parts of the city’s Chinatown in 1887, the Board of Health Commissioners of Los Angeles forcibly relocated its residents, and the city’s chief health officer posted signs ‘ordering the heathens to remove’ themselves (Molina 2006). The use of ‘heathens’ as interchangeable with ‘Chinese’ reveals how city health officials reinforced the idea that Chinese immigrants imperiled the religious and racial order of a white Christian nation, in addition to its health.

Importantly, Christian beliefs about the universal potential for salvation shaped perceptions of Chinese immigrants as diseased and depraved, but also projects of moral reform, civilizational uplift, and public health. In nineteenth-century San Francisco, for example, many white Americans viewed Chinese women as prostitutes who spread syphilis to the broader population. While some physicians believed that Chinese women were incapable of improvement, white Presbyterian female missionaries embraced a more optimistic view of the Chinese and endeavoured to teach married Chinese women about the respectable domestic norms of middle-class Christian families. By reforming women whom they deemed backward and
uncivilized, these Presbyterian missionaries aimed to neutralize the moral and medical threat that they believed Chinese residents posed to the rest of American society (Shah 2001).

**The yellow peril and the COVID-19 pandemic**

During the 2020 COVID-19 pandemic, Asian Americans found themselves once again contending with yellow peril rhetoric that associated them with disease. SARS-CoV-2, the coronavirus that causes the disease COVID-19, became linked in the popular imagination with Wuhan, China, where the virus was first discovered and the first outbreaks developed. The World Health Organization and the Center for Disease Control advised against names for the virus that associated it with a specific place or group of people, in order to avoid stigmatization and backlash (Itkowitz 2020). Nonetheless, American politicians in March 2020 resisted those guidelines: Secretary of State Mike Pompeo used the term ‘Wuhan virus’ and President Donald Trump used the term ‘Chinese virus’ (Rogers 2020; Bloomberg 2020).

Coinciding with this heated rhetoric was a documented surge in attacks against Asian Americans. In the eight-week period after Pompeo used the term ‘Wuhan Flu,’ American news media reported on over 763 unique incidents of anti-Asian racism and discrimination (Borja et al. 2020). In its first month, the Stop AAPI Hate Reporting Center, which created a hate incident reporting system in March 2020, received approximately 1,500 reports of coronavirus-related hate incidents targeting Asian Americans of all ethnicities and across the country, with twice as many reports coming from women as from men. These incidents included harassment at grocery stores, discrimination in the workplace, and refusal of service at businesses (Jeung and Nham 2020). In addition, Asian American businesses reported large decreases in business—approximately 18 per cent—due to customer fears about exposure to COVID-19 in Asian-owned establishments and Asian-dominated ethnic enclaves (Jeung and Gowing 2020).

The association of COVID-19 with Asian people produced particularly vicious acts of hate. For example, only four days after Trump used the phrase ‘Chinese virus,’ a Burmese American man shopping in Texas was attacked by a man who slashed him and his two young sons across the face. According to the FBI, the stabber had attempted to kill the family ‘because he thought the family was Chinese and infecting people with the coronavirus.’ The vicious attack prompted the FBI to raise the alarm about increased hate incidents targeting Asian Americans because of ‘the assumption that a portion of the US public will associate COVID-19 with China and Asian American populations’ (CBS7 News 2020).

In contrast to the anti-Asian hate that characterized previous pandemics and crises, Asian Americans in 2020 were comparatively organized and well-resourced. Alarmed by the resurgence of yellow peril discourses and the reports of harassment, discrimination, and violence, Asian Americans responded creatively and forcefully. Asian American politicians warned against racist rhetoric and urged their colleagues not to use the stigmatizing term ‘Chinese virus’ (Stevens 2020). In the House of Representatives, for example, the Taiwanese American Congresswoman Grace Meng, from Queens, New York, introduced a resolution that condemned anti-Asian racism in all its forms and urged law enforcement to document and investigate hate crimes against Asian Americans.

**Religious communities resisting COVID-related racism**

Religious communities were active in resisting and organizing against COVID-related racism. For example, Asian American Christian leaders drew on their faith to address the moral crisis of anti-Asian hatred. In March 2020, the Asian American Christian Collaborative
(AACC) released a statement that denounced both past and present anti-Asian racism and recommended a variety of measures to support Asian Americans during this time of vulnerability. More than anything, the AACC urged all Americans, especially fellow Christians, ‘to speak without ambiguity against racism of every kind.’ In less than two days, the statement received over 4,500 signatures, including from prominent faith leaders such as the Rev. Dr. Walter Kim, President of the National Association of Evangelicals, and Tom Lin, President and CEO of InterVarsity Christian Fellowship/USA (Asian American Christian Collaborative 2020). In a show of solidarity, non-Asians hailing from diverse racial, cultural, and theological backgrounds expressed their solidarity with Asian Americans and condemned the rise in hate. A Unitarian Universalist minister called for more ‘love in the time of coronavirus’ (Guengerich 2020). And a Muslim website denounced anti-Asian prejudice while also calling attention to broader, longstanding problems with Orientalism (Khan 2020).

Jewish Americans were particularly vocal in their support for Asian Americans. Former Democratic presidential candidate Andrew Yang co-authored an op-ed with Jonathan Greenblatt, President of the Anti-Defamation League, in which they urged ‘all Americans to come together and stand against the anti-Asian and anti-Jewish blame game’ (Yang and Greenblatt 2020). In addition, representatives from over 180 Jewish American organizations issued a collective statement calling for ‘kindness and solidarity’ and urging American Jews to learn the lessons of Jewish history. Noting that ‘Jews as a people have a long history of being singled out and stigmatized during times of societal crisis, including being blamed without basis for the spread of disease,’ the statement called ‘all people and particularly all leaders to reject conspiracy theories and the singling out of Asian Americans, foreigners, immigrants, Jews, or any other communities in this moment’ (‘Joint Statement of Solidarity by Jewish Communal Organizations’ 2020).

At the time of writing, it remains to be seen whether this interreligious and interracial solidarity will continue amid multiple crises—in particular, the pandemic and the political tumult of an election season that involved persistent efforts by Republican politicians to blame China for COVID-19. Although reports of anti-Asian hate incidents declined in April 2020, Asian Americans remain vulnerable. And, as a long historical view reveals, yellow peril discourses are durable and powerful precisely because they are highly malleable. Much like a novel virus that can spark a global pandemic, racist backlash against Asian people perceived to be a moral and medical threat has emerged in many times and places. Its next occurrence is perhaps primarily a question of where and when, rather than if. However, given other circumstances—most notably the mass protests against racial injustice that erupted in May 2020 and the decades-long shift in the religious demographics of the United States—one wonders if, over time, Americans will witness fewer attacks on racialized religious others, as was the case with the vandalism of Buddhist temples, and more instances of interracial and interreligious solidarity. Religions have long served to reinforce regimes of racial hierarchy, but perhaps they can also serve to dismantle them.

Bibliography


