

2019-nCoV, fake news, and racism

The novel coronavirus (2019-nCoV) outbreak has had a significant impact on global health. As a neighbour country to China, Japan has been heavily affected by the spread of 2019-nCoV. As of Feb 10, 2020, 161 people (including 135 passengers and crew members on a cruise ship quarantined in Yokohama, Japan) have been confirmed to have the 2019-nCoV infection in Japan—the second largest number followed by mainland China.^{1,2} The emergence of misinformation and racism against patients and Chinese visitors are also reaching critical levels.

On Jan 29, 2020, one Japanese social media outlet uploaded the news story *Will the Tokyo 2020 Olympics be suspended?*,³ citing an article in *Süddeutsche Zeitung*.⁴ However, the original article just referred to ongoing communication between the International Olympic Committee and WHO, and there was no reference to the possibility of suspending the Olympic Games in Tokyo in 2020.

In addition, the excess demand for surgical masks among the general public is a serious concern. Many people rushed to the pharmacy to purchase them, which has lowered provision for medical facilities including emergency and critical care centres.⁵

Furthermore, fake news has led to xenophobia towards patients and Chinese visitors. On Jan 24, 2020, misinformation that “Chinese passengers from Wuhan with fever slipped through the quarantine at Kansai International Airport” was disseminated through multiple social media channels.⁶ Although Kansai International Airport promptly denied the fact, discrimination against Chinese people has become widespread in Japan. #ChineseDon'tComeToJapan is trending on Twitter, and Chinese visitors have been tagged as dirty, insensitive, and even bioterrorists.⁷

The magnitude of the 2019-nCoV outbreak remains unclear. Estimating

the reproduction number and capturing the transmission dynamics are crucial to considering effective countermeasures. Considering that asymptomatic cases in Japan were detected among those who flew back from Wuhan by a Japanese chartered plane,¹ the risk of infection during the pre-symptomatic period needs to be investigated.

The mass media must also take responsibility for providing correct information and creating comprehension among citizens. Journalists have an important role in health communication and should acknowledge that their strong but inaccurate and misleading headlines agitate members of the public, cause fear, impinge on public communication, and diminish countermeasures for the outbreak. Health-care professionals should cooperate with the mass media and help differentiate what is known and unknown. Effective communication will not only contribute to lessening the risk for inappropriate behaviour, such as unnecessary visits to health-care facilities, but also help eliminate fake news and discrimination against patients and Chinese visitors.

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