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Lisa J. Hardy 

ABSTRACT

Anthropologists have long known how perceptions of contagion play out along the lines of xenophobia and racism. Months after the beginning of the global Cover-19 pandemic, predictions by anthropologists of xenophobic ideologies and actions have come to pass. In the United States people understand the global pandemic not as biology, but as the manifestation of political affiliation, difference, connection, and disconnection. COVID-19 is, according to public perception, dangerous because it maliciously mutates to attack. It is “a guy we don’t know.” Relationships between the mysteriousness of the virus and heightened visibility of longstanding inequality in the United States form new contexts for existing social tensions. These dynamics provide a backdrop against which the ongoing commitment to uprisings connected to the Black Lives Matter movement unfold. Here I draw on analysis of 50 semi-structured interviews we conducted from March to August of 2020 demonstrating how understandings of the biology of a virus are woven into perceptions of politics, inequality, and the fractures of a divided nation. To understand social and political responses to the global pandemic it is essential that we continue to investigate xenophobia, inequality, and racism alongside the biological impact of SARS-CoV-2.

KEYWORDS

United States; conspiracy; contagion; racism


Julia is emotional when she talks about living with the threat of coronavirus. Each member of her home lives in various states of fear. She can’t concentrate enough to read, and she has trouble sleeping because of her constant worries about people she loves and everyone in the rest of the world: “They say [COVID-19] attacks immunocompromised and elderly. Well, in this house right here, we got four elderlies [and] one person extremely compromised. His doctors pretty much told him if he got the virus he wouldn’t survive. I see it as a huge threat.” Like others, Julia is rapidly reconfiguring ideas of home, risk, bodies and contagion as she struggles to navigate conflicting and incomplete information.

Julia is one of 50 people my team of researchers interviewed by phone as the coronavirus crisis unfolded in the United States. COVID-19 immediately exposed existing differences in life and health through higher rates of contagion and death in tribal nations, unequal racialized risks, home and health loss and financial insecurity, and variable rates of death (Hardy et al. 2020; Jan 2020; Samuels-Staple 2020). The scale and urgency of pandemic response is set against the backdrop of long-existing inequalities and a powerful political division.

COVID-19 is seen as a dangerous and mysterious enemy that mutates to kill. But people struggle to understand what it means to live with the repercussions of the pandemic. Those who have or have had COVID-19 tread through the murky onslaught of information, wondering when and how symptoms will strike. Mystery is the defining characteristic of COVID-19, and in this mystery is perceived personal and political danger. Anxieties of contagion, illness progression, conspiracy, and risk drive social connections and avoidance. Global impacts of the response have resulted in intense changes in people’s connections with each other and their social and political worlds. Researchers can’t fully evaluate the sociopolitical implications of COVID-19 without considering the tightly intertwined

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Media teaser: Politics and conspiracies of contagion in the United States.

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narratives of political conspiracy and notions of biologically based contagion, connection, and division within and outside of shifting alliances of friend and foe.

Anthropologists are quickly contributing to insights related to fear and COVID-19 (e.g. Manderson and Levine 2020), following a history of social science engagement with political, economic, and cultural dimensions of epidemics and pandemics (see Abramowitz 2017; Farmer 1992; Onoma 2020). An anthropology of health and risk informs interpretations of fears of contagion and political demise (Panter-Brick 2014). These include xenophobic interpretations, which in the United States, from the beginning of the coronavirus pandemic, have erupted in hate crimes against people of Asian descent and international Chinese students (Tessler, Choi, & Kao 2020). These tensions have also continued to occur in the aisles of grocery stores and in public places where people aggressively fight over who is and is not wearing a mask. Competing discourses over “ontologies of risks” (Phillips 2020) will continue to inform understandings of COVID-19. Indeed, the early predictions and contributions of anthropologists regarding COVID-19 are coming to pass.

Recent studies on social networks, social integration, and social support (Howick et al. 2019; Tsai and Papachristos 2015) highlight how culturally and politically mediated social connections vary over time and by context. COVID-19 provides a current example of how connections can create social cohesion, break apart, and reconnect in different configurations based on conspiracy theories and tense political divides.

During the preliminary research on which I draw here, participants reflect on how connection and disconnection relate to various states of isolation. They talk about missing the birth of their first grandchild, waiting while loved ones have surgery in locked-down hospitals, experiencing ruptured personal relationships due to disagreements over safe practices in confined spaces, and dealing with the inability to travel to visit distant family members and homes. And they share another side of sheltering-in-place: the opportunity to “get to know” parents as adults or establish new relationships with adult children now living back at home, playing games, preparing food and eating together, working together. Those sheltering alone find comfort in snuggling pets and communication technologies as they are “touch starved” for days, then weeks, now months. In each of these examples, people show changing relationships and discomfort in what first seemed to be short term and now is a long and unknown venture into making meaning in a different world.

Themes that emerged early have continued in the past 4 months, pointing to important directions for ongoing research on COVID-19 and pandemic response. Mystery of the known and unknown is among the most salient of these. COVID-19 is dangerous because it is unknown, and this threatens bodies, immunity, and relationships. People across the political spectrum in the US are relying on politicized images of risk rather than biological knowledge to understand COVID-19. As anxieties rise about oncoming economic collapse and the dangerous divisions of a crumbling nation, the lack of knowledge about COVID-19 and ideas that someone, somewhere is “out to get us,” have tightened the intertwining threads of contagion and rupture in an election year with an ever-widening political divide. For some, fear of illness dominates their anxieties; for others the economic and personal effects of isolation constitute the heaviest risks and fears of a deeply fissured political divide. From far right (Republican and Libertarian) to far left (Progressive, Democratic Socialist, and Democrat), participants discussed, unprompted, anxieties of the economic and political fallouts of COVID-19. Early interviews indicated differences between right and left leaning political beliefs, demonstrating that people with right wing views feared economic and international conspiracy, while those who identified as left wing feared information suppression and the mishandling of public health. Later, right wing identified people feared the loss of their freedoms with mask mandates more than they feared the virus, assuming that there was a plan to remove their rights. Left wing people talked about the current US government as, at best, a public health disaster, and at worst, a death cult. Nearly every person we interview raises questions over what the other political side is doing regarding COVID-19. Differences in political affiliation demonstrate differences in notions of who and what is at risk.

Disparities in health in the United States were already vast before the pandemic. Exposures of inequality are clear in the death rates of COVID-19. Dangers of the virus do not impact communities

equally. Those living with racisms of multi-generational and present oppression, ongoing settler colonialism, and the violence of immigration policing are most at risk for serious impacts including death. It is therefore not surprising that people rose up after police murdered Breonna Taylor and George Floyd, with and in support of the Black Lives Matter (BLM) movement against the violence of policing – another symptom of extreme and growing inequality. For some, this social movement is related to the impacts of the global pandemic; for others it is another indicator of dangerous divides. As political tensions rise with a nearing presidential election, many white conservatives now cite these demonstrations as justification for arms.

In March 2020, we lacked sufficient scientific research and medical knowledge to know how to avoid or treat COVID-19. People we interviewed then and now work to make sense of what COVID-19 is, in ways strikingly similar across demographic groups. They do not describe COVID-19 as an RNA virus. Instead, it is a mysterious and malicious entity that we don't know. We know common colds and flus, people tell us. Our bodies "made friends with" colds and flus a long time ago. But COVID-19 is "a guy we don't know:" unpredictable, unknown, uncontrolled, and therefore unsafe. Virus mutations are a sign of devious attacks. The enigma of COVID-19, people said, means that it can evade the knowledge of immune systems. The virus is not a natural part of the ecosystem, but a thing with agency and a desire to kill ... "an invasive ... molecular level virus that makes people sick." The threat here is not only the *what* of the virus, but also the *who*. A Black interviewee connected COVID-19 to Black Lives Matter and then pointed out the ongoing racism of people who fail to understand how race and disease intersect. Another interviewee talked about her long-term commitment to BLM years prior to 2020, and associated mask refusal with racist attitudes. Many recognize the dangers of racism during a pandemic.

People across demographic groups desire solid and reliable information. Early in the pandemic people wanted to know more about guidelines for how to avoid COVID-19 and lamented conflicting and insufficient information. Now, as more people have either contracted COVID-19 or know someone who has, they are tense about how to know if they are infected. Does it start with a cough or a headache? When do you know that you are safe? How long will illness continue? In the struggle to obtain information that will provide some sort of confidence to avoid and deal with COVID-19, conspiracy theories grow and change. Scientists, according to our interviewees, are not sharing information and/or political leaders are intentionally burying or twisting truths. Sources of information vary from blogs to multiple international news sources but people from different perspectives share the notion that there is intentional information suppression.

People's concerns about the virus are exacerbated by anxieties of loss of health and life and the crumbling of the country. As people share images of the destruction of mailboxes by the Trump administration only months before a federal election during a pandemic that will rely on mail-in ballots, mistrust of the US and/or foreign governments is a significant source of distress. Suspicion of political leaders and entities like the World Health Organization (WHO) and Centers for Disease Control (CDC) span across political divides.

Political divisions have remained but have changed shape over the past months. At the base of these is a fight for knowledge, health, and life. In early interviews, people who identified themselves as Republican or Libertarian feared information suppression and suspected efforts to depopulate the world: "The censorship [in] this narrative is ridiculous ... If people question it they are getting smacked for it by the media and WHO, CDC, Dr Fauci. If you look back into him with HIV pandemic, it's very shady." Now, though, conspiracy theories or at least queries over viral transmission are emerging across the political divide, as people share a collective fear that a group of powerful leaders (Trump, Bill Gates, and others) have access to secret information and have malicious intent. People question if scientists and/or political leaders created the virus in a lab and/or intentionally leaked it into the general public. Blame in conspiracies of COVID-19 is distributed differently across beliefs. Some question actions of the Chinese government and/or mention relationships with, for instance, people from Wuhan, China, reflecting xenophobic ideologies (Onoma 2020). Others focus more directly on the Trump administration's lack of empathy and support for life-saving interventions as

the biggest threat to health and life. Ongoing disbelief about the virus and resistance to following hygiene guidelines is another manifestation of xenophobia, one rooted in the racisms of a nation built on slavery and theft of land.

Present in so many of the interviews though is a warmth and sadness for loss of life and a concern for others. Many, even those dealing with health and well-being challenges, worry about unsheltered people and others dealing with financial burdens and domestic abuse. Interviewees speak with great pain about their own disconnection and their concerns for the world. Danya said: “I tried to imagine what it would be like to live in a world without elderly and I thought it was rather disgusting. It’s like taking out a chunk of life . . . you take it out, it wouldn’t be the world that I know anymore. I wouldn’t want to live in it.” This despair is common in discussions over who is dying and who will die from COVID-19, and highlighted their own fears that they might be partially to blame: “I think one of the scariest things is that you can be asymptomatic . . . but that’s cruel and horrible. You could be passing it on to other people without even knowing.” In descriptions of the mysterious threat of the virus, most people pointed to the threat of asymptomatic, invisible spread. Knowledge is the key to health and safety, according to this logic that spills over into how people talk about their social networks. Some say they are adhering to distancing and still spending time with family and friends. Reminiscent of the early days of HIV/AIDS, people who are known are seen to be less of threat to health than those with whom personal connection is limited.

COVID-19 is inherently political in perceptions of contagion and risk. This intertwining of meaning is clear in the ever-present larger context of policy, healthcare, injustice, and in factors of health and public perceptions of contagion in the United States. People with vastly different political orientations and religious beliefs feel unsafe and worry about risks of conspiratorial mystery, maliciousness, and lack of safety. Some express loss and fears of a changing world while others question if the virus is real. Within this real and perceived mystery is an embedded form of xenophobia that allows some people to believe that they are not at risk merely because they are protected from social connections that bring them close to people who have died. White people living with good health and privilege, without connections with networks of people at risk, can live in denial. But as more people suffer and die, the violence of inequality in the US becomes undeniable. As with violent policing and extreme poverty, what matters is who lives and who dies. It will be crucial to continue to investigate how associations with viral risk and contagion impact relationships between and within groups, and how political ideologies dominate perceptions of risk and contagion with regard to COVID-19.

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