

EXPANDING THE NARRATIVE ON ANTI-CHINESE STIGMA DURING COVID-19

Lessons on Complexity & Capacity in Toronto and Nairobi

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“罩”顾好自己
1 每四小时会对厨房
及就餐区进行消毒

2 店员上岗前洗手消毒并且
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(每4小时更换)

3 店员每日三次测量体温并
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From the Researchers

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Health Research
Institut de recherche
en santé du Canada

We are pleased to present this report, the first in a series of publications coming out of research funded by the Canadian Institutes of Health Research (CIHR) entitled, “Destigmatizing Chinese communities in the face of COVID-19: Emergency management actions to address social vulnerability in Toronto and Nairobi”. We are grateful to our funders for their continued support of health and social science research.

Since the outbreak of COVID-19, people of Chinese descent and those perceived as Chinese have been targeted and blamed for being ‘originators’ of the pandemic, and for its spread. Dr. Tedros Ghebreyesus, Director-General of the World Health Organization (WHO), acknowledged this global phenomenon saying, “The greatest enemy we face is not the virus itself; it’s the stigma that turns us against each other” (Ghebreyesus, 2020). Toronto and Nairobi are two examples of globalized cities with established Chinese diaspora communities where Chinese residents have faced the unique confrontational challenges of stigma surrounding COVID-19, while at the same time facing COVID-19 public health threats just as the rest of the population.

This technical report describes the research study itself and its context, emphasizes the importance of acknowledging *complexity* and *capacity* in discussions on stigma, and presents initial findings from Toronto and Nairobi by way of short ‘snapshots’. We hope that this report expands the narrative on stigma such that already marginalized communities during this pandemic are not further victimized, and that this information will lead towards the development of effective public education campaigns to help prevent the unfair targeting of ethnic groups during this and future pandemics.

We are thankful to our team of researchers and participants for engaging in detailed semi-structured interviews in English, Mandarin and/or Cantonese across the Greater Toronto Area and the Greater Nairobi Metropolitan Region during this challenging time. For more information, please feel free to contact the Principal Investigator, Dr. Aaida Mamuji at amamuji@yorku.ca or visit our website at EMforAll.com.

Sincerely,

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Background

COVID-19 Context

COVID-19 is a new disease caused by a new virus SARS-CoV-2 that was unknown prior to an outbreak in Wuhan, China, in December 2019 (World Health Organization, 2020c). Communications in late-December 2019, indicated that medical institutions in Wuhan were treating a surge of patients with a pneumonia of unknown cause (ProMED International Society for Infectious Diseases, 2019). On January 22, 2020, WHO's mission to China indicated that there was evidence of human-to-human transmission in Wuhan (World Health Organization, 2020a). By the end of January, 7,818 COVID-19 cases were confirmed worldwide, with 7,736 cases in China and 82 cases elsewhere in 18 countries (World Health Organization, 2020b).

On March 11, 2020, WHO made the assessment that COVID-19 can be characterized as a *pandemic* (World Health Organization, 2020d), an event wherein a, "new influenza virus emerges and spreads around the world, and most people do not have immunity" (World Health Organization, 2010). From January to July 2020, the COVID-19 pandemic has spread to almost every part of the globe. At the time of writing, the WHO Coronavirus Disease (COVID-19) Situation Report - 189 dated July 27, 2020, has indicated that globally the grim tally stood at 16,114,449 cases with 646,641 deaths (World Health Organization, 2020e).

The initial findings for this research study are drawn specifically from qualitative research activities that have taken place in two geographic areas which have faced COVID-19 impacts - Toronto and Nairobi. Regarding the situation in Canada and Kenya, data from the WHO COVID-19 Situation Report -189 dated July 27, 2020 (World Health Organization, 2020e), indicates that Canada has 113,556 confirmed cases and 8,885 deaths. For Kenya, the situation is 16,443 confirmed cases and 278 deaths.

COVID-19 & Stigma

Historically, pandemics have been used as vehicles to stigmatize and target specific racial and ethnic groups (McCauley *et al.*, 2013). Stigma is generally defined as a mark of shame or discredit associated with a characteristic, capturing a relationship of devaluation rather than a fixed attribute (Scott, 2014). In 2020, we have seen these unfortunate patterns of prejudice emerge again. Due to the geographic origins of the first major prevalence of COVID-19 in Wuhan, China, there have been instances of persons having underlying tendencies of discrimination, xenophobia, or racism equating COVID-19 with Asian persons, particularly members of Chinese diaspora communities. As will be discussed in the following section, discriminatory actions have ranged from subtle microaggressions to outright physical

aggression. This has resulted in increased mental health stresses experienced by those ethnically Chinese, or that are Chinese-looking (see for instance Wu *et al.*, 2020).

As early as January 2020, a number of initiatives were established to track instances of stigma faced by those that are ethnically Chinese. Li Li of University of Tübingen and Jing Wang of NYU Shanghai established the *Sinophobia Tracker Project* (Wang and Li, n.d.) to archive instances of stigma globally. In Canada, the Department of Canadian Heritage (Government of Canada) has funded an online incident reporting system that has been established by several Chinese Canadian organizations (CovidRacism.ca, n.d.), including the Chinese Canadian National Council - Toronto Chapter (Chinese Canadian National Council, n.d.). Using the moniker EliminateHate, two Vancouver area initiatives, Project 1907 and the Vancouver Asian Film Festival Society, also promote the incident reporting system through their internet presence (eliminatehate.org, n.d.).

Efforts have also been made to promote effective response to such incidents (see for instance Figure 1). In June 2020 the Federation of Asian Canadian Lawyers released a hate and discrimination guide to help the Chinese diaspora community to recognize such anti-social incidents (FACL, 2020). A resource and information hub called Project PROTECH, or Pandemic Rapid-response Optimization to Enhance Community-Resilience and Health, also provides information useful to both recognizing and countering larger issues related to discrimination against Asian Canadians during COVID-19 (Project PROTECH, n.d.).



Figure 1 York Region Ontario Anti-Racism Sign on Bus Shelter, photo by Jack Rozdilsky June 6, 2020

Instances of Stigma in Canada

While a March 2020 poll by Research Co. found that three-in-five Canadians (61%) think it is not acceptable to refer to COVID-19 as the 'Chinese virus' or 'Chinese flu', acts of anti-Asian discrimination have occurred at an increased pace since the onset of COVID-19 (Canseco, 2020). In April, the Chinese Canadian National Council for Social Justice commissioned Corbett Communications to conduct a poll in Toronto, Montreal, and Vancouver. According to the initial release of findings, just under half of Canadians had reservations about sitting next to a Chinese or Asian person on a bus if the person was not wearing a mask, and one in eight respondents indicated that they were aware of incidents of racial bias due to COVID-19 in their neighbourhoods (Chinese Canadian National Council for Social Justice, 2020). In June, information from a survey conducted by the Angus Reid Institute in partnership with the University of Alberta suggested a 'shadow pandemic' of racism exists as half (50%) of Canadians of Chinese ethnicity surveyed reported being called names or insulted as a direct result of the COVID-19 outbreak, and a plurality (43%) further say they have been threatened or intimidated (Angus Reid Institute, 2020). In the Vancouver Metropolitan Area, there were a total of 12 anti-Asian hate crimes reported for all of 2019, while in the first four months of 2020, police said that there were nine such incidents (Mangione, 2020a). Through their online incident reporting system, Project 1907 has announced that it has collected over 120 reports of anti-Asian racism between January and mid-May 2020 in Canada (Fionda, 2020). Most of these incidents have been limited to verbal harassment, however, 20% of incidents included physical assault.

One example of physical abuse occurred in Burnaby, a city in the Metro Vancouver area, on April 3, 2020. In that incident, security cameras captured an Asian senior citizen using a walker being purposely tripped by an unknown assailant (Mangione, 2020b). An incident of verbal abuse gained national attention where in an Asian grocery store in Mississauga, Ontario, a man who refused to wear a mask became increasingly irate and aggressive, yelling racist and anti-mask conspiracy theories at Asian employees after refusing to comply with the store's policy (Gaffar, 2020). This incident was posted to YouTube on July 7, 2020.

About This Study

This research study commenced in early March 2020. A team of researchers was assembled from York University (Canada), Ryerson University (Canada), the University of Nebraska - Omaha (United States), and Afroscope Consulting (Kenya) to conduct a series of interviews with members of the Chinese diaspora community in Toronto and Nairobi. Due to situations of active COVID-19 community spread, the methodology was adapted to proceed without face-to-face interactions; thus, interviews were conducted remotely using computer-mediated technology. In Toronto, 83 participants were interviewed. In Nairobi, 30 participants have been interviewed, and interviews are currently ongoing.

The purpose of the interviews was to explore how individuals in the Chinese diaspora community are coping and reacting to COVID-19. This was done by collecting stories of experiences, studying social impacts, and determining what types of coping strategies were applied during the emergency response phase of the pandemic. The interviews, which were conducted in either English, Mandarin and/or Cantonese, followed a semi-structured format, and lasted on average between an hour to one-hour and a half. Audio recordings of the interviews were then transcribed, and where necessary translated into English, and subsequently coded to determine themes emerging from the data. Initial findings contained in this technical report are based on work which took place between March 2020 and July 2020. This phase of the research study is a 'quick response' endeavor where perishable data was collected, providing a snapshot of participant's experiences during the early stages of the global pandemic from November 2019 to July 2020.

This research study contributes to the Government of Canada's global effort to address the public health challenges of the COVID-19 outbreak. The research team acknowledges support provided from the Canadian Institutes of Health Research under Operating Grant: Canadian 2019 Novel Coronavirus (COVID-19) Rapid Research Funding Opportunity - Public health response and its impact - No. 202002OV7 (Canadian Institutes of Health Research, 2020). This project has received ethics approval from York University, Ryerson University, University of Nebraska Omaha, and the National Commission for Science, Technology and Innovation (NACOSTI) in Kenya.

Expanding the Narrative on Anti-Chinese Stigma During COVID-19

As outlined above, the primary narrative on anti-Chinese stigma during COVID-19 has been the capturing of instances of discrimination faced by those ethnically Chinese. This, however, is only one aspect of the story. Other aspects include a deeper understanding of the community itself, along with an awareness of the capacity that the Chinese diaspora community brings forward to help us all overcome COVID-19.

We believe that when the conversation starts and stops at the reporting of experiences of stigma, the narrative remains the victimization of the community: those being targeted continue to feel unsafe, with many living in a constant state of fear and opting to retreat; those with discriminatory tendencies may take the growing number of incidents as justification for continued displays of Sinophobia; and those on the periphery are not given any indication of how society can move past the status quo. Therefore, we argue in favour of the expansion of the narrative on anti-Chinese stigma during COVID-19 to include discussions on complexity and capacity of Chinese diaspora communities.

The following are snapshots exploring some of the relationships between capacity and complexity that have emerged from our research on stigma to date. We believe that by better understanding the capacity as well as the complexity of communities, emergency managers and public health officials can better implement social countermeasures aimed at preventing the unfair targeting of specific ethnic groups during infectious disease outbreaks.

In the first snapshot, we show how our Greater Toronto Area (GTA)-based interviews indicate that COVID-19 has provided an opportunity for the Chinese diaspora community to engage in social countermeasures to both prevent and slow the spread of infection. In many cases, these actions were reported as being a form of external stigma towards the community. Whereas reports of stigma may imply that members of Chinese diaspora communities are homogenous and are at equal risk of harm, in the second snapshot we take a closer look at the make-up of the Chinese diaspora community in the GTA and explore how perceptions and experiences of stigma during COVID-19 vary significantly from person to person. The final snapshot presents initial findings from our interviews in the Greater Nairobi Metropolitan Region, where instances of Sinophobia during COVID-19 are described as being an extension of deep-rooted tension and geopolitics in the region. Despite this, the community continues to demonstrate capacity to contribute towards coping with COVID-19 for society as a whole.

Snapshots on Complexity and Capacity

I. Learning from the Community: Early Actions Taken in the Greater Toronto Area

Many members of the Chinese diaspora community in the GTA are tightly linked to family and friends in Asia, including those in mainland China, Hong Kong or Taiwan. Many also follow news from Asia closely. By virtue of these social connections, as news of the novel coronavirus emerged in China, a number of Chinese residents in the GTA adopted early preventative actions, including mask wearing, physical distancing, and petitioning officials for stricter public health measures. These actions demonstrate the capacity of the Chinese diaspora community and suggest that they were aware of the impending COVID-19 risk far earlier than others in Canada.

Capacity

As early as December 2019, several participants in this study reported receiving masks from family and friends living in Asia along with advice that they should begin covering their faces. Once schools reopened after the winter holiday, some parents sent their children to school with masks on, and others decided to keep their children home to avoid exposure to potential cases, especially if they had elderly relatives living in the same household. The first positive case of COVID-19 in Toronto, and also Canada's first case, was identified on January 25, 2020 (Thompson, 2020). That day also happened to mark the start of the Chinese New Year, and in turn, celebrations were directly impacted. In Chinatown, performers and patrons, most of whom are Chinese, did not show up to planned events. Such actions reflected early adoption of physical distancing measures to help curb the spread of the disease.

Physical distancing was also practiced when some individuals and families that had traveled to China over the winter holiday voluntarily self-isolated upon their return to Canada. Furthermore, several companies with owners who are ethnically Chinese began asking employees to work from home as early as February, with others reducing working hours. In February, the Chinatown Business Improvement Area purchased hundreds of wall-mounted hand sanitizers and distributed them to local restaurants, while some eateries adopted strict preventative actions such as disinfecting the kitchen and dining areas every four hours, regularly conducting temperature checks of employees, and requiring employees to wear masks throughout their shifts (see Figure 2).

Given that many of these actions were formally adopted in Canada by mid-March when provincial-level states of emergencies were put in place across the country, there is clearly much to learn from the knowledge and proactivity of the Chinese diaspora community. Highlighting this capacity may help avert negative actions of those persons that would choose to stigmatize the Chinese diaspora community. Instead of being seen as a threat, the Chinese diaspora community can be seen as a segment of society with valuable experience in mitigating the spread of infectious diseases.



Figure 2 Posters on windows of Chinese businesses on precautionary measures taken in light of COVID-19, photo by research participant, Feb 12, 2020

Complexity

GTA media outlets reported the loss of income to Chinese businesses due to reduced patronage (Macdonell, 2020). In response, public officials made attempts to support Chinese businesses by officially visiting them, citing misplaced fears by customers. While interpreting this deficit as stigma is one response, the loss of business within the Chinese community is also a reflection of responsible behaviour by customers from within the community in light of an impending pandemic. This behaviour is an important point to note given that many Chinese businesses that were affected have a majority of Chinese customers. Without an appreciation of such nuances, discussions of stigma can be biased, stagnating the narrative on the victimization of the community and dismissing proactive public health actions by the Chinese diaspora community.

Similarly, the shifting advice of Canadian public officials on the usefulness of mask use by healthy individuals during the onset of the pandemic resulted in mask-related stigma. The initial advice by Canada's Chief Public Health Officer was against the widespread public use of masks (Urback, 2020), citing a false sense of security, a reduction of critical supplies for essential workers, and usefulness only for those who are sick to prevent them from spreading the disease. As a result, many people that decided to wear masks early in 2020 experienced discriminatory behaviour aimed at them. Given that some members of the Chinese diaspora

community started wearing masks early on, they faced a disproportionate amount of mask-based stigma. This too highlights the need for an appreciation of complexity, where in this case the stigma experienced was exacerbated by the shifting of official public health advice, resulting in the dismissal of the capacity of the Chinese diaspora community yet again, and criticism of a common Asian cultural practice.

It should be noted though that while the early public health actions adopted by the Chinese diaspora community are commendable, in some cases they may have been overzealous due to the lack of data in the early phase of the pandemic. For example, at the end of January and in early February, Chinese Canadians urged officials to implement robust public health actions by launching numerous petitions requesting the House of Commons, Prime Minister, Minister of Health, and Minister of Transport to adopt measures such as the suspension of all flights from China into Canada and strict quarantine measures. In one such petition, it was noted that a majority of names appeared to be of Chinese ethnicity (Shen, 2020). In another online petition circulated north of Toronto, parents attempted to pressure a regional school board to ask students whose families had travelled to China during the outbreak to self-quarantine (Brown, 2020).

Approximately two months later, a more complete picture of how COVID-19 entered Canada emerged. While the first case of COVID-19 did enter Toronto from China, those early cases were not the main vectors of spread into Canada¹. April data from Canada's largest provinces indicated that the number of those persons who spread COVID-19 into Canada due to returning from China was much smaller than originally perceived. In Ontario, by mid-April 1,201 cases of COVID-19 were identified from persons returning from international travel and just five of those cases were related to travel from China (Tumilty, 2020). For Ontario, most cases originated from travelers returning from the United States with 404 cases, travelers returning from the United Kingdom with 126 cases, and those returning from the international conveyances of cruise ships with 74 cases (Tumilty, 2020). In light of this reality, COVID-19 has shown us that in the early stages of a newly emerging pandemic, perceptions formed based on very early data regarding where cases originate from can contribute to falsely stigmatizing persons of specific national or ethnic origins.

¹ On January 25, 2020, a 50-year-old male who was traveling in Hubei province in central China returned to Canada via Toronto's Pearson International Airport. He was feeling unwell upon his return, acted responsibly, and immediately went into isolation and treatment at Sunnybrook Health Sciences Centre in Toronto (Nasser & Blum, 2020). This instance was confirmed as Canada's first presumptive case of COVID-19 at provincial health laboratories in Ontario (Thomas & Nair, 2020) and subsequently also confirmed by Canada's National Microbiology Laboratory in Winnipeg. As the initial travel related cases took hold in Canada, on February 9 ten airports across the nation expanded COVID-19 screening requirements. It was not until March 18, that a more wide-ranging ban on foreign nationals attempting to enter Canada was implemented (Government of Canada, 2020).

II. Appreciating the Complexity of Communities in Discussions on Stigma: Examples from the GTA

The Chinese diaspora community makes up a significant portion of the GTA population. According to 2016 Statistics Canada census data, the City of Toronto had 5,429,524 residents, of which 618,280 persons or 11% were considered to belong to the Chinese visible minority group (Statistics Canada, 2017; Yang 2017). In Markham (immediately north of the City of Toronto), 2016 data shows a total population of 327,445, with the Chinese visible minority group making up 45% of the city's population (City of Markham Ontario, n.d.).

Through this research study's exploration of the lived experiences of the Chinese diaspora community living across the Greater Toronto Area during COVID-19, we note that experiences and perceptions of stigma vary significantly. Such differences can be attributed to the diverse and complex nature of the community resulting in distinct social identities, values, and social vulnerability within sub-groups. Despite this complexity and variance in perception of stigma, some Chinese Canadians have been proactive in demonstrating the capacity of the community.

Complexity

Data collected from our interviews indicate that social identities amongst the Chinese diaspora community vary as some participants indicate that they 'forget that they are ethnically Chinese sometimes' while other participants feel more closely connected with their home country of China than Canada. The degree of integration differs from person to person, but factors including migration patterns (i.e. when they or their families moved to Canada, and from where) and mindset (i.e. intent to assimilate) influence the degree of integration. Other relevant factors concerning the degree of integration with Canadian society, or not, include English language proficiency, education-level, and the specific place of residence within the GTA given that in some jurisdictions there is no need to venture out of the Chinese community in order to fulfill daily needs. There are also distinct differences in values which lead to varying degrees of acceptance or understanding of ways of life and governance systems in Canada.

In light of this complexity, information gathered from participant interviews in the GTA indicate a spectrum of opinions regarding COVID-19 related stigma against the Chinese diaspora community. While some participants expressed anxiety about being the target of racism or felt that experiencing such threats is imminent, others felt that it was difficult to attribute certain actions, such as others physically avoiding them, to race-based stigma versus the following of public health protocols during COVID-19. It was also expressed that discrimination is a reality faced by all visible minority groups in Canada, with some arguing that the Chinese diaspora community needs to stop self-victimizing itself as this encourages further stigma.

General discussions on stigma in Canadian media and published reports refer to stigma as being perpetuated by actors outside of the Chinese diaspora community. However,

participants also shared the prevalence of internal stigma and divides inside the community and amongst members of the Chinese diaspora community itself. For instance, some participants from mainland China report feeling that persons from Hong Kong are ‘narrow-minded’ in attitude, thereby avoiding dealings with them. At the same time other participants who identified themselves as being from Hong Kong expressed an opinion that persons from mainland China have lower levels of education and engage in practices that are not commonly acceptable in Canada, such as spitting in public or poor hand hygiene. It is also evident that stereotypes and stigma within sub-groups of the Chinese diaspora community are shaped by geopolitics, such as the tension between mainland China and nearby jurisdictions, like the ongoing Hong Kong protests against mainland China’s tightening grip on Hong Kong’s promised autonomy, or sovereignty issues with Taiwan. Many participants also expressed general distrust of the Chinese Communist Party (CCP), as exemplified in publications which refer to COVID-19 as a biological weapon arguing that it should be called ‘the CCP virus’ (Epoch Times Editorial Board, 2020).

Without an appreciation for this complexity within the Chinese diaspora community itself, reports on incidents of stigma and racism treat the community as homogenous and provide for a simplistic view of the overall picture. By better understanding this complexity, emergency managers and public health officials can implement more nuanced and encompassing social countermeasures aimed at preventing the unfair targeting of a specific ethnic group during this pandemic.

Capacity

Despite differences in perceptions of stigma, most participants agree that racism is a result of ignorance and misunderstanding and urge taking actions for long-term public education and continued advocacy efforts. While some participants suggested that people within the Chinese diaspora community should attempt to integrate fully to break the cycle of stereotyping, others discussed direct advocacy efforts to address Sinophobia. For instance, a March 2020 campaign by the Chinese Canadian National Council for Social Justice (CCNC-SJ) raised awareness about xenophobia during the pandemic. Volunteers dressed in full personal protective equipment handed out small bottles of hand sanitizer to passersby in Nathan Phillips Square and Chinatown with the message, ‘Stop the Spread (of Racism)’ (Lafontaine, 2020). Anticipating the rise of anti-Chinese sentiments, members of the CCNC-SJ also organized a press conference in January 2020 with Toronto Mayor John Tory, and the city’s Medical Officer of Health, Dr. Eileen de Villa, with a goal of mitigating the recurrence of the xenophobia experienced during the 2003 SARS outbreak (Madani, 2020, see Figure 3).



Figure 3 Press Conference on Stigma, *Four days after the first case of COVID-19 in Toronto, on January 29, 2020, Toronto Mayor John Tory stood with Toronto's Chinese diaspora community to denounce Coronavirus stigmatization and discrimination (Tory, 2020)*

Regarding the capacities of the Chinese diaspora community to address their own inter-group issues of internal stigma, participants did not offer much insight on that topic. Participants suggested difficulties relating to the fact that such perceptions are deep-rooted and historical in nature.

III. COVID-19 Related Sinophobia in Nairobi: Lessons for De-Stigmatization Efforts

Modern day Chinese African migration can be traced to Chinese international policy during the 1950s and 1960s, when China developed anti and post-colonial political ties with African countries (Park, 2009). This policy remained the central migration policy until the 1990s, when an economic, for-profit, development imperative for Africa was adopted by the Chinese government. This new agenda has facilitated exponential growth of Chinese labour migration to Africa. The majority of Chinese migrants in Kenya are temporary workers attached to Chinese State-Owned Enterprises (SOEs), and those workers are involved in large scale infrastructure projects (see Figure 4). A significantly smaller number are entrepreneurs, work for independent Chinese companies, or work toward enhancing Chinese culture in what is often referred to as a ‘charm offensive’ as part of a foreign policy mandate (Fantu & Obi, 2010). It is projected that a demand for Chinese labour by Chinese entrepreneurs in Africa will continue to grow as they continue to recruit and hire relatives and friends whom they know and trust (Carling & Haugen, 2004).



Figure 4 A section of the on-going construction of the Standard Gauge Railway (SGR), *This is a flagship Government of Kenya project in collaboration with the central government of the People's Republic of China, photo provided with permission to share from Moonlight Media Services, Aug 31, 2019*

When trying to better understand the context of anti-Chinese sentiment in Nairobi with the goal of mitigating the perpetuation of xenophobia during the pandemic, once again we find that a better understanding of the complexity of the situation and capacity of the Chinese diaspora community in Kenya provides a more accurate overall picture. The outbreak of the

COVID-19 pandemic affected the relationship between Kenyans and Chinese nationals in China and in Kenya. In Kenya, reports on the relationships between Kenyan locals and self-identified Chinese living in Nairobi ranged from the positive, with material donation support towards COVID-19 preparedness, to the negative, with Sinophobia. In China, reports of racist discrimination towards Africans circulated in news outlets and social media, complicating matters.

Complexity

In early 2020 reported cases of Sinophobia circulated on social media platforms and traditional media outlets in Kenya. On an individual and community level, overt verbal discrimination, harassment, and physical attacks were reported by Chinese nationals living in Kenya, as well as less overt discriminatory behavior. These actions ranged from Chinese business avoidance and denial of service, to discriminatory interpersonal exchanges in public spaces (Mwaura, 2020 and Zhu, 2020), and have been confirmed by our initial findings. Our research participants in Kenya have self-reported incidents of COVID-19 stigma and micro-aggressions, interpersonal conflict, and verbal confrontation by Kenyan strangers who blamed them for being the cause of the pandemic.

Under some interpretations, COVID-19 inspired Sinophobia is an extension of existing tensions between Kenyan nationals and the Chinese diaspora community in Kenya. Despite decades of physical interaction and infrastructure development by Chinese companies in the country, the relationship between the two groups has remained predominantly transactional through short-term business exchanges. The Chinese diaspora community in Kenya is perceived as being from an economically dominant and powerful country, and media reports as far back as a decade ago have portrayed Chinese activities in Africa as predatory and neo-colonial (Park, 2009). Most recently, anti-China sentiments have resulted due to perceived corruption and overbearing loans in the construction and funding of major infrastructure projects in Kenya such as the Standard Gauge Railway, coupled with emergent perceptions that Chinese migrants are not trustworthy, fair or legitimate business partners (Okumu & Fee, 2019). Recent reports of Chinese business owners harassing Kenyan employees, both physically and verbally, have also surfaced (Odula, 2020).

Efforts have been made to address the anti-Chinese sentiment in Kenya during the COVID-19 pandemic. The Ministry of Foreign Affairs of Kenya directly admonished Kenyans against discriminatory acts towards Chinese living in Kenya (Kihiu, 2020). And, the Chinese Ambassador to Kenya reiterated that the strengthening of Sino-African relationships during the pandemic is ongoing, through the provision of multilateral material and spiritual support (Xinhua News Staff, 2020c). However, anti-discrimination efforts have been set back in light of COVID-19 related racism and discrimination towards Africans in China. Since February 2020, Africans including Kenyans on business trips or those living or studying in China, have been exposed to various discriminatory acts including denial of services such as healthcare,

forced eviction, verbal and physical assault, and disparate enforcement of testing and quarantine (Castillo & Amoah, 2020; Horn, 2020; Shimanyula, 2020). Inadvertently these situations have added to the consternation concerning expressed Chinese solidarity in the fight against COVID-19.

As a result of the tension faced by Chinese residents living in Kenya that we interviewed, some participants have shared that due to fears of being targeted, they are isolating themselves further from the rest of Kenyan society and relying only on Chinese medicine and medical advice as the need arises. Such impacts of discrimination on health-seeking behaviour can exacerbate the spread of a pandemic, resulting in negative impacts on physical and mental health. In light of this situation, engagement in de-stigmatization efforts are prudent, but these efforts must acknowledge the complex context and history just described in order to be successful.

Capacity

It is often argued that xenophobia is perpetuated by ignorance and lack of interaction between groups. In Kenya, Chinese diaspora community residents tend to live in enclaves or camps close to work sites, resulting in limited social contact with locals and other ethnic groups. Cultural exchanges are experienced through specific Chinese-Kenyan cultural events such as those organized by the Confucius Center and in some interpersonal exchanges. In light of this, one way in which to address anti-Chinese sentiment in Kenya during COVID-19 is to highlight the capacity of the Chinese diaspora community and efforts that they have made to support and express solidarity with the broader Kenyan society. There has also been some outreach by Kenyans to the people of China albeit much less materially and publicized.

In the months since the outbreak, the Chinese government, ethnically Chinese residents living in Kenya, business associations, and philanthropists, have supported the Kenyan COVID-19 response through material donations (Xinhua News Staff, 2020b). According to the Chinese Ambassador to Kenya, solidarity and reciprocity have been expressed through donations of medical supplies and other basic necessities (Xinhua News Staff, 2020b). In March 2020, globally renowned Chinese founder of Alibaba and philanthropist Jack Ma made a donation to the Kenyan Ministry of Health, providing almost 25,000 testing kits, protective gear, masks, and other medical equipment through his foundation (Xinhua News Staff, 2020b). In addition to these donations, various Chinese business associations in Kenya have donated pandemic response supplies to various Kenyan Ministries with the intention of distribution to institutions of higher learning and to first responders (Mwangi, 2020). By bringing more awareness to these ongoing efforts, Chinese living in Kenya express what Ambassador Peng refers to as an injection of fresh vitality in the fight against COVID-19 (Xinhua News Staff, 2020c). Of note too is the Kenya-China Alumni Association which consists of former Kenyan students who studied in China. In solidarity with the people of China, association members raised Kenya Shillings 63,300 in COVID-19 response support (Xinhua News Staff, 2020a).

Conclusion to the Technical Report

The main initial finding of this research study is that the story of the Chinese diaspora community in its struggle against COVID-19 is one of complexity and capacity. While instances of anti-Asian discrimination due to COVID-19 have been well documented during the first half of 2020, such unfortunate acts are only one portion of the story of how the Chinese diaspora community has been coping with COVID-19. It is time to 'flip the script' to change how we view the story of the Chinese diaspora communities' relationship to COVID-19. It is not only a storyline of continued stigma and discrimination; it is a story that is emerging of a complex community dynamic that can offer a unique capacity to help the cities in which they live to overcome the ravages of COVID-19.

From this research study, in-depth qualitative interviews have provided new information on what this circumstance of complexity and capacity means in relation to how Chinese diaspora communities in both Toronto and Nairobi are coping with COVID-19. The snapshots on stigma presented provide specific examples. In Toronto, capacities clearly existed where the Chinese diaspora community was an early adopter of COVID-19 safety measures, well before other Canadians were fully aware of the pandemic threat. In some instances, such responsible behaviour was misrepresented as being a form of external stigma towards the Chinese community. At the same time, complexities exist as Toronto's Chinese diaspora community is not homogenous, and consequently, there exists a spectrum of opinions regarding COVID-19-related Sinophobia. For some participants, emphasizing the stigma faced by the community is seen as further encouraging discriminatory behaviour, while others recognize the existence of internal divisions as being an issue. In Nairobi, specific historical and economic complexities in the geopolitical interactions between Kenya and China define community relationships, with both harmonious and turbulent aspects. In order to develop effective social countermeasures to address stigma, this complexity, as well as the capacity of the Chinese community to assist the broader Kenyan society, must be acknowledged.

Future phases of this research study will include participatory action research to counter misinformation about COVID-19, and associated discrimination and fear. Results of the work will be shared with emergency management and public health professionals to assist in developing culturally specific public education campaigns to support efforts to destigmatize Chinese diaspora communities. We also look forward to engaging in detailed comparative studies between our engagement in the Greater Toronto Area and the Greater Nairobi Metropolitan Region. Notably, differences in the history and relationship of ethnically Chinese residents and broader society in both countries have significant effects on their respective lived experience during COVID-19, resulting in rich contextual analysis.

In August 2020, as a vaccine for COVID-19 is not yet available, behavioural actions, social change, and policy measures are amongst the only tools that society has available for reducing COVID-19 risks faced by communities and individuals alike.

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