

COVID-19, racism and the need for bilingual social workers

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1. Introduction

The World Health Organization (WHO) declared the COVID-19 outbreak a global pandemic in March 2020. One country after another continued to be affected by the COVID-19 virus, and it had spread over one hundred countries. The announcement came in three months after its first detection of several cases of pneumonia with unknown causes in Wuhan, China, in December 2019 (WHO, 2020a). In order to delay the spread of the virus, the national leadership of many countries implemented public health measures accordingly (WHO, 2020b). Despite these efforts, the virus has created unforeseen challenges globally: discrimination on the grounds of racism being one. People around the world began to discriminate against East Asians and their descendants as the main carriers of the COVID-19 virus and spurred random violent acts against them. In the U.S., STOP AAPI HATE, an incident-reporting center, received more than 1,800 reports of COVID-19 virus related harassment and violence in the U.S. (Kambhampaty, 2020). The Chinese Canadian National Council announced more than 600 incidents of anti-Asian racism since the onset of COVID-19 (Lam, 2020). Similar racial attacks have happened all over the world, including the U.K., Australia, Europe, and Africa. To make matters worse, President Donald Trump referred to COVID-19 as the “*Chinese virus*” and the “*Kung flu*,” and Secretary of State Mike Pompeo referred to the “*Wuhan virus*” six times in public (Riechmann and Tang, 2020). Media has fuelled the misperception even further in the U.S. COVID-19 racism and following violent acts against people of East Asian origin, will leave both physical and mental stains on the Asian community for the long term (Chen, 2020; Misra et al., 2020). In the most recent research on COVID-19 and its impact on Chinese families and their mental health, Cheah et al. (2020) underscore the importance of paying close attention to their racism-related experiences and the following mental health

needs during the COVID-19 pandemic. The long-term impact of their exposure to COVID-19 racism is too early to be identified, and discussions of any intervention for this vulnerable population are scarce. Nonetheless, Chen (2020) describes that this pandemic-driven rise in anti-Asian racism is a “secondary contagion” threatening this population.

Asian communities, especially those with limited English proficiency (LEP), have been receiving services from bilingual professionals, including social workers in their community Human Service Organizations (HSOs) (Weng, 2014). Those bilingual professionals acknowledge that East Asian communities have insufficient access to needed health and social services, and other appropriate benefits, due to cultural and linguistic differences (Weng, 2014). For Asians, mental health service utilization and social security benefits are far below than their peers (Yang et al., 2019). COVID-19 racism and violent acts against East Asians will only create an additional burden on top of their existing challenges, such as inadequate access to health and social services due to their cultural and linguistic barriers. In the time of this transformative phase, Asian bilingual social workers are most needed because of their professional skills and capacity to deliver needed services in the most culturally and linguistically appropriate setting. However, the number of Asian bilingual social workers is far smaller than their target population. The number of recent graduates of Master in Social Work (MSW) and Bachelor in Social Work (BSW) programs in the U.S. has steadily increased for the past decades in the U.S. Asian graduates, however, are not following this trend (Results of the Survey of 2017 Social Work Graduates, 2018). The reason behind the lack of Asian bilingual social workers has not been satisfactorily identified. Previous research on bilingual social workers reports their higher workload and lack of adequate support from their

HSOs. Yet, there have been no studies or research on Asian bilingual social workers and their challenges. By examining the current status of Asian bilingual social workers, we can more fully address the importance of expanding the number of Asian bilingual social workers in this time of an unprecedented global pandemic that entails the targeting of a particular ethnic group as the cause of it. Supporting the East Asian population with appropriate intervention and services, Asian bilingual social workers can minimize the impact of COVID-19 racism onto the East Asian community.

2. COVID-19 and the East Asian community

The global COVID-19 pandemic has impacted every sector of life for people worldwide, and the East Asian population is facing another form of racism, namely *COVID-19 racism*. After the first report of several cases of pneumonia with unknown causes in Wuhan, China, in December 2019, WHO declared it a global pandemic with its official name of “COVID-19” in three months (WHO, 2020a). While countries around the world continue to be affected by COVID-19, South Korea and Hong Kong in the Asia have demonstrated that COVID-19 transmission from one person to another can be slowed or stopped (Feuer, 2020). Following their example, other countries such as the U.S. and the U.K. began formulating response plans and strategic preparedness for COVID-19. The top leadership of these countries determined the best way to implement measures is by delaying the spread of the virus and slowing or stopping transmission (WHO, 2020b). Due to its novelty and severity, the number of confirmed cases and fatality rates caused by COVID-19 have not been decreased. In the meantime, the attacks against Asian and Asian descendants has been increased. Frequent reports on physical and verbal attacks against East Asians are happening worldwide. In the U.S., STOP AAPI HATE, an incident-reporting center founded by the Asian Pacific Policy and Planning Council, received more than 1,800 reports of COVID-19 virus related harassment or violence in 45 states and Washington, D.C. alone in March and April 2020 (Kambhampaty, 2020). A Chinese woman was attacked for wearing a mask in New York City while a 16-year-old Asian American student was physically assaulted in Los Angeles (Ao, 2020). In Canada, an Asian senior with dementia was attacked by a white man who shouted racial slurs about COVID-19 in a grocery store (Young, 2020). The Chinese Canadian National Council announced that there have been more than 600 incidents of anti-Asian racism in Canada since the onset of COVID-19 (Lam, 2020). In the U.K., Asians are physically attacked and taunted, accused of spreading COVID-19. Similar cases have happened in Australia, Europe, and Africa (Human Rights Watch, 2020).

Before COVID-19, East Asian communities faced inadequate access to health and social services and a lack of

culturally and linguistically appropriate service delivery. Asians are one of the fastest-growing populations in the U.S. and expect to be so in the U.S. Their population growth is about 72 percent (from 11.9 million to 20.4 million) between 2000 and 2015, and it is expected to be around 41 million by 2050 (Pew Research Center [PRC], 2017). Also, the Asian population is composed of different cultures and subgroups of languages, and this diversity has influenced their current economic, political, and social processes within the United States. Nevertheless, Asians are regarded by the larger society as a monolithic group. Some of the Asian subgroups, such as the East Asian population, are touted as overachieving model minorities, and this perception is easily applied to the overall Asian population. Due to this misrepresentation, Asians’ needs cannot be easily addressed and are somewhat overlooked (Museus and Iftikar, 2013). For example, policymakers do not include Asians in the national conversation about poverty. The poverty rate for overall seniors aged 65 and older in 2015 is 9 percent, while that of Asian seniors is close to 18 percent. (Tran, 2017). Besides, the Asian immigrant population is with the highest language barrier. 35 percent of them identify their level of English as “less than very well.” (United States Census Bureau, 2019). According to the latest report on East Asian seniors in New York (Center for an Urban Future, 2013), their LEP rates are much higher than any other group: Chinese seniors (92 percent) and Korean seniors (94 percent). LEP impacts the social safety net, and Asian seniors, especially those who are foreign-born, are more likely to receive much less Social Security benefits because they tend to earn less (Tran, 2017). Furthermore, East Asians do not utilize mental health services as much as other racial groups because of lack of information on mental health services and lack of culturally and linguistically appropriate service delivery (Sue et al., 2012).

3. Bilingual social workers

Community support from the ethnic-based HSOs in large cities often lacks bilingual professionals such as social workers and nurses (Engstrom, Gamble and Min, 2009; Engstrom, Piedra, and Min, 2009). Asian social workers represent 3.57 percent of all social workers (Data USA, 2018). The National Social Work Association has also confirmed that less than 3 percent of MSW and BSW graduates were Asian in 2017 (Results of the Survey of 2017 Social Work Graduates, 2018). This number does not match the national population of Asian demographics (5.6 percent). The present report contains no information on the bicultural and bilingual service delivery status of these Asian social workers. Language is the most influential vehicle for expressing one’s culture. Hiring bilingual professionals in the clinical fields

with culturally and linguistically appropriate service delivery has been proved to be the best method for improving health outcomes for minority populations (Lee, Kim and Chen, 2010; Drolet et al., 2014; Garcia et al., 2017). Even with proven data and the benefits of bilingual social workers, there have been scarcely any studies on Asian bilingual social workers and their shortage, including East Asian workers. In general, social workers who are working with the immigrant population with LEP tend to carry additional jobs: cultural bridging between the host and native countries and balancing the expectations of two different cultures (Dohan and Levintova, 2007). Also, it is reported that bilingual social workers receive not as much emotional and informational support as their monolingual peers from their HSOs (Engstrom and Min, 2004).

4. COVID-19 racism and its impact on the East Asian community

East Asian communities start to raise their concerns regarding the impact of COVID-19 and related racism on their mental health (Ao, 2020). A strong link between racial discrimination and anxiety and depression among diverse racial groups has been proven empirically (Britt-Spells et al., 2018). Racial discrimination is also recognized as a critical social determinant of health and a driver of racial and ethnic health inequities in the long term (Stanley, Harris and Cormack, 2019). East Asian communities are already experiencing inadequate access to health and social service. Their mental health utilization is marked as the lowest compared to their counterparts in the U.S. Yang et al. (2019) also point out that Asian's low mental health utilization comes from a lack of culturally sensitive services and a lack of information on finding these services. Considering all these research findings and their existing difficulties before the pandemic, it is apparent that the post COVID-19 pandemic phase will leave the East Asian community with a more challenging agenda on top of their existing ones.

5. Conclusion

The global COVID-19 pandemic has impacted every sector of life for people around the world, including the East Asian population. Due to the first detection of the virus in Wuhan, China, unanticipated racism and following violent attacks against East Asians and their descendants have been initiated and spread worldwide. In the U.S., the East Asian community has already faced insufficient health and social services and inadequate benefits due to their cultural and linguistic differences. The East Asian community lacks Asian bilingual social workers who can provide culturally and linguistically appropriate services in the U.S. Even before the COVID-19 pandemic, the number of Asian bilingual social

workers is far smaller than their demographics. Due to the COVID-19 pandemic and COVID-19 racism, it is easily concluded that there would be an even more negative impact on the East Asian population post COVID-19 pandemic. This situation will only create more of an agenda for the East Asian community, which has already lacked appropriate and adequate services to alleviate the stains. During this unprecedented time of transformation, it is crucial to promote Asian bilingual social workers who can minimize the impact of COVID-19 racism on the East Asian population. In the long term, retaining Asian bilingual social workers, who can provide culturally and linguistically appropriate health and social services, can genuinely meet the needs of this marginalized population. Keeping in mind this need, this paper asks for more attention to promoting the number of Asian bilingual social workers throughout this COVID-19 pandemic and post COVID-19 period.

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