

Swine Flu Issue Brief

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Stigma: Its Harm and Its Remedy in Outbreaks Like Swine Flu

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History teaches that disease outbreaks can lead to social casualties, not just medical ones. Swine flu is no exception: a stigma is now becoming attached to the disease.

A sampling of discussions on the internet and talk radio reflects an understandable human impulse in the face of contagion—the desire to fix blame. Where did this come from? Who is spreading the illness? Pointing a finger helps turn a mysterious, invisible illness into something that feels more familiar and more controllable. In their desire to understand and avoid a contagious disease, some people may single out a whole country or a group of people as the source of the problem. Erecting a boundary between “us” and “them” may look like a reasonable first step toward safety.

Mexico Is an Easy Target

In the case of swine flu, Mexico is an easy target. This country has been hit hardest in terms of the number and severity of cases, and the epidemiologic evidence suggests that, in some instances, a holiday trip to Mexico has led to exposure. These facts alone, however, do not explain all the calls to close the U.S. southern border, the condemnation of swine flu as another dangerous Mexican “import” like drugs or salmonella-laden jalapenos, the characterization of undocumented immigrants (“illegals”) as disease vectors, or public anxiety over a large number of Mexican Americans in local communities. Mexico, regrettably, holds a place in some people’s minds as different, dangerous, and now deadly.

“Outsiders” Are Often Blamed

“Outsiders”—people with a different national, ethnic, or religious background—are a category of people long accused of spreading germs, regardless of what the science says. During the SARS crisis in 2003, 84% of surveyed Chinatown businesses in New York City reported a drop in trade, despite the limited presence of disease. In the early 1980s, Haitian immigrants were blamed for the spread of AIDS, despite the fact that the disease was spread via particular behaviors and not specific groups of people. Typhoid Mary was vilified not just for infecting people through her cooking, but also for being a working class Irish immigrant, a detested social group in her day.

Avoiding the Blame Game and Helping People to Cope

The challenge for the U.S. and the global community is to shun the blame game while meeting people's real desire to avoid contagion and feel secure. Leaders can acknowledge that self-protective behavior is normal and then clearly describe the epidemiologic basis of risk, suggest personal protective measures, and call for compassion toward those who are affected. Members of the public should seek guidance from their health authorities or physicians about the extent to which they should be personally worried about the swine flu. And everyone should do a mental check as to whether any prior prejudice—as has sometimes been evidenced in the current U.S. debate over immigration—is coloring their perspective about swine flu and the best way to control it.

Preventing Stigma Is in Everyone's Best Interest

Preventing stigma is not simply altruistic; it is “enlightened self-interest.” Historically, people in scapegoat groups are reluctant to seek medical care when they are symptomatic and they go “underground,” putting themselves and others at greater risk. It would be especially unfortunate in the case of swine flu, because there are effective treatments. Hyper-vigilance about “others” due to fear, while understandable, wastes valuable mental energy. A far better investment is concentrating on protective behaviors such as washing hands frequently; avoiding touching one's mouth, nose, and eyes; and sharing in a workplace ethic that supports people staying home when they are sick.

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