UC SANTA BARBARA

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Viral Fear

When the Ebola virus was ravaging western Africa in 2015, a curious thing happened: Americans whose chances of being infected were effectively zero became terrified of the disease. What's more, some of these people began to advocate xenophobic policies that medical experts said would only make the situation worse.

A pair of UC Santa Barbara researchers decided to look into this phenomenon, and what they found could help medical relief efforts in future outbreaks around the world. Heejung S. Kim and David K. Sherman, professors in the Department of Psychological and Brain Sciences, discovered that the more people felt vulnerable to Ebola the more xenophobic they became. Their degree of xenophobia, however, was directly influenced by how individualistic or collectivistic they were.

In short, a person who is individualistic is more likely to have a stronger xenophobic response when he or she feels highly vulnerable to a pathogen like Ebola than someone who is collectivistic, or more oriented toward group goals. The researchers' paper, "Fear of Ebola: The Influence of Collectivism on Xenophobic Threat Responses," is published in the journal Psychological Science. John A. Updegraff of Kent State University is a co-author.

"The old quote that 'there is nothing to fear but fear itself' rang true to us when everything started exploding with Ebola last year," Sherman said, noting that quarantining doctors returning from Africa and other policies considered counterproductive proliferated. "We want to try to understand the psychology of that phenomenon, and so we began to look to see whether there's a relationship

between how vulnerable people felt to Ebola and their support for these xenophobic policies."

In the study, the researchers surveyed 1,000 Americans selected as representative of U.S. demographics. The survey assessed their individualism or collectivism, their perceived vulnerability to Ebola risk, their perceived ability to protect themselves from the virus, and xenophobia, which consisted of prejudice against West Africans and support for restrictive travel policies, as well as prejudice against undocumented immigrants and ethnocentrism.

The surveys found a clear link between individualism and a heightened xenophobia response. "There was a strong link between how vulnerable people feel to disease and their xenophobia," Kim said. "That by itself is not groundbreaking, but it's interesting. So it shows there's some relationship that the more scared that you are about Ebola, the more you think it threatens you, your family, your community, the nation, the more xenophobic you are. There's that strong relationship.

"But you see that relationship is even stronger for people who are individualistic," Kim continued, "and is somewhat weaker for people who are collectivistic, such that if you look at people who are on the far end of the continuum — that is, people who really feel quite afraid about Ebola — those who are collectivistic are less xenophobic than those who are more individualistic."

Social bonds appear to moderate xenophobic impulses, according to Kim and Sherman. "Collectivism is associated with a set of rules and traditions and a close relationship with others. These are all ways that help people cope with threats like scary viruses," Sherman explained. "So if you are someone who has stronger collectivistic values and you have the beliefs and practices that are associated with them, there's less of a need to respond to these threats with xenophobia.

"By contrast," Sherman continued, "if you see yourself as more isolated, individualistically inclined, then you're really on your own. You're in a boat by yourself, and you need to prevent things from jumping into your boat. It's not like you can count on the other boats in the armada to protect you."

Previous research has found that states tend to lean individualistic or collectivistic, and the research showed that the states that were more individualistic were also more xenophobic. Alabama, for example, with its conservative, church-oriented culture, is more collectivistic. "We found, somewhat surprisingly, that the people

who live in a place like Alabama are the ones who do not respond as strongly," Kim noted. "It's not that those people are less xenophobic, but they just don't increase their xenophobia because they're scared."

The research, Kim and Sherman said, could help medical teams in foreign hot spots adopt practices that make it easier to treat the sick. Through Goleta-based Direct Relief International, they spoke to physicians who had spent time in Africa during the Ebola crisis. They learned that the practices of visiting doctors, who are used to treating individualists, sometimes made it harder to address the disease among people who are more collectivist.

"A lot of times those doctors come from the West, and the first thing they do is they isolate patients. The doctors from Sierra Leone talked at length about how that backfires because the patients became very scared, because they are isolated," Kim explained. "At some point they realized this and allowed phones calls with family. What they found was that this put their patients' minds at ease. Reducing isolation helped patients face the fear of Ebola."

Closer to home, Sherman said, how the medical community might deal with fear and xenophobia will require more study. Education is one likely approach, and it is possible to induce people to think in a more collectivistic way. The open research question is whether this reduces xenophobic responses when people perceive themselves to be highly vulnerable to infectious disease.

"What can we do as a community to address these problems?" Sherman said. "What our research suggests is that the more community-oriented that people feel, the less they need to respond to these threats with extreme xenophobic responses of closing the borders or restricting flights, practices that medical experts say are going to make these problems worse. Perhaps more adaptive strategies and reduced fear could be the result of a greater sense of connection to others."

About UC Santa Barbara

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