

Pride and Prejudice in COVID-19 Pandemic: Exploring the Social Implications on Muslims in India

Ms. Ishika Jain¹ and Ms. Namra Izhar²

Abstract: The outbreak of the novel Coronavirus has overwhelmed the world with the associated morbidity, mortality, and recounted cases of scapegoating of 'the others.' This research aims to understand the psycho-social impact of COVID-19 on religious minorities in India. This paper focuses on the rise of prejudices towards Muslims in India due to restricted social interactions during the pandemic. The findings suggest that the pandemic has deepened the divisions in a society already fraught with prejudices, marred by violence fueled by myths, hatred, rumors, and fake news by complicit media which has created an uncanny rift between religious minorities and majorities. The biological understanding of hosts, vectors, and carriers of COVID-19 is in stark contrast to increased social prejudices. The findings of this study may help to identify preventive approaches using community awareness, social tolerance, and anti-stigma interventions which are vital for mental well-being.

Keywords: *Minority, Pandemic, Prejudice, Social Interaction, Scapegoats*

Introduction

A pandemic can be defined as, the global introduction of a new infectious disease that is spread to several continents or worldwide, affecting a significant number of individuals. When it became apparent that the COVID-19 infection was serious and that it was spreading rapidly over a wide area, the World Health Organization declared COVID-19 as a pandemic and forced international authorities to lockdown, sealed borders which contributed to slumped economies, overwhelmed communities across the world and has led to catastrophic death (The Economic Times, 2020).

The virus has generated widespread distress and suffering, as well as an attitude of "us vs. them" that has infected society's socio-political and psychological realms (Reny & Barreto, 2021-2020). White (2018) defined 'Epidemic Orientalism' as the stigma, hatred, and marginalization used to characterize diseases. Throughout history, the outbreaks of infectious diseases have had a propensity to unveil existing societal prejudices, allowing for scapegoating, and epidemic orientalism to occur (Reny & Barreto, 2020). For instance, during the 13th century' bubonic plague, 'Catholics blamed Jews for poisoning the water and spreading the disease, 'Asian cholera' in 1817 — a pandemic named because it was believed to be endemic to India's Gangetic region, Typhoid Mary in New York (1900s), Middle East Respiratory Syndrome (2012), and Hong Kong flu (1968), to name a few.

Similarly, the COVID-19 pandemic has exposed deeper systematic xenophobic structures in addition to inciting xenophobic speech (Rogers, Jakes & Swanson, 2021). Xenophobia is defined by the American Psychological Association as "a strong and unreasonable, often pathological, fear of strangers and hostile attitudes or violent conduct against persons of other countries, ethnic groups, regions, or neighbourhoods."

Globally, the Chinese were vilified for the virus, while in India, Northeasterners and Muslims were attacked and accused (Lone, 2020). This prejudice and scapegoating can be associated with reduced social interactions, due to the lockdown, between the communities which widened the greatest fault line in Indian society - religion (Venugopal, 2021). Social interaction can be understood as the exchange between two or more individuals, which facilitates social connections. The protracted lockdown compelled individuals to go into protective online mode, which limited social connections and impeded the formation of friendships at schools, universities, and businesses (Venugopal, 2021). Limited online mode resulted in collateral damage to social tolerance and understanding between religious identities which produced a massive distrust-dislike fuelled by rumors, fake media content, and news. During the coronavirus pandemic, the media blitzkrieg reached its pinnacle, with fake news being spread without any fact-checking by media outlets or journalists. Politicians and political influencers disseminated them further. On social media, videos emerged showing Muslim employees in takeaway restaurants spitting on food before dispatching it, spreading the coronavirus (Bose, 2020). This turned out to be an old video that was shared as if it were new (Mehta, 2020). A newspaper called Amar Ujala News published an article claiming that the Tablighi Jamaat members who had been detained were demanding non-vegetarian food and peeing openly in the quarantine centers (Patel, 2020). The Saharanpur Police Department in Uttar Pradesh disproved this hoax (Sikander, 2021). According to AajTak, Tablighi Jamaat members in Bareilly attacked police officers who were searching for them in a village (Sikander, 2021). This misleading news was debunked by the SSP of Bareilly (Naim, 2020). The Tablighi Jamaat allegedly hurled stones at medical personnel in Firozabad, according to Zee News. This hoax was exposed by the Firozabad Police Department (Sikander, 2021).

Therefore, the research question, "How does the restricted

^{1&2} Undergraduate Students, Department of Psychology, Indraprastha College for Women, University of Delhi
Corresponding Author: Namra Izhar : Email: inamraizhar@gmail.com

social interaction of the pandemic result in increased prejudice, bigotry, and marginalization towards Muslims as a minority in India?" becomes important. The objective of this paper is to look at the psycho-social impact of COVID-19, which has intensified prejudices, scapegoating, and religious hatred in India.

Social Distancing: Unintentional Reshaping of Social Interactions

The pandemic forced an unavoidable lockdown, urging us to switch to an emergency online mode that curtailed the frequency of social interactions. However, it is not just during the lockdown, as several activities which were frequent before the pandemic such as going to public gatherings, shopping malls, restaurants, cinemas and so on have become restricted even after the lockdown has been lifted (Naser et. al., 2020). The continued practice of physical distancing impacts social interactions.

In India, this impact may be seen in the interaction between the Hindu majority and the Muslims. According to Allport's (1954) contact hypothesis, contact and social interactions with the outgroup or the 'other' is required to reduce prejudice. In this context, the outgroup is Muslim minorities, with whom prejudice is not being reduced since there is little or no contact as a result of social distancing. The COVID-19 pandemic has caused families to live in close proximity and made people further apart from friends and communities (Al-Tammemi, 2020; Brooks et al., 2020; Liu, 2020). Due to these reduced everyday social interactions, people are interacting more with others in their in-group, as new friendships without group members that were supposed to happen in physical social settings were not possible due to social distancing.

According to Mishra and Majumdar (2020), these social distancing measures are expected to remain for a sustained period and it is likely that this will become a habit in the future and become customary in India. This calls to attention the rising need to address the reduced social interactions with the Muslim minorities, due to social distancing, which may, in turn, be detrimental to minority communities like Muslims in India.

The Social Aspects of Comprehending Disease: Rise in Prejudices

Allport (1954) defines prejudice as a hostility based on an erroneous and inflexible generalization, and prejudice and stereotyping are inherent human views. He claimed that humans are aware of their membership in numerous communities as early as the age of five, but that these classes (e.g., gender, religion, etc.) are not their first choice. Humans do not have the ability to evaluate themselves in relation to other groups until they are a little older (about nine years old), but by that time they will have formed an attachment to their identities

including social categorization, helping individuals engage in meaning making.

Owing to social learning and adherence to social expectations, prejudice and discrimination persist in society. Children learn from society about prejudiced behaviors and beliefs: their parents, peers, the internet, and other socialization outlets, such as Facebook (O'Keeffe & Clarke-Pearson, 2011). One such prejudice often seen in India is between the two major religious communities i.e., Hindus and Muslims. The nationalist politics is fueled with stereotypes about the Hindus as 'civilized, friendly, clean and inclusive' and the Muslims as 'backwards, violent, dirty, and fanatical' (Anand, 2005). Gupta (2009) reports that even in the twenty-first century, tropes that used to represent the community in the 1920s, such as 'cow-killers', 'lack of character' and 'abductors of Hindu women', have found purchase in the form of 'love jihad.'

In the COVID-19 pandemic, prejudices and scapegoating practices can be seen against the other group i.e. Muslim community, primarily due to reduced social interactions and the creation of in-group versus out-group phenomenon. This often manifests as xenophobic tendencies at a societal level, such as the blaming of 'out-groups' and increased 'in-group' protectiveness (Mobayed, 2020). The formulation of religious prejudice in the pandemic can be explained through the lens of various theoretical frameworks given below.

Goffman's theory of Stigma (1963). Stigmatized groups, according to Goffman (1963), are generally the 'others' who have undesirable features or attributes that society does not anticipate them to have. Stigmatization can lead to prejudice, discrimination, and unfair treatment of people (Major, Quinton, & McCoy, 2002). Individuals may be stigmatized and discriminated against based on the observer's understanding of cues and associations (Goffman, 1963; Green et al., 2005).

Due to the existing stigma, the Muslim community has been subjected to different prejudices and discriminatory acts in the present pandemic, such as at a meeting of the Islamic missionary group Tablighi Jamaat held in the Nizamuddin neighbourhood in mid-March 2020 (Guardian, 2020). They were blamed by the police and the administration for the spread of the coronavirus across India. The Delhi government had sanctioned the conference (Jamaat), which drew over 8,000 people, including hundreds of foreigners. COVID-19 was assumed to have been taken up irresponsibly by many Jamaat attendees and transmitted to cities and villages across India. Anyone suspected of having ties to Jamaat was detained and forcefully quarantined all across the country. Later, the Indian Scientists' Response to COVID-19 maintained that the evidence does not support the theory that the Tablighi Jamaat is principally to blame for the coronavirus pandemic in India (The Guardian, 2020). When Mahatma Gandhi was infected with

Spanish flu in 1918, he said, "The first long illness in my life thus afforded me a unique opportunity to examine and test my principles." Thus, our sensitivity to the virus not only informs us of the risks that the virus poses to us, but it also serves as a mirror of ourselves, our systems of thought and values, our connections, theories, and principles of social functioning (Murthy & Gupta, 2020).

Social Identity Theory (1974). Tajfel proposed the social identity theory, which states that a person's perception of who they are is based on the group to which they belong. Individuals who belong to these groups gain a sense of social identification and belonging, as well as pride and self-esteem. Tajfel (1974) also claimed that people tend to group things together and divide them into 'them' (out-group) and 'us' (in-group) groups, exaggerating the distinctions between groups and the commonalities shared within them. Prejudice can also be understood as a 'us' versus 'them' framework.

The Muslim community was often referred to as 'them/they' and described as 'Islamic insurrection' as well as 'Corona Terrorism'. After the Tablighi jamaat had been portrayed as corona bombs by complicit media, attacks against the community in Karnataka were reported (Newslandary, 2020). On Twitter in India, #CoronaJihad, #JihadiVirus, #BanTablighiJamat, and a wide variety of other hashtags were trending. Since March 28, 2020, tweets with the hashtag #CoronaJihad have surfaced about 300,000 times and seen by 165 million users on Twitter, according to statistics reported by TIME magazine by Equality Labs, a human rights advocacy group. Following that, video clips were circulated purporting to show them spitting on food and sneezing, asking locals not to allow Muslim grocers and hawkers to operate in their area. Rumors that they were infecting water supplies with the virus soon spread (Sharma, 2020).

Epidemic orientalism (2018). Diseases have been associated with ethnicity, gender, sexual preferences, and geography throughout history. White (2018) described these structures as epidemic orientalism and they in turn reinforce prejudice. The origins of infections in history are vague, and those branded by such nomenclature are often the ones who suffer the most as a result of such biological crises. The issue is that people forget about the disease's genuine roots and characteristics over time, and the condition is frequently identified with the 'tag' it is attached with (Banerjee et al., 2020). To avoid prejudice, the WHO now has stringent guidelines for identifying infectious diseases, which must be done with those that are generic and not related to the origin or people affected. The targeted community was often associated with discriminatory terms like 'Corona Jihad', 'Spitting Jihad', 'Tablighi Virus', 'Corona Bombs' and 'Corona Terrorists' in the COVID-19 pandemic, implying that the onus of spreading the virus lies on targeted community and alleges that the targeted

community deliberately took measures to infect others. The word "jihad" immediately associates Muslims with violence (Sikander, 2021). Using this word during the pandemic was fatal, manifesting xenophobic tendencies and existing islamophobia at a societal level, such as the blaming of 'out-groups' and increased 'in-group' protectiveness (Mobayed, 2020).

The Scapegoat Theory (1954). This theory was proposed by Allport (1954) who extended the frustration-aggression hypothesis and said that when frustration causes aggression, prejudice people tend to choose outgroups as 'scapegoats' to blame. This type of prejudice is extreme, as the outgroup is blamed for the ingroup's misfortunes (Glick, 2005). 'Scapegoats' chosen are usually people from relatively weaker groups who tend to be seen as minority groups and are excluded.

Scapegoating has a long history. Jews were blamed for the outbreak of the Black Death, Irish immigrants were accused of spreading cholera, Haitians were stigmatized during the AIDS epidemic. Similarly, Muslims were blamed as people in India struggled to find coronavirus scapegoats (Slater and Masih, 2020). Television anchors accused the community of engaging, without citing any proof, in a deliberate conspiracy to spread the virus (Sikander, 2021). Headlines like 'Corona villains identified', 'In the name of religion, deadly attacks', 'Corona's speed: Jamaati Driver', 'Jihad in the name of Corona', 'Along with Jamaat, Rohingya too are corona bombs' were telecasted for a long time without any substantial evidence (Bose, 2020).

Media's Audit of Bigotry

The mass media has played an important role in disseminating COVID-related information to the general public and encouraging people to practise safe habits (Sharma et al., 2020). Before COVID-19, people who had never read, watched, or listened to the news did so on a regular basis. COVID-19-related information distortion was frequently led by television news or online media, causing alarm among the general public. During the pandemic, television networks and newspapers engaged in a hate campaign against the community (Sharma & Gupta, 2020).

According to a large body of evidence, certain news outlets stereotype certain social groups. According to Allport (1954), stereotypes are socially encouraged, reclaimed, and drilled in by mass communication mediums such as books, short tales, newspaper articles, cinema, theater, radio, and television. Some news media over-represent specific social groups/classes as lawbreakers. In the United States, African Americans are more likely to be portrayed as lawbreakers in local TV news than Whites, and are more likely to be discussed with cognitive bias (Dixon and Linz, 2002). Similarly, during the pandemic, the targeted community was regularly depicted on television as

actively infecting the audience. Anchors accused the Jamaat of spreading the virus intentionally, using terms like "Corona Bomb," "Betrayal," "Criminal Negligence," "Superspreader Maulana," and "Terrorist" (Sharma, 2020). Between March 20, 2020, and April 27, 2020, the MIT Center for Civic Media and Harvard University's Berkman Klein Center for Internet and Society conducted a study review of Tablighi Jamaat's media coverage, obtaining 11,074 articles from 271 outlets, 94 percent of which were only English reports (Iyer & Chakravarty, 2020). The repeated association of a minority with negative characteristics, such as 'criminal' or 'terrorists,' may reinforce cognitive bias between these minorities and negative traits in memory (Arendt, 2013).

The Aftermath

India had to address the causing agent of the spread of COVID-19 in order to curb it. However, in the early months, a lack of adequate knowledge of the virus caused panic and anxiety among the public, contributing to irrationality, discrimination, and blame-shifting behaviour (Gilbert & Paul, 2002), which was amplified by the media. The polarized language directed against the 'targeted community' in the media had an impact on the public's attitude. The —Citizenship Amendment Act (CAA)— and the —National Register of Citizens (NRC)— protests at Shaheen Bagh, where women protesters earned international headlines, had already pressurized the country, and by 2020, Delhi had seen a series of communal riots that deepened the sectarian divide while exacerbating religious tensions. The display of the community event was driven by malice is evident from how they glossed over religious prejudices; the fabricated stories and tortured data to vilify the members on the pretext of carrying the virus, even banned from public places and resulted in increased mistreatment and deepened religious divisions.

The contact hypothesis is premised on the idea that contact and interaction between members of various groups is necessary for acknowledging similarities and learning about the 'other' (Massey & Hodson, 1999). As a result, social contacts are one of the biggest victims of the lockdowns (NDTV Prime Time, 2021). Lack of understanding and communication bottlenecks lead to ignorance, which leads to rumour, distrust, and stereotyping (Matusitz, 2012); tweets like *'The pandemic has projected them to be traitors and unfaithful to the country'*, *'India needs to be free from Corona and Jihad as both are nothing more than a life-ending weapon'*, *'Islamic conspiracy of contracting Coronavirus to Hindus'*, are just the drop of examples from the ocean of negative comments. Sharma and Gupta (2020) reported that some shops were plastered with posters reading - *Muslims not allowed to enter'* were observed across Karnataka, Telangana and Madhya Pradesh. Others propagated the message 'Do not buy from Muslims', and as a consequence, some vendors faked their

names to earn their living in the streets of secular India and when identified they were beaten. In many places, activists were spotted handing out saffron flags to vendors to identify them as non-Muslims (ingroup favouritism), while Muslim vendors were prohibited from selling fruit and vegetables in non-Muslim areas (Lone, 2020). In Ahmadabad, Gujarat, one hospital separated its wards for them on discriminatory grounds, with some patients from the other community being uncomfortable about sharing the same ward (Awasthi, 2020). The propensity to respond more favorably to persons in our ingroups than to those from outgroups (Tajfel, Billig, Bundy, & Flament, 1971) strengthens our social identity more positively. Sen (2005) claimed that symbols, myths, and metaphors (social representations) might alter the current knowledge base. For example, during Indian Cricket team matches, people of both groups began to believe that their religious identity had been diluted. As a result, social positions and newly emergent social identities began to anchor and impose themselves on the cognitive system (Abrams & Hogg, 2010). Today, a new moral language is required. A language that stands against systemic inequalities that devalue humanity, that does not excuse bigotry, that does not defer to power, and that does not reward the merchants of communal hatred. Finally, in order to foster a syncretic culture in India, we must establish a space for positive recall of the past and merge it with contemporary times.

Concluding Remarks

The Corona virus is much more than a health crisis (BBC News, 2020). It had an impact on society as a whole, with long-term psychosocial consequences of stigmatization, prejudice, 'othering', and blaming. This intensifies hatred and divisions, the repercussions of which will continue for years after the outbreak has ended (Biswas, 2020). This study focused on a recent scenario and contribution to the existing literature, and it aids those advancing research in the same area, such as policymakers, clinicians, academics, and educators, through our investigation of the psycho-social effect of COVID-19 on religious minorities. The study can be used to understand and strengthen intergroup and intercommunity interactions, make people aware so that they can cope better in the face of a pandemic and lockdown, which in turn can help promote the exchange of ideas, enhance shared trust, and enhance skills and abilities required for social change.

Some ideas for future research include conducting primary research on the effects of prejudice on the target community in order to understand their lived experiences. Future research could also look at developing interventions and awareness programmes to identify and lessen prejudice, as well as busting misconceptions and rumors to minimize prejudice. Other populations in India that have encountered discrimination can also be investigated, and possible comparisons can be made to understand how different communities treated with prejudice

during the pandemic.

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