

6 **SENSE OF THE SENATE RESOLUTION**
7 **Condemnation of Ethnocentrism, Xenophobia, and Racism**
8 **in the Wake of the COVID-19 Pandemic**
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10 Whereas: Since the outbreak of the COVID-19 disease, there has been a large and
11 unfortunate uptick in racial discrimination, bigotry, assaults, and attacks
12 particularly against Asians, Asian Americans, and Pacific Islanders, at
13 SJSU and in other higher education settings, and indeed everywhere in
14 the United States and the world, blaming them for the pandemic and
15 essentializing race with disease; and
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17 Whereas: Ethnocentrism, xenophobia, and racism against these groups (or any) is
18 unacceptable anytime, but reactions to the COVID-19 pandemic have
19 exacerbated the problem; and
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21 Whereas: Such assaults on the bodies, dignity, and humanity of peoples can be
22 direct and violent, but they can also take subtler forms, such as
23 microaggressive jokes or offhand remarks; and
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25 Whereas: Since 2015, the World Health Organization (WHO) has “called on
26 scientists, national authorities and the media to follow best practices in
27 naming new human infectious diseases to minimize unnecessary negative
28 effects on nations, economies and people”¹; and
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30 Whereas: The United States has a long, shameful history of Orientalism feeding
31 discrimination against Asians, Asian Americans, and Pacific Islanders (the
32 1882 Chinese Exclusion Act, the 1907 Gentlemen’s Agreement, and the
33 1942 Executive Order 9066 that authorized the internment of Japanese
34 Americans—including those who were born here—being just three among
35 an extensive list of official discriminatory actions) as well as a long history
36 of exploiting their labor, forcing segregation upon them, denying them
37 basic services and legal status, stereotyping them as unclean, and
38 labeling them as un-American “perpetual foreigners”; and

¹ “WHO issues best practices for naming new human infectious diseases” available at <https://www.who.int/mediacentre/news/notes/2015/naming-new-diseases/en/>

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Whereas: Asians, Asian Americans, and Pacific Islanders as a group have the lowest utilization of mental health services and the highest reluctance to report hate incidents when victimized, so institutions may be unaware of the extent or scope of harm; and

Whereas: We recognize the horrific disparities in higher morbidity and infection rates for Black/African Americans and Latinx peoples from COVID-19 across the country in addition to issues faced by Asians, Asian Americans, and Pacific Islanders; therefore be it

Resolved:

1. That the Academic Senate of San José State University strongly decry and denounce the rise in ethnocentric, xenophobic, and racist hate crimes committed against people of Asian, Asian American, and Pacific Islander descent, at SJSU, in the Bay Area, across the state and country, and around the world;
2. That the SJSU Senate also decry and denounce subtler forms of assault against these groups, including rhetorical ones like jokes or the use of terms specifically targeting them, as such words and phrases, when they become entrenched, do great harm;
3. That the SJSU Senate recognize that our community's faculty, staff, and students have a unique responsibility to stand in allyship with and report instances of xenophobia and racist/ethnic acts encountered by all peoples, but especially by Asian, Asian American, and Pacific Islanders who are being targeted during the COVID-19 pandemic;
4. That the SJSU Senate stand in solidarity with Asians, Asian Americans, and Pacific Islanders in urging all people to stop using language that foments hate or bigotry and hinders the public health response to the COVID-19 pandemic;
5. That the SJSU Senate stand in unified opposition to rhetoric and violence that associates COVID-19 with nationality, race, ethnicity, or country.

79 **Approved:** April 16, 2020
80 **Vote:** 11-0-0
81 **Present:** Curry, Frazier, Marachi, Mathur, McKee, Parent, Peter, Shifflett,
82 Sullivan-Green, White, Wong(Lau)
83 **Absent:** Day, Del Casino, Faas, Papazian
84 **Financial Impact:** None anticipated.
85 **Workload Impact:** None anticipated.
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