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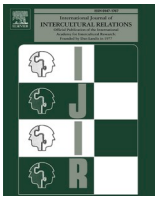

# COVID-19 fear and ethnocentrism in the global south: A cross-cultural analysis

Stephen M. Croucher [a,b,*], Doug Ashwell [b], Mohan Dutta [b], Jo Cullinane [c], Shawn Condon [b], Anthony Spencer [d]

[a] Department of Communication, Clemson University, USA
[b] College of Humanities and Social Sciences, Massey University, New Zealand
[c] Deputy Pro Vice-Chancellor and Professor, Massey Business School, Massey University, New Zealand
[d] School of Communications, Grand Valley State University, USA

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ABSTRACT

This study explored the extent to which fear of COVID-19 was related to ethnocentrism in 10 Global South nations: Argentina, Brazil, Chile, China, India, Kenya, Nigeria, Peru, South Africa, and Singapore. Based on a representative sample of 2963 participants, results revealed ethnocentrism and fear of COVID-19 are positively correlated. In addition, there was a significant difference in ethnocentrism and fear of COVID-19 based on nation and sex. Theoretical implications and future research are discussed, with an emphasis on how the presence of a contagion, a virus, influences intercultural and intergroup dynamics, prejudice, and ethnocentrism.

More than 676.6 million people have been infected and more than 6.8 million people have died globally from COVID-19 (John Hopkins Coronavirus Resource Center, 2024). During the pandemic, racism, discrimination, ethnocentrism, and violence toward groups blamed for the spread of the virus increased globally (COVID-19 related discrimination and stigma: A global phenomenon, 2020). Researchers have demonstrated that during the pandemic, dominant group members often blamed minority groups for the spread of the virus (Croucher et al., 2020; Girardelli et al., 2021; Roberto et al., 2020). In particular, the more individuals feared catching the virus, the more their prejudice, ethnocentrism, and anger towards minority groups increased (Croucher et al., 2023).

This article examines one aspect of this prejudice, ethnocentrism. Specifically, this article explores the extent to which fear of COVID-19 was related to ethnocentrism in 10 Global South nations: Argentina, Brazil, Chile, China, India, Kenya, Nigeria, Peru, South Africa, and Singapore. These nations were chosen for analysis as they had divergent levels of COVID-19, differing health system responses, and the nations had different scapegoats for the virus (Croucher et al., 2021, 2023; Frayer, 2020). While nations around the world grappled with COVID-19 and its response in different ways, the Global South was hit hardest, due to less prepared/developed health care systems, more fragile economies, generally lower living standards, and other systemic inequities compared to the Global North (Balfour et al., 2022).

* Corresponding author at: Department of Communication, Clemson University, USA.
*E-mail addresses:* smcrouc@clemson.edu (S.M. Croucher), d.ashwell@massey.ac.nz (D. Ashwell), m.j.dutta@massey.ac.nz (M. Dutta), j.cullinane@massey.ac.nz (J. Cullinane), s.condon@massey.ac.nz (S. Condon), spencant@gvsu.edu (A. Spencer).

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## Ethnocentrism and fear of COVID-19

Ethnocentrism is when individuals "put their own group in a position of centrality and worth, while creating and reinforcing negative attitudes and behaviors toward outgroups (Neulipe & McCroskey, 1997, p. 386). There are numerous negative effects of ethnocentrism, such as dehumanization, prejudice, bias, xenophobia, hate, violence, etc. (Agroskin & Jonas, 2010; Dreu et al., 2011; Neuliep, 2017). Researchers studying ethnocentrism and other forms of prejudice, have shown that during health crises, dominant groups often dehumanize minority groups (Suefeld & Schaller, 2002). Research conducted in Canada on HIV and in Brazil on COVID-19 showed that when individuals perceived themselves as vulnerable to a virus, prejudice, and other negative feelings (such as ethnocentrism) increased (Croucher et al., 2022; Faulkner et al., 2004). Since the COVID-19 pandemic, Croucher et al., (2020, 2022) have proposed the 'contagion effect' to explain rises in negative affect toward minority groups during and post-COVID-19. Essentially, when dominant group members are faced with a contagion that threatens their lives (a virus), those group members are unable to separate the threat of the contagion from the perceived outgroup who they believe is spreading the contagion. Researchers have shown a positive relationship between fear of COVID-19 and ethnocentrism, particularly prejudice toward minorities (Croucher et al., 2020, 2022; Huber et al., 2022; Kim et al., 2024; Markinović et al., 2023). Thus, the following hypothesis is put forth,

*H:* There is a positive relationship between ethnocentrism and fear of COVID-19.

Second, this study cross-culturally compares the levels of ethnocentrism and fear of COVID-19 in 10 Global South nations. Each of these nations had different governmental responses to the virus, different mortality rates, and each nation's dominant group blamed a different group for the spread of the virus. Different groups served as scapegoats or were blamed for the spread of COVID-19 in these nations. Asians/Chinese were primarily blamed for the spread of COVID-19 in Nigeria, Chile, Argentina, Brazil, and Kenya. In these nations Asians/Chinese were the simplest scapegoat, as China was the virus originated in China (Croucher et al., 2020, 2023). Muslims were blamed for the spread of the virus in India, as misinformation about Muslims spreading the virus to cleanse India spread on social media (Frayer, 2020). African immigrants were blamed for the spread of the virus in China. As local governments dismissed charges of discrimination and scapegoating of Africans, African immigrants repeated claims of discrimination during the pandemic (Vincent, 2020). Malay/Indian immigrants were blamed for the spread of COVID-19 in Singapore, as such immigrants were portrayed as unclean (Croucher et al., 2023). Foreign tourists in South Africa were blamed, as COVID-19 numbers spiked after tourists visited the nation (Croucher et al., 2023). Similarly, quarantine breachers were blamed in Peru after numbers spiked (Croucher et al., 2023). Finally, Afro-Brazilians were blamed in Brazil by locals and even the President, as this group has often served as a scapegoat in the country (Croucher et al., 2022). Thus, to better understand ethnocentrism and fear of COVID-19 between these nations, the following is put forth:

**RQ.** How do levels of ethnocentrism and fear of COVID-19 differ between the 10-nations?

## Method and analysis

After ethical approval, and after ensuring that the research adhered to ethical requirements in each nation in which data was collected, data were collected in Argentina ($n = 220$), Brazil ($n = 410$), Chile ($n = 367$), China ($n = 256$), India ($n = 402$), Kenya ($n = 226$), Nigeria ($n = 208$), Peru ($n = 251$), Singapore ($n = 298$), and South Africa ($n = 325$). Data were collected via paper-based surveys (Kenya, China, Nigeria, and Peru), or via online surveys using SurveyMonkey or Qualtrics. In each nation data collection was targeted toward members of the identified dominant cultural group. Filter questions such as: "What is your race/ethnicity, and religion" were added for each nation to isolate only members of that nation's particular dominant group. Participant sex and age are included in this study as relevant demographic variables, as both variables have been shown to influence the relationship between fear of COVID-19 and ethnocentrism (Lippold et al., 2020; Markinović et al., 2023). See Table 1 for demographic information and Table 2 for means, standard deviations, and correlations.

The measures for this study included the Generalized Ethnocentrism Scale (Neuliep & McCroskey, 1997), a Fear of COVID-19 Scale modified from a Fear of Aids Scale (Bouton et al., 1987), and demographic questions. All measures were translated from English by bilingual speakers who discussed the translations with additional bilingual speakers to clarify all conceptual and content related

**Table 1**
Demographics.

| Nation | Age | | Sex | |
|---|---|---|---|---|
| | *M* | *SD* | Male | Female |
| Argentina | 29.90 | 6.13 | 125 | 95 |
| Brazil | 27.93 | 3.85 | 213 | 197 |
| Chile | 30.94 | 7.31 | 194 | 173 |
| China | 30.30 | 4.37 | 122 | 134 |
| India | 23.4 | 3.37 | 116 | 286 |
| Kenya | 32.4 | 5.04 | 118 | 108 |
| Nigeria | 36.4 | 4.74 | 102 | 106 |
| Peru | 26.7 | 2.12 | 154 | 97 |
| Singapore | 30.4 | 1.14 | 149 | 149 |
| South Africa | 30.9 | 6.56 | 177 | 148 |

**Table 2**
Means, Standard Deviations, and Correlations.

| Argentina | | | | | |
|---|---|---|---|---|---|
| Variable | (1) | (2) | *M* | *SD* | *α* |
| (1) Ethnocentrism | - | | $2.96_{diptx}$ | .40 | .75 |
| (2) Fear of COVID | .34** | - | $3.21_{goqr}$ | .40 | .78 |
| Brazil | | | | | |
| Variable | (1) | (2) | *M* | *SD* | *α* |
| (1) Ethnocentrism | - | | $3.19_{frstuv}$ | .45 | .78 |
| (2) Fear of COVID | .26** | - | $3.18_{dlmn}$ | .46 | .72 |
| Chile | | | | | |
| Variable | (1) | (2) | *M* | *SD* | *α* |
| (1) Ethnocentrism | - | | $2.97_{chosw}$ | .35 | .78 |
| (2) Fear of COVID | .05 | - | $3.10_{f}$ | .41 | .80 |
| China | | | | | |
| Variable | (1) | (2) | *M* | *SD* | *α* |
| (1) Ethnocentrism | - | | $3.02_{mvw}$ | .60 | .71 |
| (2) Fear of COVID | .69** | - | $2.98_{iknrt}$ | .69 | .74 |
| India | | | | | |
| Variable | (1) | (2) | *M* | *SD* | *α* |
| (1) Ethnocentrism | - | | $2.69_{aefghijlm}$ | .59 | .81 |
| (2) Fear of COVID | .46** | - | $2.78_{acdefghi}$ | .76 | .83 |
| Kenya | | | | | |
| Variable | (1) | (2) | *M* | *SD* | *α* |
| (1) Ethnocentrism | - | | $3.15_{jx}$ | .50 | .84 |
| (2) Fear of COVID | .27** | - | $3.18_{hst}$ | .54 | .82 |
| Nigeria | | | | | |
| Variable | (1) | (2) | *M* | *SD* | *α* |
| (1) Ethnocentrism | - | | $3.03_{lqu}$ | .61 | .79 |
| (2) Fear of COVID | .76** | - | $2.87_{bjmpqs}$ | .69 | .82 |
| Peru | | | | | |
| Variable | (1) | (2) | *M* | *SD* | *α* |
| (1) Ethnocentrism | - | | $3.02_{bgnr}$ | .33 | .82 |
| (2) Fear of COVID | .30** | - | $3.07_{elop}$ | .38 | .80 |
| South Africa | | | | | |
| Variable | (1) | (2) | *M* | *SD* | *α* |
| (1) Ethnocentrism | - | | $3.14_{abcd}$ | .50 | .86 |
| (2) Fear of COVID | .35** | - | $3.15_{ab}$ | .54 | .87 |
| Singapore | | | | | |
| Variable | (1) | (2) | *M* | *SD* | *α* |
| (1) Ethnocentrism | - | | $3.16_{enopq}$ | .55 | .89 |
| (2) Fear of COVID | .31** | - | $3.15_{cjk}$ | .50 | .87 |

*Notes:* Subscripts identify significant mean differences based on Games-Howell post-hoc comparison.
** $p \leq .001$.

questions: English to Spanish (κ =.86), Portuguese (κ =.83), and Mandarin (κ =.81). Confirmatory factor analysis (CFA) was conducted to determine validity following criteria set by Hu and Bentler (1999). Such validity analysis is critical when using a measure in a context for which it was not developed (Croucher & Kelly, 2019). Acceptable fit indices were a comparative fit index (CFI) $\geq$ .90, goodness of fit index (GFI) $\geq$ .90, a standard root mean residual (SRMR) $\leq$ .08, and root mean square error approximation (RMSEA) $\leq$ .10.

## Generalized ethnocentrism scale

Ethnocentrism was measured using Neuliep and McCroskey's (1997) Generalized Ethnocentrism Scale. Items ranged from 1 *strongly agree* to 5 *strongly disagree*. A sample item is, "Most other cultures are backward compared to my culture". Items 2, 9, and 13 were dropped because of insufficient fit, $\chi 2(95) = 197.84$, $p < .0001$, CFI = .94, GFI = .93, SRMR.07, RMSEA = .07.

## Fear of COVID-19

To measure fear of COVID-19 as a threat, three items were used. These items were: "I am afraid I will contract COVID-19," "I worry that COVID-19 will spread in my community," and "I think I will die from COVID-19." Responses ranged from 1 *strongly disagree* to 5 *strongly agree*. No items were dropped for fit, $\chi 2(60) = 27.15$, $p < .01$, CFI = .95, GFI = .95, SRMR.06, RMSEA = .08.

## Results

The hypothesis predicted a positive relationship between ethnocentrism and fear of COVID-19. To test this hypothesis, Pearson

correlations were conducted. This hypothesis was supported in each nation, except for Chile ($r = .05$, $p = .34$). See Table 2 for means, standard deviations, and correlation results.

The RQ asked how levels of ethnocentrism and fear of COVID-19 differed between the nations. To answer this question, a multiple analysis of covariance (MANCOVA) was conducted. The dependent variables were ethnocentrism and fear of COVID-19. The fixed factor was nation, and the covariates were sex (male/female) and age. The MANCOVA revealed a significant difference in ethnocentrism and fear of COVID-19 based on nation, $F(18, 5900) = 19.79$, $p < .001$, Wilk's lambda = .89, partial eta$^2 = .06$ and sex, $F(2, 2950) = 8.16$, $p < .001$, Wilk's lambda = .99, partial eta$^2 = .02$. Age did not have a significant effect, $F(2, 2950) = 2.25$, $p = .11$, Wilk's lambda = .01, partial eta$^2 = .001$. Follow-up post-hoc tests using Games-Howell's test revealed numerous differences between the nations on ethnocentrism and fear of COVID-19. Brazil scored the highest on ethnocentrism and India scored the lowest. In terms of fear of COVID-19, Argentina scored the highest and India the lowest. Significant differences are identified in Table 2.

Since the MANCOVA identified fear of COVID-19 and ethnocentrism differing significantly based on sex, a follow-up independent samples *t*-test was conducted on both variables exploring differences based on sex. Results revealed, men were higher on ethnocentrism, $t(2901.37) = 5.39$, $p < .001$ than women, and men were higher on fear of COVID-19, $t(2777.52) = 5.21$, $p < .001$.

## Discussion

This cross-national study explored ethnocentrism and fear of COVID-19 in 10 Global South nations. Results revealed ethnocentrism and fear of COVID-19 are positively correlated in nine of the 10 nations surveyed. These results support previous research showing a positive relationship between ethnocentrism and fear of COVID-19 (Croucher et al., 2022; Huber et al., 2022). The strongest correlations are found in Nigeria ($r = .76$) and China ($r = .69$), while the weakest correlations are in Chile ($r = .05$) and Brazil ($r = .26$). The strong relationship between ethnocentrism and fear of COVID-19 in Nigeria and China could be explained by reciprocal racism. During the pandemic Asians, particularly ethnically Chinese people who were minorities in other countries, were the recipients of heightened fear and ethnocentrism (Jacobs & Okeke, 2022; Nigeria slips into recession blamed on COVID-19 and oil prices, 2020; Sadiq et al., 2023). Fear and ethnocentrism felt towards minorities extends further than towards Asian minorities. In China, racism against Africans increased dramatically during COVID-19 (Burke et al., 2020). It was reported that during the pandemic, many Africans in China had their passports confiscated, were evicted from homes, refused service in shops, and forced into quarantine facilities despite testing negative for the virus (Pilling & Wong, 2020). As lockdowns continued and the virus wore on, racism and ethnocentrism toward Africans increased in China.

Results revealed two additional findings. First, across the full sample, men scored higher on both ethnocentrism and fear of COVID-19. These results support and counter previous research. The finding that men have higher levels of ethnocentrism mirrors previous research (Young et al., 2017). However, previous work has shown women have higher fear of COVID-19 (Lippold et al., 2020), which was not the case in this study. While the pandemic is over, future research should continue to explore differences between the sexes in responding to crisis situations, such as pandemics. Second, the results suggest differences in levels of ethnocentrism and fear of COVID-19 between these nations. India scored lowest on fear and ethnocentrism, while Brazil tended to be one of the highest on both indices. Brazil's ranking among the nations could be partially attributed to the rhetoric of former President Bolsonaro, who scapegoated many groups during COVID-19, such as Afro-Brazilians (Croucher et al., 2022). India's lower ranking is somewhat surprising, considering tensions during COVID-19 ongoing and historical tensions between Muslims and Hindus (Frayer, 2020).

## Theoretical implications

Two implications can be drawn from this study. First, this study cross-culturally expanded our understanding of the relationship between ethnocentrism and fear, specifically fear of a contagion. The more fearful an individual was of the COVID-19 virus, the more likely they were to have ethnocentric feelings toward the minority group blamed for the spread of the virus in their community. These results add to literature (Croucher et al., 2022; Faulkner et al., 2004) supporting the argument that individuals who feel vulnerable to a contagion (i.e., COVID-19, HIV/AIDS) are more likely to demonstrate ethnocentric feelings/actions toward an outgroup blamed for carrying and/or spreading that contagion. While intergroup communication literature has historically explored ingroup/outgroup dynamics, the significance of contagions in this dynamic cannot be understated. Future research should continue to explore the extent to which a contagion influences the ingroup/outgroup dynamic.

Second, this study considers culture at the macro-level (Herzog et al., 2020). A significant body of research has focused on comparing national groups at the meso or group level, normally using cultural dimensions as the reference point (Hofstede, 2001). Building off recommendations (Croucher & Kelly, 2019; Herzog et al., 2020), this study compares diverse political/economic geographies. While each nation is part of the Global South, this macro-level approach appreciates how each nation differed in their approach to the COVID-19 pandemic, and other societal differences in each nation: medical systems, GDP, etc. Within this frame of reference, there is vast difference, as evidenced by the data. Future cross-cultural research should continue to explore how other factors such as health systems, regionalism, governmental relations and policies, climate change, and technology.

While online samples, such as those collected by Qualtrics, are comparable to other samples in published research, such sampling is a form of convenience sampling. Thus, the data for this study must be interpreted with some caution. Second, while participants were prompted to respond to questions based on the target group in their nation, it is possible that ethnocentrism could be a result of a pre-existing bias, and not of fear of COVID-19. This study cross-culturally examined fear of COVID-19 and ethnocentrism in 10 Global South nations. This study not only replicates previous findings, showing a positive relationship between these constructs, but also expands our understanding of ethnocentrism and fear of COVID-19 into new national contexts.

## CRediT authorship contribution statement

**Croucher Stephen:** Writing – review & editing, Writing – original draft, Validation, Supervision, Project administration, Methodology, Investigation, Formal analysis, Data curation, Conceptualization. **Ashwell Doug:** Writing – review & editing, Writing – original draft. **Dutta Mohan:** Data curation. **Cullinane Jo:** Writing – review & editing. **Condon Shawn:** Data curation. **Spencer Anthony:** Data curation, Conceptualization.

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