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# Stigmatizing Monkeypox and COVID-19: A Comparative Framing Study of *the Washington Post's* Online News

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**Abstract:** Background: Stigma in health can result in a broad range of vulnerabilities and risk for patients and healthcare providers. The media plays a role in people's understanding of health and stigma is socially constructed through many communication channels including via media framing. Among health issues that were affected by stigma recently were the Monkeypox and Covid-19. Objectives: This research aims to examine how *The Washington Post* framed stigma around monkeypox and COVID-19. Guided by the framing theory and stigma theory, online news coverage for monkeypox and COVID-19 were analyzed to understand the construction of social stigma through the media reporting. Methods: This research employed a qualitative content analysis to compare news framing in *The Washington Post* online news regarding monkeypox and COVID-19. Results: Based on endemic, reassurance, and sexual transmission frames, the *The Washington Post* predominantly defined Africa as the source of the disease, blames gay communities, and emphasizes no need to worry about the spread of the monkeypox virus. For the COVID-19 coverage, *The Washington Post* described China as the source of the coronavirus and constructs the image of panic towards the spread of the virus. Conclusions: The shifts in stigma discourse essentially manifest racism, xenophobia, and sexism in public health. This research affirms that the media reinforces stigma phenomenon in health through framing and offers constructive suggestions for mitigating this issue.

**Keywords:** stigma; news frame; monkeypox; COVID-19; *The Washington Post*; online news

## 1. Introduction

The COVID-19 pandemic has brought an enormous challenge and a high uncertainty to the health and safety of all human beings [1-3]. Similarly, the monkeypox outbreak spread worldwide and threatening global public health security [4-6]. The emergence of the monkeypox outbreak before the world have completely controlled COVID-19 [7], has added extra burden to public health system. The Monkeypox, a viral zoonosis caused by the monkeypox virus [8,9], was initially discovered in monkeys in a Danish laboratory in 1958 [10]. The World Health Organization officially declared the Monkeypox outbreak as a public health emergency in July 2022 [11,12]. As of October 3, 2022, WHO [13] reported more than 68,000 confirmed cases of monkeypox globally. Monkeypox has become another significant public health issue in the post-pandemic era.

Monkeypox disease was initially considered to be endemic to the sub-Saharan regions [4,6,9,14], as it used to spread predominantly in African countries [5,8,15]. However, the recent monkeypox outbreak is more common in the non-endemic countries [6]. As severe as the COVID-19, the United States has become one of the worst-affected countries by monkeypox outbreaks [13]. As of September 2022, the CDC<sup>1</sup> [16] has reported 26,000 confirmed cases, attracting extensive attention from the American media. Media reporting

<sup>1</sup> The full name of the CDC is Centers for Disease Control and Prevention, an administrative agency of the United States federal government.

have some role in framing the monkeypox outbreak which may lead to stigma construction surrounding this disease [17-19].

Historical experience has shown that a particular stigma narrative always accompanies the initial stage of each outbreak [17,20-24]. Stigma is often related to the use of specific framing strategies by news media [25-32]. In the COVID-19 pandemic era, stigma and discrimination against Chinese or Asian have bred in the American society [1,23,28,33,34], because online media favors extreme news frames to label China as a predominant “virus source” and this has cultivated an anti-Asian discrimination narratives [35-37]. In the early monkeypox outbreak, many blamed the African countries for causing the monkeypox outbreak [18,38,39], largely misguided by media frames. In addition to racism, discrimination against monkeypox disease is also directed at gays [18,19,40], as the initial confirmed cases were incompletely attributed to intimate sex between men [41]. However, there are considerable research gaps in the framing research on monkeypox issues. Comparison on the differences in framing and stigma between monkeypox and COVID-19 issues will enhance understanding of stigma construction in health, particularly in the post-pandemic era.

This research conducts a qualitative framing analysis of *The Washington Post's* online coverage of Monkeypox and COVID-19, guided by the news frame theory and stigma theory to examine and compare how the *WP* socially frames stigma surrounding these two diseases.

### 1.1. News Framing Theory

News frame refers to a mode of selection, emphasis, and exclusion in which the media organizes news discourse and constructs social meaning [42]. Through the frame, the news media removes some elements of perceived facts and reconstructs and disseminates specific meanings to manipulate reality [43]. To explore the of frame's internal devices and construction strategies, Gamson and Lasch [44] propose the concept of interpretive package which assign and construct specific symbolic meanings for strips of events. It consists of core frames and positions. Core frame is synthesized as a whole by framing devices (i.e. metaphors, exemplars, catch-phrases, depictions, and visual images), and the positions are divided into different parts by reasoning devices (i.e. roots, consequences, and appeals to principle) [44]. In framing devices, metaphors refer to a rhetorical device that includes a principal subject and an associated subject [44]. Conversely, exemplars refer to past or present real events [44]. Meanwhile, depictions describe issues in a specific way, catch-phrases refer to tag-line or slogans summarizing frame elaborations, and visual images refer to using images to suggest principal subjects [44]. On the other hand, for reasoning devices, on the other hand, roots refer to potential causes, consequences refer to consequences from specific events, and appeals to principle refer to general or moral claims about events [44].

By analyzing the symbolic elements in the interpretive package, it is possible to elaborate on how a particular news frame organizes and constructs discourse and meaning in various issues.

### 1.2. Stigma Theory

Goffman [45] initially proposes the concept of stigma, referring to an attribute that degrades individuals from usual people to a “tainted, discount one”. The labeling theory proposed by Becker [46] regards stigma as a labeling phenomenon that is labeled as deviant due to specific attributes [47], aptly explaining the underlying mechanisms and salient manifestations of stigma from a semiotics perspective. Based on labeling theory, stigma is essentially a labeling or marking behavior that associates particular individuals or groups with stereotypes about it [48]. Negative stereotypes and flagging deviance are significant parts of the stigma. In addition to labels and stereotypes, devaluing stigmatized groups' social identities [49] is also a component of stigma. Subsequently, stigma is conceptualized

systematically [50], including labeling differences in specific groups, associating specific groups with their negative stereotypes, separating “us” from “them” (p. 370), making the specific groups’ status loss and discriminating against them, and reliance on power [50].

Additionally, stigma is also defined as social exclusion. Groups with specific attributes are excluded from social interaction through stigma [51]. Based on this, stigma is regarded as an adaptive behavior using discrimination against specific groups with perceived threat attributes to protect oneself from uncertain consequences [47]. In other words, stigmatization against specific groups is stimulated with the exclusion of specific groups that are perceived to possess certain dangerous attributes to guard the main group themselves from perceived threats. Social exclusion emphasizes the superiority of the self-group [47] and the “otherness” of the marginalized group [19,50].

Naturally, various consequences for the stigmatized group are possible [50]. The immediate consequences of stigma involve fear [23,52], abuse and violence [31], social exclusion [51], and loss of status and discrimination [50] against social outgroups. Meanwhile, stigmatized groups perceive “otherness” and marginalization, widening the social divide with a mainstream group [19], and causing stigmatized groups to disclose disease selectively [53] or even voluntarily relinquish their powers, which is indirect consequences of stigma.

Adhering to existing theory and research, the formation mechanism of stigma is outlined. When a group perceives uncertain threats [47], negative stereotypes are associated with specific groups with perceived threat attributes [48], resulting in devaluing the specific group’s social identity [45,49], making them status loss and discriminating against them [50], and excluding them [51]. Accordingly, stigma is constructed socially.

### *1.3. Stigma on COVID-19 and Monkeypox*

Many social epidemiologists regard stigma as an independent social determinant of health. Historically, it shows that stigma is socially constructed [50,54] and has an intimate and inseparable link with infectious diseases: from AIDS [21], SARS [22], MERS [20], and Ebola [24] to nowadays COVID-19 [23,36,53,55] and Monkeypox outbreak [19]. Patients, suspected infected persons or specific groups with attributes associated with infectious diseases are prime targets for stigma [56]. Infectious diseases, especially the COVID-19 pandemic with its high level of uncertainty [2], are more likely to induce stigma and accusations against social outgroups to overcome their lingering psychological fears [57] or maintain self-esteem [58]. Racism [37,47], xenophobia [52,56], and sexism [59] are the logical underpinnings and cultural norms to socially stigmatize and marginalize groups with specific attributes related to infectious diseases.

With the outbreak of COVID-19, stigma and discrimination against Chinese or Asian based on racism and xenophobia were rampant [23,34,56], and even led to large quantities of crimes against Asians [1,28,37]. Misinformation related to COVID-19 is rife in online media [60,61], which exacerbates the stigma surrounding COVID-19. The Trump administration even named the novel coronavirus as “China virus” to pave the way for its political blame on China [33]. Being identified as Asian can significantly increase the likelihood of stigma and discrimination [34].

For the monkeypox virus, discrimination and prejudice toward the higher-risk groups started while the current stigma on COVID-19 still lingers. First, monkeypox has been labeled unilaterally as “endemic in Africa” [62], because it has been largely concentrated on the African continent in the past [5,15]. Stigma against African countries can satisfy the colonial mentality of domination and exploitation by the “stigmatizers” [18]. Additionally, stigma against gay and bisexual groups were observed, as media reports of confirmed cases are mostly concentrated among men who have sex with men [17], alluding to the monkeypox virus as a “homosexual transmission” disease [19]. Sexuality of the gays and bisexual is defined as amoral and negative, based on prevailing cultural norms and social traditions [19].

In COVID-19 or monkeypox outbreaks, stigma inevitably creates severe harms towards health, safety and other socio-political implications.

#### 1.4. Stigma and News Frame

Media framing plays a significant role in stigma construction. Stereotypes and labeling are salient features of stigma [45,48]. For instance, news media always use frames to remove some elements of perceived realities, reorganize narratives, and construct specific discourses [43], or help construct an identity for the “other” [63]. News frames convey the discourses regarding specific groups and reconstruct their identities (stereotypes), separating “us” (the mainstream group) from “them” (the specific group) [50]. Furthermore, through the symbolic construction of a specific frame, the stereotypes against specific groups with specific attributes is shaped and deepened, which allows specific groups to experience status loss and discrimination [50]. Therefore, the media stereotype the specific identity of individuals or groups through a specific news frame to socially devalue it [57], and the stigma against individuals or groups is socially constructed and diffused.

The context constructed by media frames provides a breeding ground for stigma and escalates negative stereotypes of stigmatized groups [29]. On the other hand, labeling is a symbolic interaction process, and the news frame is a symbolic device for media organizations to construct social meaning [44]. Therefore, media framing is essentially a communication practice that uses specific symbols to label a series of events and groups. Furthermore, news frames with implied stigma in the media can further contribute to public stigma against specific groups [26].

This research identifies the following research gaps by integrating empirical research on social stigma and news frames. Firstly, there are significant research gaps in analyzing media frame regarding monkeypox. What remains unknown is how media use news frame to construct the monkeypox stigma. Secondly, there are apparent research loopholes in comparing media frames and constructed stigma regarding the monkeypox and COVID-19 issue.

Accordingly, this research selects *The Washington Post's* online news coverage of Monkeypox and COVID-19 as a case study and elaborates on how social stigma is constructed. This research proposes the following research questions:

**RQ 1:** What news frames on monkeypox and COVID-19 identified in *The Washington Post*?

**RQ 2:** How does *The Washington Post* frames stigma regarding monkeypox and COVID-19 issues?

## 2. Materials and Methods

### 2.1. Research Methods

This study conducts a qualitative content analysis to compare framing and social stigma on monkeypox and COVID-19 issues. Qualitative content analysis involves both manifest and latent content analysis [64,65]. The core objective of this research is to explain the underlying meaning constructed by the news frame, that is, the analysis of latent content. Therefore, qualitative content analysis is suitable for this study to thematically justify the underlying meanings constructed by a particular frame and its latent connection with the social context.

This study uses a qualitative analysis framework to identify latent meanings in frames based on the interpretive packages proposed by Gamson and Lasch [44].

### 2.2. Samples and Data

*The Washington Post*, founded in 1877, is regarded as a leading elite newspaper in the United States [66,67], and has strong influence and news quality [68]. Compared to national newspapers such as *The New York Times*, the *WP* targets a broader audience [69]. As

for the time frame selection, many studies have confirmed that the early stages of infectious diseases are often accompanied by stigmas and biased narratives targeting specific groups [23,25,29,31,35]. Therefore, reports of early monkeypox and early COVID-19 should be selected to study stigma in media coverage better. This study defines the early time frame as within one month after the day when the first confirmed case is officially reported publicly. Chinese officials officially reported their first confirmed case of COVID-19 on 31 December 2019 [70], while UK officials reported their first confirmed case of monkeypox this year on 7 May 2022 [71]. Therefore, the time frame for the COVID-19 reporting sample is from 31 December 2019 to 30 January 2020, and the time frame for the monkeypox reporting sample is from 7 May 2022 to 5 June 2022.

Online news coverage of monkeypox and COVID-19 are drawn from WP's official website (washingtonpost.com) via keyword search with the terms "monkeypox", "coronavirus" and "COVID-19". Reports that do not fit the theme are excluded. In the end, 71 online news reports are sampled (N=71), including 15 monkeypox reports and 56 COVID-19 reports.

### 2.3. Study Instrument

The main coding category involves news frames. This study preliminarily identifies five news frames and their operational definitions based on existing theoretical and empirical studies [72,73], namely: the Reassurance, Attribution of Responsibility, Governance, Panic, and Science. This study also introduced two new frames were not defined by existing theories and studies, namely the Endemic frame and the Sexual Transmission frame. Endemic frame refers to: the health risk is a typical endemic disease within a country or region. Sexual Transmission frame refers to: the health risk is caused by a specific sex activity. A codebook containing complete coding categories and operational definitions is integrated and it is provided in the supplementary file.

An inter-coder reliability test was performed on two coders and the Kappa value of the media sample for monkeypox is 0.814, the media sample for COVID-19 is 0.817, and the percentage of agreements for both reaches 80%, as shown in Table 1.

**Table 1.** Kappa Statistics and Coding Agreement of the Samples for Monkeypox and COVID-19 Issues.

Coding Category	Kappa Value ( $\kappa$ )	Percentage of Agreements	Total Sample
Monkeypox Coverage	.814	87.5%	8
COVID-19 Coverage	.817	84.6%	13

### 2.4. Data Analysis

Analytical methods based on qualitative paradigms are identified, as shown in Table 2. Interpretive package is composed of a central frame and positions [44]. Framing devices refer to the symbolic elements of constructing meaning, while reasoning devices refer to the construction strategies and functions of a specific frame. The specific positions used inside each frame package are listed separately. It should be noted that a frame package does not include all devices. Only the specific identified devices need to be listed in each frame. Through the interaction of specific devices, the positions in the frame package are determined, which can help explain the underlying meaning of the news frame construction.

**Table 2.** Conceptual Framework for Framing Analysis on Monkeypox and COVID-19 Issues.

Framing Devices	Reasoning Devices
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News Frame	Positions	Meta-phors	Exem-plars	Catch-phrases	Depic-tions	Visual Im-ages	Roots	Conse-quences	Ap-peals to Principle
Frame 1									
Frame 2									

After completing the qualitative data analysis of all the samples, the study identifies the differential discourses constructed by the specific frame according to the patterns of the theme.

### 3. Results

Based on the conceptual framework of this study, news frames on the monkeypox issue and COVID-19 issue in *WP* and symbolic devices in the frames are summarized, as shown in Table 3. Depending on the differential meanings constructed by a particular frame, it is required to compare the framing strategies and discourses involved to thematically elaborate on social stigma from COVID-19 to monkeypox.

#### 3.1. From “China as the Source” to “Africa as the Source”

The results showed that the *WP* uses the same news frame, the endemic frame, for different origins of the epidemic to emphasize that China is the source of the COVID-19 pandemic and Africa is the origin of monkeypox outbreaks. Although the endemic frame remains unchanged, the differences are apparent in the symbolic devices within the frame and the discourse it constructs regarding COVID-19 to monkeypox.

##### 3.1.1 “China as the Source”

On the one hand, through the endemic frame, the dominant stigma discourse of China as the source of the epidemic is constructed regarding the COVID-19 issue. Specifically, the first position directly labels the coronavirus as a “Chinese virus”. The catchphrase “potentially deadly Chinese coronavirus” is used to name the virus “Chinese coronavirus” for the first time, stigmatizing China and bringing more hatred to China. The prominent depiction includes, in the first example, a Chinese man wearing a mask is depicted as an iconic image of COVID-19, implying that only China wears a mask because of the coronavirus and conveying stereotypes against China.

*Pedestrians in disposable face masks have become a defining image of the coronavirus outbreak in China [74].*

The second position defines Wuhan of China as the source and severely stigmatizes Wuhan citizens. *WP* tends to the metaphor “Specter in China” to construct China as the birthplace of the coronavirus. The catchphrase “Wuhan is the epicenter of coronavirus outbreak” directly defines Wuhan as the outbreak’s source. In addition, the frame also uses the following reasoning devices to consolidate this position. The second example uses roots, a reasoning device, to directly define Wuhan as the source of the epidemic and label Wuhan citizens as “virus carriers”, which stigmatizes the Chinese, especially the citizens of Wuhan, and invites hatred for them.

*Cases in China continue to multiply, and five million residents of Wuhan, where the virus originated, have left the city, some of them surely carrying the disease [75].*

##### 3.1.2 “Africa as the Source”

African countries, on the other hand, have been stigmatized as “the original source” for monkeypox outbreaks. There are mainly two positions in this discourse. The first position solidifies an old stereotype that “monkeypox is an endemic disease in African countries”, so it is rare and unusual to find cases in Europe and the United States. The catchphrase “Rare monkeypox case confirmed in Massachusetts” emphasizes that monkeypox cases are rare phenomena in the United States, implying that confirmed cases in Africa are common and Africa is actually the source of monkeypox. Similarly, the first example below cites an anonymous expert, where the word “unusual” reinforces the position of rare cases in the United States. In other words, only confirmed patients with a history of traveling in Africa are normal, and this discourse undoubtedly implies that Africa is the source of monkeypox. However, there is currently no evidence that confirmed cases in European and American countries are related to African travel [17,76], so the depiction is extreme. Meanwhile, the roots are primarily involved in establishing Africa as a typical source of monkeypox and stereotyping Africa.

*Experts say the latest cases are unusual because of the level of spread among patients with no known travel history to Africa [77].*

The second position states that it is required to investigate the African travel history of patients and refrain from African wildlife products. In the second example, the fact that monkeypox patients need to be investigated whether they have a history of sojourn in Africa reinforces the discourse that Africa is inextricably linked to the outbreak of monkeypox and reaffirms the label “Africa is the source”. In the third example, the ban on African wildlife products is highlighted as the consequences of the monkeypox epidemic, which brings invisible social distancing to African countries. The second and third examples are shown below:

*“None of these people reported having recently been in central or west African countries where monkeypox usually occurs, including the Democratic Republic of the Congo and Nigeria, among others,” the CDC alert says [78].*

*... travelers should refrain from using products... made from African wild animals [78].*

Thus, despite using the same endemic frame for COVID-19 and monkeypox, *WP* constructs differentiated social stigma and epidemic discourse based on differences in internal symbolic devices. From the COVID-19 pandemic to the monkeypox epidemic, the objects and groups of stigma have changed qualitatively—from China or the Chinese to African countries. Both China and Africa have been symbolically labeled “the source of the epidemic”, and what is more, Wuhan citizens are directly labeled as “virus carriers” negatively, which tends to cause the corresponding groups to suffer from varying degrees of social distancing and racist discrimination.

### 3.2. From Panic to Reassurance

From COVID-19 to monkeypox, it uses the panic and reassurance frames, respectively, to construct public perceptions and attitudes towards different outbreaks, emphasizing that COVID-19 is worrying or fearful while monkeypox is not to be overly concerned. Panic and reassurance frames are a pair of competing frames in terms of conveyed discourse and meaning, facilitating *WP* smoothly constructing differential discourse from COVID-19 to monkeypox.

#### 3.2.1. Panic and COVID-19

On the one hand, panic frames are used to construct discourses about the scare of the coronavirus regarding the COVID-19 issue. Specifically, it mainly includes three positions. Adding to the atmosphere of panic through the metaphor “terrorism or tornadoes”, the first position describes the novel coronavirus as a mysterious and terrifying virus. For another example, the description “What we know about the mysterious, pneumonia-like

coronavirus spreading in China and elsewhere” [79] creates an atmosphere of high uncertainty. The second position claims that China’s healthcare system has encountered obstacles as the outbreak intensifies. For instance, the first example below describes the shortage of medical supplies and personnel in China, emphasizing that China’s health system is overwhelmed and constructing an untrustworthy discourse for China’s fight against the epidemic.

*There are not enough hospitals and not enough beds, not enough doctors and not enough nurses, not enough rubber gloves and not enough face masks [80].*

Based on the foreshadowing of the first two positions, the third position, “the spread of the epidemic has widely caused public concern”, has logically become the mainstream position of the panic frame, in which current exemplars based on individual stories and feelings are often used. For example, in the second example, through exemplars, a framing device, the personal experiences of foreigners living in China are invoked to claim that the locals are worried and rush for masks. Similarly, the third example again uses exemplars and conveys the anxiety of a local citizen who wants to leave Wuhan. These exemplars subtly put the label “out-of-control chaos in the early spread of the coronavirus” to China, such as masks that are quickly sold out and citizens eager to leave Wuhan, greatly stimulating the audience’s concern, worries and fears about the coronavirus. In addition, the fourth example describes the signs of human-to-human transmission as “discouraging”, subtly increasing the fear regarding China. Finally, the frame proposes consequences caused by COVID-19 concerns, a reasoning device, that is, Tokyo 2020 is rescheduled, highlighting global concerns about epidemic. The second to fourth examples are as follows:

*Though his girlfriend<sup>2</sup> lives far from Wuhan, everyone around her is freaking out, she’s told him. Whenever someone offers surgical masks for sale online, she said, the masks are gone within minutes [81].*

*“Whatever train ticket I can get, as long as I can get out of Wuhan,” one would-be passenger at Han-kou station told a local reporter early Thursday [82].*

*Some early signs are discouraging: Six countries, including China, have confirmed human-to-human transmission of the infection [75].*

### 3.2.2. Reassurance and Monkeypox

Contrary to the discourse conveyed in COVID-19, WP mainly uses the reassurance frame and constructs news discourse that the monkeypox outbreak is nothing to worry about. The frame’s position claims that the US vaccine is sufficient and effective and that there is no need to worry as with COVID-19.

First, the metaphor “monkeypox is not the next coronavirus pandemic” and catchphrase “no need to panic about monkeypox” are utilized to separate monkeypox from COVID-19 and reassure the audience that the monkeypox outbreak is not a new round pandemic. Meanwhile, the first example below uses the exemplar “high efficacy of smallpox vaccine” to prove that even if there is no unique vaccine against the monkeypox virus, its alternative vaccine – the smallpox vaccine is still effective in preventing monkeypox.

*Studies suggest that the smallpox vaccine is at least 85 percent effective against monkeypox... [83].*

In addition, it uses several depictions to further “cool down” the severity of monkeypox. For example, the second example paraphrases President Biden’s views to appease anxiety and strengthen public confidence in the government. The third example separates the danger and transmissibility of monkeypox from the coronavirus, suggesting that the

<sup>2</sup> “His girlfriend” refers to an ordinary Korean-American studying in China.

public does not need to be overly concerned as with COVID-19. The second and third examples are shown below:

*President Biden said... there are sufficient vaccine doses available to combat any serious flare-up of the disease [84].*

*And monkeypox has key differences from the fast-moving, more-transmissible coronavirus that make it easier to contain and treat [85].*

Thus, *WP* uses the panic frame and reassurance frame from COVID-19 to monkeypox, respectively, constructing diametrically opposed news discourses. First, labeling of China as “panicking and disorderly” may breed public distrust and fear of China due to the spread of the novel coronavirus. On the contrary, the reassurance frame has repeatedly emphasized sufficient and effective vaccine storage in the United States to appease the emotions of the American people and enhance public confidence in the federal government’s vaccine policy. In short, facing the spread of the monkeypox epidemic in the West, *WP* adopts a reassurance discourse and regards the spread of the coronavirus in China as a dire threat. The differential discourse does not depend on the specificity of the two epidemics but is more controlled by its xenophobia.

### 3.3. From Blaming the Government to Blaming Gays

In addition, *WP* favors different frame packages at the level of attribution. The attribution of responsibility frame is enlisted to blame the government for fault in the spread of COVID-19, while the sexual transmission frame predominantly stigmatizes gay communities.

#### 3.3.1. Blaming the Government

On the one hand, it constructs the discourse of accusing the Chinese government through the attribution of responsibility frame. There are mainly two positions. The first position, deriving from the labels “Wuhan as the epicenter” and “China as the source”, claims that the Chinese government, especially the local government in Wuhan, is responsible for the spread of the epidemic. First, *WP* mentions the exemplar that “the Wuhan local government is slow to report new cases as it was in the past SARS period” and the catch-phrase that “China should learn from previous outbreaks (i.e. SARS)”, which claims that lessons are not learned from SARS by China and blames on the local government in Wuhan for not releasing epidemic data promptly. Second, the first example below depicts official Chinese disclosures as atypical actions, accusing the government of not releasing information on the outbreak as expected and bringing more criticism to China.

*Nor have Chinese officials provided a timeline of patient illnesses, information that is typically made public quickly in disease outbreaks [86].*

The second position claims that China previously failed to control illegal wildlife trade effectively. To get to the bottom of it, the position defines “Wuhan’s South China Seafood City” as the root of all problems, emphasizing that it is precisely because the Chinese government has not correctly controlled the wildlife trade that the epidemic broke out in the seafood market in Wuhan. Meanwhile, a visual image shows Chinese police investigating an illegal wildlife trade site. On the surface, the image tells that the government has taken action and cracked down on the illegal animal trade. However, in fact, it highlights that such illegal trade does exist in China, and this illegal trade can easily lead to the spread of infectious diseases. This framing strategy subtly blames the government for its faults, stigmatizes China, and deepens public hatred and discrimination against Chinese people. Further, the following example cites an anonymous expert claiming that the spread of the coronavirus is a consequence of China’s failure to learn from SARS to ban wildlife trade.

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*Experts say the country is paying a heavy price after the government failed to learn one of the most important lessons of the SARS... that diseases can easily mutate and spread to humans in markets where different species of live wild animals are kept in proximity... [87].*

### 3.3.2. Blaming Gays

The study found that the *WP* employs the sexual transmission frame to blame gay communities. The frame mainly constructs a position that the spread of the monkeypox epidemic may be related to sexual behavior between men. First, the catch-phrase that “monkeypox patients should abstain from sex” forcibly associates monkeypox with sexual behavior, implying that sexual behavior is inextricably linked to the outbreak. Furthermore, the first example below describes the expert response as “surprised”, labeling the monkeypox outbreak a “sexually transmitted disease”.

*The proliferation of cases linked to men who have sex with men has surprised experts... [77].*

Additionally, the following example primarily treats “gay, bisexual and other men who have sex with men” as monkeypox roots, potentially blaming gay communities for spreading the monkeypox epidemic. Meanwhile, the term “wider population” in this example subjectively defines gay communities as minority groups and separates them from so-called mainstream groups. The term “low” claims that the risk of infection in the “wider population” is low, which irresponsibly defines the susceptible population to the monkeypox virus. The consequences it brings not only stigmatize gays, but also may make other groups relax their vigilance and increase the risk of virus transmission. Therefore, the terms “wider population” and “low” label gay communities as “high-risk groups of monkeypox”, facilitating the marginalization and discrimination against this group.

*Rosamund Lewis, the WHO's technical leader on monkeypox, said... most confirmed cases have been identified in gay, bisexual and other men who have sex with men, and that the risk to the wider population is “low” [88].*

Thus, the attribution of responsibility frame blames the government's faults and inadequacies in the early coronavirus spread, while the sexual transmission frame tends to link gay communities to the spread of monkeypox. Through differentiated frames, *WP* blames the coronavirus spread on the Chinese government and brings more criticism and accusations to it, while labeling gays as “high-risk groups of monkeypox”, prompting gay communities in the monkeypox epidemic to be constantly marginalized. Essentially, it is all a stigma-shifting of a health crisis.

**Table 4.** Framing Analysis on Monkeypox and COVID-19 Issues.

Issue	News Frame	Posi-tions	Framing Devices				Reasoning Devices			
			Metaphors	Exemplars	Catch-phrases	Depictions	Visual Im-ages	Roots	Consequences	Appeals to Principle
COVID-19	En-demic	China's coro-navirus/Chi-nese corona-virus			The article mentions the first US case infecting potentially deadly Chinese coronavirus.	Pedestrians in disposable face masks have become a defining image of the coronavirus outbreak in China <sup>3</sup> .				
		Citizens leaving Wuhan, the source of the outbreak, carry the virus.	The article mentions: COVID-19 is Specter in China.		The article mentions: Wuhan is at the center of coronavirus outbreak.		The article mentions: Residents surely carrying the disease left Wuhan, where the virus originated.			
	Panic	Mysterious and scary coronavirus	The article mentions: The pandemic is terrorism or tornadoes.			What we know about the mysterious, pneumonia-like coronavirus spreading in China and elsewhere <sup>4</sup>				
		The health system is in trouble.				There are not enough hospitals and not enough beds, not enough doctors and not enough nurses, not enough rubber gloves and not enough face masks <sup>5</sup> .				
		The epi-demic causes widespread concern among the public.		The article mentions individual stories of people freaking out, snapping up masks, and even leaving Wuhan in a hurry.		Some early signs are discouraging: Six countries, including China, have confirmed human-to-human transmission of the infection <sup>6</sup> .			The article mentions: Several Tokyo 2020 qualifying events are rescheduled.	
	Attribution of Responsibility	Wuhan local government is responsible for the		The article mentions: Local authorities were slow to report the new disease as with SARS.	The article mentions: China should learn the lessons of SARS.	Nor have Chinese officials provided a timeline of patient illnesses, information that is typically made public quickly in disease outbreaks <sup>7</sup> .				

<sup>3</sup> The expression comes from Berger and Abutaleb [90].<sup>4</sup> The expression comes from Sun and Berger [97].<sup>5</sup> The expression comes from Fifield [98].<sup>6</sup> The expression comes from Sun and Bernstein [91].<sup>7</sup> The expression comes from Shih and Sun [106].

		epidemic due to untimely reporting the epidemic.								
		China previously failed to effectively control the illegal wildlife trade.		The article uses an expert's opinion to mention that China is suffering the cost for not learning the lessons of SARS to control the illegal wildlife trade.			A picture shows Chinese police investigated an illegal site for wildlife trafficking.	The article mentions: Virus comes from Wuhan's South China Seafood City that traded in game meat.	The article uses an expert's opinion to mention that China is suffering the cost for not learning the lessons of SARS.	
	Governance	Different policies to deal with COVID-19 are being implemented.							The article mentions: North Korea bans foreign tourists. Flights between Wuhan and the US banned.	
	Science	The novel coronavirus is the bane of COVID-19.						The article mentions: Chinese researchers isolate coronavirus, a bane of COVID-19.		The article mentions: The risks of xenophobia to the human rights should be widely concerned.
Monkeypox	Endemic	Monkeypox usually occurs in Africa, so it is unusual and rare to find many cases in Europe or America.			The article mentions: The monkeypox case confirmed in Massachusetts is rare.	Experts say the latest cases are unusual because of the level of spread among patients with no known travel history to Africa <sup>8</sup> .		The article mentions: Monkeypox is spreading undetected outside of Africa, where it is typically found.		
		It is required to investigate the African travel history of patients and refrain from African wildlife products.				"None of these people reported having recently been in central or west African countries where monkeypox usually occurs..." <sup>9</sup>			The article mentions: Travelers are banned from buying products made from African wildlife.	

<sup>8</sup> The expression comes from Nirappil [94].

<sup>9</sup> The expression comes from Diller [96].

	Reassurance	Vaccines are sufficient and effective, so there is no need to worry like COVID-19.	The article mentions: Monkeypox is not the next coronavirus pandemic.	The article mentions: The smallpox vaccine is 85% effective against monkeypox.	The article mentions: There is no need to panic about monkeypox.	President Biden said...there are sufficient vaccine doses available to combat any serious flare-up of the disease <sup>10</sup> . And monkeypox has key differences from the fast-moving, more-transmissible coronavirus... <sup>11</sup>				
	Sexual Transmission	It may be related to sex with men.			The article mentions: Monkeypox patients should abstain from sex.	The proliferation of cases linked to men who have sex with men has surprised experts... <sup>12</sup>		The article mentions: Most cases have male-to-male intimate sex, but the risk is low for the wider population.		

<sup>10</sup> The expression comes from Kim [104].

<sup>11</sup> The expression comes from Roubein and Beard [105].

<sup>12</sup> The expression comes from Nirappil [94].

#### 4. Discussion

This research conducts qualitative content analysis to elaborate on how the online news of *The Washington Post* (WP) frame stigma regarding monkeypox and COVID-19, guided by news frame theory and stigma theory. Results confirm meaningful differences in the news frames WP constructs stigma regarding monkeypox and COVID-19. It predominantly uses endemic, reassurance, and sexual transmission frames for the early monkeypox epidemic, which differs from endemic, panic, and attribution of responsibility frames in COVID-19 issues. Based on different frames, it accordingly constructs differential stigma from early COVID-19 to monkeypox outbreaks: from stigmatizing Chinese to stigmatizing Africans or gays; and from coronavirus spreading in China is panic to monkeypox spreading in the United States is nothing to worry about. The differentiated discourse reflects to the racist, xenophobic, and sexist stigmatizing nature of the media's framing of infectious disease issues.

Above all, the stigma against Africa or China is essentially a form of health racism. Despite the shift in stigmatized objects and groups from COVID-19 to monkeypox, the essence of this framing strategy—racism—maintained. Stigma theory suggests that when the group perceives a real threat, they try to transfer the perceived threat to the victim group by associating negative stereotypes with the victim group. This labeling strategy results in a compromised [50] and degraded status [45,49] of the victim group, so stigma ensues based on ethnocentrism [47]. Specifically, this study finds that African countries are stereotyped as the “typical source for monkeypox” in monkeypox outbreaks by the endemic frame, which enriched the literature on stigma and framing studies on the monkeypox outbreak. By transferring the threat of the epidemic to Africa, WP associates African countries with the stereotype of the monkeypox epidemic, emphasizes that infectious diseases such as monkeypox are not the “patents” of the West, and weakens the seriousness of the spread of the epidemic in Western countries. Furthermore, the identity of Africans is degraded as a “typical source of monkeypox”, so stigma against African countries follows, just like COVID-19 and China. In response to COVID-19, the endemic frame mainly labels China as the “source of coronavirus” and “Chinese virus”, which is similar to previous framing research involving COVID-19 stigma [25,29,35,37]. The framing strategy underscores WP's racist stigma of the “Chinese virus” by shifting the perceived threat to the Chinese. The label “Chinese virus” is simply because China officially reported the first confirmed case of COVID-19, and China was the country with the earliest outbreak. However, when the monkeypox epidemic is first reported in the UK and spread widely in European and American countries, it does not breed the labels of “British virus” or “American virus”. It simply emphasizes that it is a typical disease in Africa and patient's African sojourn history needs to be investigated. Negatively framing specific groups by the extreme frames is a potential cause of exacerbating racism and xenophobia [29,37]. Therefore, the framing strategy of diverting perceived threats, whether stigmatizing Africa or China, is still essentially a form of racism in public health, seriously bringing hatred and discrimination to Africa or China.

Furthermore, appeasing the homegrown monkeypox outbreak and stigmatizing the spread of the coronavirus in China is essentially a kind of xenophobia and western centrism. Xenophobia refers to the psychology of exclusion arising from fear or dissatisfaction with outgroups [89], which is inseparable from the psychological fear of the population [52], especially during epidemics, because the public's fear of infectious diseases far superior to other diseases [52]. It is based on the relationship between fear and xenophobia that during the COVID-19 pandemic, WP uses the panic frame to render the spread of the coronavirus in China into a picture of “chaos and panic”, making xenophobia against Chinese or Asians rampant [56]. On the contrary, due to the outbreak of monkeypox in Europe and the United States, WP prefers the reassurance frame to eliminate the fear of monkeypox among the American people, rather than the panic frame, emphasizing that the

vaccine in the United States is sufficient and effective. In addition, highlighting the effectiveness of the vaccine enhances the public's trust in the federal government's health policy. *WP* adopts a reassuring discourse when the monkeypox epidemic spreads in the West, but the spread of the coronavirus in China is regarded as a dire threat, which confirms American media's differential framing strategies that are pro-Western and excludes outgroups proposed in previous research [66,90]. Therefore, based on xenophobia and western centrism, *WP* tends to appease the monkeypox epidemic spreading in Europe and the United States and panic the pandemic in China, causing more Chinese or Chinese-Americans to be excluded and discriminated against.

Additionally, associating gay communities with monkeypox outbreaks is inherent sexism against gay communities. Sexism is an unequal system based on a gender ideology that maintains dominance [91]. Based on the conventional gender ideology, gay communities' sexuality is seen as a stereotype of promiscuity and immoral sexuality [19]. Stigma is the marking behavior that associates negative stereotypes with specific groups [48]. In order to maintain the mainstream status of gender ideology, homosexual groups are often associated with stereotypes of immoral sexual behavior, resulting in the emergence of sexist stigma in infectious disease issues [59]. In this monkeypox epidemic, gays and bisexuals have been innocently labeled as "high-risk groups of monkeypox" through the sexual transmission frame, prompting the continuous exclusion and marginalization of gay communities. Thus, the deliberate or excessive use of news frames targeting gay communities can escalate public stigma and discrimination against LGBTI groups.

In general, trend of public opinion in public health is controlled through the mainstream discourse constructed by news frames, which is the stigma of racism, xenophobia, and sexism in public health.

Based on research findings and stigma theory, the possible practical consequences of stigma involving monkeypox and COVID-19 are summarized. Link and Phelan [50] conceptualize stigma, including labeling differences in specific groups, associating negative stereotypes with specific groups, separating "us" from "them", making specific group's status loss and discriminating against them, and reliance on power. On this basis, first, stigma involving monkeypox may deprive certain groups of their original social status, that is, the devaluation of identity [49]. Specifically, stigma related to monkeypox may lead to the social devaluation of Africans or the gay community. In contrast, stigma related to COVID-19 pushes Chinese or Asians into the abyss of public opinion, explaining why being identified as Asian increases the odds of being stigmatized [34]. Second, structural discrimination is fueled by the stigma involving monkeypox and COVID-19. Banning the purchase of African wildlife products out of fear of monkeypox and labeling citizens of Wuhan "virus carriers" over fears of the coronavirus are examples of structural discrimination. More surprisingly, sensationalized images, such as the backs of black hands with rashes [62], are prevalent in social media during monkeypox outbreaks. Finally, stigmatized groups pay a massive price for evading this inherent stigma label, such as selectively disclosing disease or concealing it from others [53]. According to relevant statistics, crimes against Asian Americans soar during the pandemic [28], significantly threatening safety of Asian Americans.

Last but not least, this study briefly proposes constructive suggestions for mitigating monkeypox stigma from communication perspectives, drawing on the Multilevel Stigma Mitigation Framework [17]. First of all, news media is responsible for conveying health information to the public and improve their health literacy during health crises [61], so media industry avoid sensational news frames and communicate rational monkeypox knowledge [92]. Furthermore, at the community level, corresponding health agencies participate in the formulation of public health interventions [9] and regularly publish correct knowledge of monkeypox on their official platforms [17]. Finally, it is recommended that governments develop policies and blueprints for limiting social stigma [17], because a clear and consistent public communication policies is important in a health crisis [93,94]. Most importantly, a call for efficient collaboration between policymakers, health agencies

of the community, and mainstream media platforms fundamentally curb the monkeypox stigma.

## 5. Conclusions

In conclusion, news media as examined through the *WP* reporting used extreme frame to construct stigma, creating a worse “epidemic”. It mainly uses endemic, reassurance, and sexual transmission frames to construct stigma involving monkeypox, which differs from endemic, panic, and attribute of responsibility frames in COVID-19 issues. Differential stigma is constructed accordingly from early COVID-19 to monkeypox outbreak: from stigmatizing Chinese to stigmatizing Africans or gays; and from coronavirus spreading in China is panic to monkeypox spreading in the United States is nothing to worry about. Although the stigmatized groups and discourses involving stigma are various, the core and nature of this difference—racism, xenophobia, and sexism—has not been shaken. From COVID-19 to monkeypox, *WP*'s framing construction and communication practices are essentially a form of racism and sexism in public health. This research provides constructive recommendations for mitigating the monkeypox stigma.

Nevertheless, there are limitations in this study. The effects of media frames on public perceptions, attitudes, and behaviors are not examined, as this study concentrates on how media frames social stigma. Future research should attempt to measure how specific news frames and stigma discourses shape public attitudes towards monkeypox stigma through appropriate methods and elaborate on its framing effects.

**Supplementary Materials:** The framing codebook of the study is placed in the supplementary materials.

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