

**Identity, Perceived Discrimination, and Psychological Well-Being  
in Sikh Americans**

**By**

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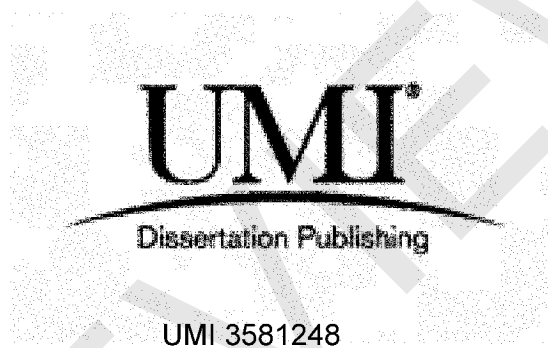
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## **ABSTRACT**

Post 9/11, Sikh Americans became particularly susceptible to discrimination due to often being misidentified as Arab American or Muslim, and subsequently assumed by some to be associated with terrorism. Research has demonstrated that discrimination experienced by people of color can have a variety of negative effects on their physical and mental health. However, the discrimination experiences of Sikh Americans have not yet been captured utilizing a quantitative method in the psychology literature. The present study conceptualized religious identity as being comprised of both a psychological dimension (i.e., in-group ties, in-group affect, and centrality) and behavioral aspect (i.e., engaging in Sikh religious practices). The relationships between religious identity (both psychological and behavioral), perceived discrimination, and psychological well-being (specifically, life satisfaction and resilience) were examined using a quantitative method in a sample of 228 Sikh American adults who self-identified as South Asian and Sikh. In addition, this study investigated whether religious identity moderated the effects of perceived discrimination on psychological well-being. Participants completed an online survey comprised of the Lifetime Exposure scale of the Perceived Ethnic Discrimination Scale—Community Version, a multi-dimensional measure of social identity, items measuring the frequency in which Sikh principles and practices were followed, the Satisfaction with Life Scale, the Brief Resilience Scale, and a demographic questionnaire. Results revealed that individuals who had a stronger psychological identification as Sikh reported significantly higher satisfaction with their lives ( $p = .000$ ). The behavioral aspect of Sikh identity was a marginally significant predictor of both life satisfaction ( $p = .055$ ) and resilience ( $p = .091$ ). Higher perceived discrimination scores significantly

predicted lower life satisfaction scores ( $p = .004$ ). The behavioral aspect of Sikh identity and perceived discrimination had a significant, positive relationship ( $p = .003$ ). There were no moderating effects found for either the psychological or behavioral dimensions of religious identity on the relationship between perceived discrimination and psychological well-being. Given the underrepresentation of Sikh Americans in the psychology literature, this study shed some light on this population's discrimination experiences and their identity. The major findings of this study suggest that Sikh Americans with a stronger behavioral identity experience or are more aware of discrimination; individuals who reported more discrimination also reported lower life satisfaction. However, individuals with a stronger psychological identity (e.g., sense of belonging and similarity with other Sikhs, positive feelings about being Sikh) reported having higher life satisfaction. Given that Sikh Americans are particularly vulnerable to discrimination, it is important for practitioners to develop an awareness of the complexity of the Sikh identity, the unique discrimination experiences they face, and identify factors such as strong psychological identity that may minimize the negative effects of discrimination.

# CHAPTER I

## INTRODUCTION

### Overview

Prejudice and racial discrimination are enormously complex issues that people of color continue to face in the U.S. today. The *Surgeon General's Report* (U.S. Department of Health and Human Services, 2001) indicated there is little doubt that racial discrimination is a significant stressor (U.S. Department of Health and Human Services, 2001). Research on how racial discrimination affects physical and mental health has been increasing steadily in recent years. There is growing evidence that perceived discrimination can significantly affect mental and physical health (Clark, Anderson, Clark, & Williams, 1999), and research in this area has been conducted with various ethnic groups (Landrine & Klonoff, 1996; Wei, Heppner, Ku, & Liao, 2010). However, the discrimination experience of Sikh Americans has yet to be explored in the psychology literature. Events such as the terrorist acts of September 11 had a ripple effect, resulting in hate crimes directed at individuals perceived as Muslim and/or Arab American, and therefore, assumed by some people to be connected to terrorism. Along with Muslim Americans, Sikh Americans experienced a racial backlash post 9/11, having increasingly become targets of discrimination with a sharp increase in, and record high rates of, discrimination, verbal and physical attacks, hate crimes including murders, bullying in schools, and racial and religious profiling (Sikh Coalition, n.d.). In this post 9/11 era, the media has consistently displayed images of suspected terrorists: those who “appear” Muslim and men who wear turbans. These images became associated with Sikh men because of the visual image of a turban and beard (Ahluwalia & Pellettiere, 2010).

Though 99% of people in the U.S. wearing turbans are Sikh (SALDEF, n.d.), Sikhs (especially Sikh men wearing turbans) are often misidentified as Muslim, Arab, and/or Middle Eastern, and therefore leading some people to associate Sikhs as anti-American. Sikhs keep their hair uncut and cover it as a commitment to their faith and symbol of their religious identity. Sikh men who keep uncut hair cover it with a turban. Sikh women who keep uncut hair usually cover it with a scarf or turban if they choose. The discrimination experience of Sikh Americans is unique in that not only have they experienced increased discrimination in recent years, but also that this discrimination is often thought to be due to a miscategorization of Sikh Americans as belonging to an ethnic and/or religious group to which they do not belong.

Some may argue that currently Sikh Americans face less discrimination, given that more than a decade has passed since 9/11. However, recent events such as the shooting at the Sikh Temple in Oak Creek, Wisconsin in August 2012 were a tragic awakening to the fact that the Sikh American community continues to encounter discrimination and a lack of societal awareness regarding their religion, Sikhism. The resilience shown by the Sikh community in response to that tragedy was observed by many, including by President Barack Obama who noted, "In the wake of that horrible tragedy, we saw the resilience of a community that drew strength from their faith and a sense of solidarity with their neighbors, Sikh and non-Sikh alike" (NDTV, n.d.). In the face of such prejudice and discrimination, ethnic minorities nevertheless display a high degree of resilience that enables them to adapt and succeed in life. This resilience has led researchers to investigate cultural strategies and resources, such as ethnic identity, that may serve as protective factors against discrimination (e.g., Lee, 2003).

In general, Sikh Americans are an underrepresented population in the psychology literature and the few studies to date that have examined Sikh Americans' discrimination experiences have been qualitative (e.g., Ahluwalia & Pellettire, 2010). Given this substantial gap in the literature, there is a strong need to contribute literature related to Sikh Americans, including encapsulating the discrimination experience of Sikh Americans using a quantitative approach. Furthermore, the correlating factors and moderating influences on perceived discrimination and psychological well-being require further investigation.

### **Statement of Purpose**

The present study examined the relationships among identity, perceived discrimination, and psychological well-being in a sample of adult Sikh Americans who self-identified as Sikh and South Asian. The specific dimensions of religious identity that were investigated were psychological (i.e., in-group ties, centrality, in-group affect) and behavioral (i.e., engaging in religious practices). Psychological well-being was focused on as an outcome measure, specifically looking at life satisfaction and resilience, which represent both the hedonic and eudaimonic approaches to well-being. In addition, this study examined whether religious identity moderated the relationship between perceived discrimination and psychological well-being in Sikh Americans.

### **Theory Guiding Research**

In conceptualizing religious identity for this study, conceptualizations of ethnic identity were examined, which are primarily based on Marcia's (1966) elaboration of Erikson's (1968) theory of identity formation, Tajfel's social identity theory (1981) and work conducted by Phinney (1989). Tajfel's social identity theory (1974) postulates that

people define themselves in terms of a personal identity and multiple social identities, which develop from feeling connected to a group and from positive affect toward that group. In developing a conceptualization of ethnic identity, Phinney (1990) proposed three facets of identity common to all ethnic groups: self-identification (i.e., awareness of group membership), a sense of belonging, and positive feelings about one's group. With regard to psychological well-being, both the hedonic (i.e., focuses on pleasure or happiness; Diener, Suh, Lucas, & Smith, 1999) and eudaimonic (i.e., focuses on self-realization; Ryan & Deci, 2001b) perspectives were incorporated. Consequently, life satisfaction (representing the hedonic approach) and resilience (representing the eudaimonic approach) were selected as components of psychological well-being in this study. Clark and colleagues' (1991) conceptual model of racial discrimination was applied in examining perceived discrimination. They posited that perceived racial discrimination leads to stress, which then leads to negative physical health and mental health outcomes.

### **Research Questions**

This study aimed to investigate four main research questions. First, is there a significant relationship between religious identity (behavioral and psychological dimensions) and psychological well-being among Sikh individuals? Second, is perceived discrimination negatively related to psychological well-being among Sikh individuals? Third, is there is a significant relationship between the psychological aspects of Sikh identity and perceived discrimination? Finally, does religious identity moderate the relationship between perceived discrimination and psychological well-being in Sikh individuals?



## **CHAPTER II**

### **LITERATURE REVIEW**

Sikhs have been in the U.S. for over 100 years and comprise a significant portion of the population, with about 700,000 Sikhs in the U.S. (SALDEF, n.d.). Sikhs are followers of Sikhism, the world's fifth largest religion with 25 million followers worldwide and a religion that is distinct from Hinduism and Islam (SALDEF, n.d.). Sikh means "student" and therefore, a Sikh remains a student of the meaning of life. The values of Sikhism are derived from three basic tenets: earning an honest living (*kirat karo*), sharing with others what God has given (*vand chako*), and living fully with an awareness of the Divine within each of us (*naam japna*). The core beliefs of Sikhs are belief in one God, equality, freedom of religion, and community service (SALDEF, n.d.).

In the U.S., Sikhs are perceived as belonging to multiple minority groups: racial (i.e., Asian American), ethnic (i.e., Indian American), and religious. Sikhs are racial and ethnic minorities in the U.S. similar to African Americans; however, many African Americans are denominationally Christian which represents a majority religious affiliation in the U.S. Sikhs are religious minorities in the U.S. like Jews, but most Jewish people in the U.S. are viewed as racially White. Because of these co-constructed factors of difference, Sikhs can be seen as multi-dimensionally different (Joshi, 2006).

The historic homeland of Sikhism is Punjab, a region in northern India (Cole, 2003). Thus, from a historical perspective, Sikhs are considered as ethnically Punjabi. Accordingly, Sikhs share a common cultural history (e.g., oppression in India) and intergenerational traumas (e.g., 1984 anti-Sikh riots) and have similar cultural practices (e.g., speak and write the same native language Punjabi). Although religions in Southeast

Asia (i.e., India and Pakistan) vary, religion and culture are closely intertwined with religious traditions embedded in cultural practices (Ibrahim, Ohnishi, & Sandhu, 1997). Ibrahim and colleagues (1997) postulate that “identity formation in Southeast Asian Americans is influenced by the cultures and religions of the subcontinent” (p.5). Given that in various ways Sikh identity is interwoven with cultural identity, the identity of Sikh Americans can be conceptualized similar to the conceptualization of ethnic identity (Phinney, 1990) in the literature.

### **Theoretical Bases of Ethnic Identity**

Identity is a fundamental part of an individual’s self-concept. Identity formation has been considered a vital aspect of individual development and psychological well-being for decades (Erikson, 1968). With regard to ethnic identity, existing research (e.g., Lee & Davis, 2000; Ying et al., 2000; Yip & Filigini, 2002) has shown that it is an important psychological construct for individuals from different ethnic groups in the U.S. While ethnic identity is relevant for all individuals, it “is a central defining characteristic of many individuals, particularly those who are members of minority groups” (Phinney, 2000, p. 256). The salience of ethnic identity to minority groups can be explained by the differentiation and discrimination experienced by these groups (Tajfel, 1981).

Theoretical bases for ethnic identity are grounded primarily in Erikson’s (1968) model of identity formation and Tajfel’s (1981) social identity theory.

Social identity theory (Tajfel, 1981) posits that people define themselves in terms of a personal identity, as well as in terms of multiple social identities. Personal identity includes personal attributes (e.g., competence). Any specific social identity is defined by Tajfel (1981) as, “that part of an individual’s self-concept which derives from his

knowledge of his membership of a social group (or groups) together with the emotional significance attached to that membership” (p. 69). Therefore according to social identity theory, identity develops in part from an individuals’ sense of belonging to a particular group and the affect accompanying that group membership. Furthermore, Tajfel (1974) suggested that individuals partially develop their self-esteem from feeling connected to a group and feeling pride and positive affect toward that group.

When individuals’ social environment devalues their group, they must negotiate the meaning of their identity. This can be seen when people of color experience racial discrimination or prejudice. Due to the process of social categorization, individuals are compelled to distinguish between in-groups and out-groups (Tajfel, 1974). Individuals conduct comparisons between these groups which have subsequent effects on self-esteem. Thus, when faced with opposition and marginalization, people of color may display lower self-esteem than groups who do not have those experiences. In addition, social identity theory contends that once individuals choose a group, they focus on the positive aspects of their in-group, which helps bolster their own esteem (Tajfel, 1981). Furthermore, the more individuals identify with a particular group, the more invested they are in emphasizing the positive attributes of the group. As applied to ethnic identity, individuals who report that ethnic identity is more important to their overall identity may be more likely to commit to positive affirmations about their group membership even in the face of adversity such as discrimination.

In contrast to Tajfel’s social identity theory, which places a greater emphasis on affective and cognitive components of social identity, Erikson’s (1968) theory of identity formation focuses more on the process of identity development. In Erikson’s (1968)

theory of identity formation adolescence is characterized as the period in life during which the individual's aim is to reach identity achievement. *Identity achievement* refers to a cognitive process of exploring and understanding the meaning of one's identity. Erikson (1968) believed that individuals are able to develop their identity through a process of exploration and commitment. Erikson's theory suggests that one's commitment to an identity component is not necessarily always positive. If an individual fails to resolve this psychosocial task of identity achievement, then identity diffusion is experienced, which includes self-doubt, role diffusion, and role confusion (Erikson, 1968). Erikson postulated that as a result of exploration, individuals resolve their feelings about the role of a part of a particular identity component (e.g., religious) within their broader self-concept.

Marcia (1966, 1980) expanded and operationalized Erikson's theory (1968) of identity formation by dividing the identity crisis into four statuses, depending on one's degree of exploration and commitment. These two dimensions are combined to produce four identity statuses: diffuse (i.e., when one has not engaged in exploration and has a lack of commitment); foreclosed (i.e., when one has not engaged in exploration, but has made a commitment), moratorium (i.e., when one is currently exploring but does not have an enduring commitment), and achieved (i.e., when one has engaged in exploration of which the result is an enduring, self-chosen commitment).

Marcia's (1966, 1980) and Erikson's (1968) theoretical frameworks can be understood within the context of Tajfel's (1981) social identity theory. Identity development begins with a period of identity exploration when individuals seek knowledge about a particular group, examine their beliefs and values about that group,

and begin to understand their meaning of their group membership. As a result of this emerging identity achievement, an individual may then feel positive about the group and appreciate more fully being part of the group. This identity affirmation may consequently foster enhanced psychological well-being.

### **Development of Ethnic Identity**

Ethnic identity has been conceptualized in the literature as a complex, dynamic construct that changes over time and context, and varies across individuals.

Conceptualizations of ethnic identity based on the theoretical foundations of Erikson (1968), Tajfel (1981), and Marcia (1966, 1980) have generally been connected to the work of Phinney (1990). Ethnic identity is the degree to which individuals perceive themselves to be included and aligned with an ethnic group. Descriptions of ethnic identity include components such as affective components including sense of belonging, pride, and affirmation about one's ethnic group; ethnic self-identification; cognitive components such as knowledge of traditions and history; interest in and knowledge about the group; and involvement in activities and traditions of the group (Phinney, 2000).

Using the theoretical underpinnings of Erikson's (1968) and Marcia's (1980) theories of identity development, Phinney (1989) proposed a model of ethnic identity development for individuals of all ethnic groups in which individuals move through three stages: 1) unexamined ethnic identity (i.e., individuals have not yet examined positive or negative views of their ethnic group; 2) ethnic identity search or exploration (i.e., individuals have begun a search into what it means to be a group member; and 3) achieved ethnic identity (i.e., individuals have explored their ethnic group membership and are clear as to the meaning of ethnicity in their life). In addition to identity achievement, Phinney (1992)

conceptualized identity affirmation as a component of ethnic identity. She noted that identity affirmation may include “ethnic pride, feeling good about one’s group membership, as well as feelings of belonging and attachment to the group” (Phinney, 1992, p. 59).

Phinney (1992) created the Multigroup Ethnic Identity Measure (MEIM) to assess her theoretical model of ethnic identity development. The MEIM (Phinney, 1992) examines identity achievement (i.e., degree of exploration and commitment), ethnic behavior (i.e., degree of participation in cultural activities), and affirmation and belonging (i.e., degree of positive feelings toward ethnic group). According to the MEIM, an achieved ethnic identity is characterized by a period of exploration, commitment, and positive feelings toward the ethnic group. This is incongruent with Phinney’s theoretical postulation which does not assume a positive commitment to the group (Umaña-Taylor, Yazedjian., & Bamaca-Gomez , 2004).

Given this inconsistency, Umaña-Taylor and her colleagues (2004) proposed a new typology for examining ethnic identity statuses that is consistent with Marcia’s (1966, 1980) operationalization of Erikson’s (1968) theory, as well as with Tajfel’s (1981) social identity theory. Umaña-Taylor et al. (2004) argued that it was important to be more consistent with existing theory. Therefore, she and her colleagues created a new measure, the Ethnic Identity Scale (Umaña-Taylor et al., 2004), which uniquely examines multiple components of ethnic identity formation. More specifically, they conceptualized ethnic identity as composed of three distinct components: 1) exploration (i.e., the degree to which individuals have explored their ethnicity, 2) resolution (i.e., the degree to which they have resolved what their ethnic identity means to them), and 3) affirmation (i.e., the

affect—positive or negative—that they associate with that resolution). They contended that by developing a measure which independently assesses the three distinct components of ethnic identity formation, it allows for the classification of individuals into an ethnic identity typology (Umaña-Taylor et al., 2004).

Considering these ethnic identity models collectively, it can be concluded that researchers share a broad understanding of ethnic identity; however, its measurement varies widely. Phinney (1990) suggested that self-identification (i.e., awareness of group membership), a sense of belonging, and pride in one's group are aspects of identity common to all ethnic groups. They can be considered the psychological basis of ethnic identity. On the other hand, specific cultural practices and customs distinguish one group from another (Phinney, 1990) and can be viewed as the behavioral aspect of ethnic identity. In other words, the *psychological* element of identity transcends ethnicity and culture; however, the *behavioral* elements are group-specific (Jasperse, Ward, & Jose, 2012).

Ethnic identity is a particularly salient aspect of social identity. Cameron (2004) proposed that social identity can be represented in terms of three factors with ethnic groups: centrality, in-group affect, and in-group ties. Centrality refers to the frequency with which the group comes to mind, as well as the subjective importance of the group to self-concept (Cameron, 2004). This is similar to Phinney's notion of self-identification (Phinney, 1990). In-group affect pertains to attitudes toward the in-group. As applied to ethnic identity, this is equivalent to Phinney's notion of identity affirmation, also known as ethnic pride (Phinney, 1992). In-group ties are defined as the extent to which an

individual feels part of the in-group. As applied to ethnic identity, this is similar to a sense of belonging with the ethnic group (Phinney, 1992).

### **Conceptual Model of Racial Discrimination**

Clark and colleagues (1999) proposed one of the most comprehensive models of racial discrimination and its correlates, a bio-psychosocial model for African Americans. However, the concepts of their model can also apply to other people of color. Clark and colleagues (1999) asserted that perceived racial discrimination leads to stress, which in turn leads to negative health and mental health outcomes. More specifically, they conceptually argued that “the perception of racism usually resulted in psychological and physiological stress response” and “over time these stress responses are posited to influence health outcomes” (p. 806). Therefore, through repeated exposure to discrimination, stress responses—both physiological and psychological—are elicited and can lead to negative mental and physical outcomes (Clark et al., 1999).

Similarly, Harrell (2000) argued that racial discrimination experiences are a unique source of chronic stress for ethnic minorities distinct from other general life stressors. This notion has been supported in the literature with Asian Americans (Wei et al., 2010; Wei, Ku, Russell, Mallinckrodt, & Liao, 2008). Dion, Dion, & Pak (1992) found a positive relationship between discrimination experiences and distress after statistically controlling for general stress among a community sample of Chinese adults.

Conceptualizing discrimination within this theoretical framework has a number of advantages including linking it to well-established literature and providing possible mechanisms through which racial discrimination can be linked to mental health outcomes (Hoggard, Byrd, & Sellers, 2012). This theoretical model falls in line with a recently