

# Position Statement on Discrimination Against Religious Minorities

Approved by the Board of Trustees, July 2018  
Approved by the Assembly, May 2018

“Policy documents are approved by the APA Assembly and Board of Trustees. . . . These are . . . position statements that define APA official policy on specific subjects. . . .” – *APA Operations Manual*

### ISSUE:

Discrimination against religious minorities poses serious threats to the mental health of large groups of people in the world today. Discrimination is a key risk factor for mental health problems in refugee children resettled in high-income countries, according to a large recent meta-analysis of numerous studies.<sup>1</sup> This study also found that protective factors included social support, community integration, and a sense of belonging at school. For religious minorities in the United States, particularly Muslims in the post-9/11 era, religious discrimination is a common experience. A survey of Muslims living in America found that more than half had experienced verbal harassment, discriminatory acts, and over 80% had heard anti-Muslim comments.<sup>2</sup> The authors described the 9/11 attacks as a “collective trauma” for Muslims living in the U.S. Muslims in this study who reached out to Americans of other religions experienced more posttraumatic growth, while those who chose to isolate themselves experienced more depression and anger. A study of Sikh Americans, who are sometimes mistakenly identified for Muslims in the U.S. because of wearing turbans or scarves, also demonstrated a relationship between religious discrimination and mental health. The study found that Sikhs in America who wear turbans or scarves are more likely to experience discrimination than those who do not wear these articles of faith, and that discrimination was significantly associated with poorer self-reported mental and physical health.<sup>3</sup>

### POSITION:

1. APA condemns acts of discrimination against any religious minority.
2. APA affirms findings in the literature that isolation of religious minorities in the U.S. further exacerbates negative mental health effects resulting from religious discrimination.
3. APA urges practicing psychiatrists to reach out to and support patients and communities of religious minority groups in the U.S.
4. APA calls for further research and education of psychiatrists and allied disciplines on the mental health impacts of and treatment options for discrimination against religious minorities.

### Author:

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<sup>1</sup>Fazel M., Reed R., Panter-Brick C., Stein A. Mental health of displaced and refugee children resettled in high-income countries: risk and protective factors. *Lancet* 2012; 379:266-82.

<sup>2</sup>Abu-Raiya H., Pargament K., Mahoney A. Examining coping methods with stressful interpersonal events experienced by Muslims living in the United States following the 9/11 attacks. *Psychology of Religion and Spirituality* 2011; 3(1):1-14.

<sup>3</sup>Nadimpalli S., Cleland C., Hutchinson M., Islam N., Barnes L., Van Devanter N. The association between discrimination and the health of Sikh Asian Indians. *Health Psychology* 2016; 35(4):351-355.

Council on Minority Mental Health and Health Disparities