

Chapter 3

Research with Minoritized Muslim Communities



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Abstract Understanding the nuances of marginalized groups can enhance the quality of research and provide positive supports for the communities being studied. This chapter discusses ways in which research with American Muslim communities can best be undertaken. Emphasis is placed on considerations for research with Muslims as a disenfranchised group and how researchers can be culturally responsive and ethical when working with these communities. The concept of “mindful research” is discussed with respect to cultural humility for dissemination of research in ways that empower Muslim communities and forge responsible relationships. Emphasis is placed on discussion of appropriate use of data to directly serve the community from which it is gathered. Research principles in this chapter also add value to work with Muslim communities outside of the United States and other Western countries. Qualitative, quantitative, and mixed methods designs are reviewed with a focus on methodologies most appropriate to building relationships, protecting participant’s vulnerability, and ensuring ethical collection and dissemination of information. We also highlight the challenges and cultural considerations specific to Muslim communities, such as being fearful or hesitant to participate in research, and what the researcher can do to abate participant anxiety.

3.1 Introduction

Research studies in psychology follow the scientific method, which guides our observation, hypothesis formation, measurement and experimentation, the processes by which we predict and explain human behavior. Employing the scientific method

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allows for other researchers to be able to replicate the studies and thereby verify the reliability and validity of the original findings. However, the scientific method by itself can reveal little useful knowledge unless it is embedded within appropriate research questions. Researchers ask different kinds of questions depending on the focus of each study: Are we looking to explore thoughts, behaviors, physiology, perception, expectations, group events, or other cognitive, affective or behavioral aspects of human experience? The questions we choose are then empirically investigated using measures of sensory experiences, sound, touch, taste, sight, and smell (Ray, 2009).

Research methods may involve quantitative or qualitative measures, or a combination of the two in a mixed method design. Quantitative research utilizes statistical tests to confirm hypotheses, theories, and relationships between variables, whereas qualitative research focuses on narratives, exploring ideas through the use of open-ended questions, typically with a smaller group of participants. While quantitative methods allow for standardized and replicable findings, qualitative research explores and interprets deeper themes through textual, verbal, and pictorial responses that can provide rich data for culturally responsive research. One of the highlights of qualitative research is that it allows researchers to gather information on the stories and experiences that may not be quantifiable through statistical measures (Ray, 2009). If a researcher wants to know the impact of a life event, such as migration among first generation Americans, rich and accurate data may be best obtained through a small focus group in which the researcher spends time recording the narrative of participants and identifying the emergent themes. Such data can be missed entirely through the use of solely quantitative measures. At the same time, there is also value in the statistical categorization of these same life events across larger groups of people, allowing for the identification of general trends which can impact public policies and best practices. Historically, psychology research was overwhelmingly quantitative, a result of the influence of behaviorism on the definition of psychology as a social science discipline (Danziger, 2006). On the other hand, a great deal of psychological concepts and theories were developed through qualitative case studies conducted by Sigmund Freud and his psychoanalytic followers (Wertz, 2014). Today, there is an increasing emphasis on a mixed methods approach. This may begin with identifying quantitative relationships between variables, hypotheses, and factors, which are then further explained through participant narratives. It may also begin with an exploration of larger themes from a qualitative standpoint, which are then followed by the development and use of quantitative measures or surveys that expand on the generalizability of those themes across larger groups of people (Johnson, Onwuegbuzie, & Turner, 2007).

3.2 Traditional vs. Positive Psychology

The history of psychology largely focused on dysfunctional aspects of human life; thus, the goal of treatment or research was traditionally centered around understanding, eliminating or managing such dysfunctions. Martin Seligman, who is widely

considered a founding father of positive psychology, introduced a movement in the late 1990s that highlighted human strengths as opposed to human deficits (Seligman, 2004). Seligman posited that the discipline of psychology was being stifled through its obsession with dysfunction and that psychology should be equally interested in optimizing functioning through building happy and meaningful lives (Duckworth, Steen, & Seligman, 2005; Kobau et al., 2011; Seligman, Parks, & Steen, 2004). Positive psychology does not dismiss mainstream psychology; rather, it acts as a complementary discipline, pairing our understanding of suffering with factors of resilience and wellness to gain a more comprehensive approach to understanding mental health.

Areas of study within positive psychology research include definitions and experiences of happiness or subjective wellbeing, (Jorm & Ryan, 2014; Seligman, 2006), optimism (Peterson & Steen, 2002), positive affect (Fredrickson, 2008), mindfulness (Kabat-Zinn, 1994), human flourishing (Keyes, 2002), character strengths and virtues (Peterson & Seligman, 2004), hope (Snyder, 1994), and positive thinking (Gable & Haidt, 2005; Linley, Joseph, Harrington, & Wood, 2006; Scheier & Carver, 1993). Research within the field has applications across areas such as education, therapy, and organizational health. Although positive psychology has been equally criticized for emphasizing “all that’s good” where traditional psychology highlights “all that’s bad”, a move towards exploring both the positive and negative aspects of human experience within positive psychology has been taking place (Febrianingsih & Chaer, 2018). Dubbed positive psychology 2.0, this trajectory began in part as a result of non-Western cultural concepts of wellbeing, particularly the influence of Chinese worldviews that do not necessarily emphasize the attainment of happiness or hedonic wellbeing, but rather the pursuit of a meaningful life (Wong, 2011). Thus, the cultural traditions, methods of healing, and family and societal values of non-Western groups are important topics as they highlight the functionality and health of diverse communities, as well as the ways in which individuals flourish within different societies. Identifying the strengths of a community helps dispel stereotypes, promotes a positive identity of out-group persons, and can give voice to narratives that have been untold or largely ignored because they do not represent the common associations with a particular group (Blanchet-Cohen & Salazar, 2009). In order to engage in a strengths-based perspective, researchers must evaluate their own agenda and focus. Research topics, populations, and research questions can be formulated to either support a pre-existing notion or negate it by the a priori intentions and expectations of the researchers. Culturally responsive research should aim to present the topic and population in a way that does not further stereotypes or biases. This can be ensured by utilizing accurate measures that are locally developed or reflect local community norms, identifying strengths, and acknowledging systemic and historical factors that have played a role in contributing to problems within “othered” communities.

3.3 WEIRD Populations as the Continuing Norm

Psychology's depiction of social norms has been overwhelmingly shaped by Western, Educated, Institutionalized, Rich, Democratic (WEIRD) populations (Henrich, Heine, & Norenzayan, 2010). When research normed on WEIRD populations is used as the standard of measurement, it can create a biased standard that "others" the experiences of non-WEIRD populations. A 2008 survey of major journals in the field of psychology found that 96% of research participants were from Western countries, even though Western countries account for only 12% of the world's population (Henrich et al., 2010). While a growing body of research points to the differences in cognition, motivation, and analytical reasoning, among other traits, between WEIRD and non-WEIRD populations, the knowledge produced by Western institutions continues to inform and influence research with other populations (Arnett, 2009). That is, research based upon WEIRD populations carries a greater impact in setting the norms for human behavior, values, lifestyle, and health of diverse populations. This is particularly problematic as generalizations of normative behavior, set according to Western ideals, have been used to shape policies and procedures for work, social programs, even wage structure, in non-WEIRD societies (Henrich et al., 2010).

Even more concerning is that historically, most research done within the field of psychology has been limited to not just WEIRD populations, but specifically participants in the United States. In his analysis of six top APA journals, Arnett (2009) found that over 73% of first authors were based out of American universities, with only 1% of authors being from Asia, and none from Latin America, Africa, or the Middle East. Thus, psychology research is generalizing the norms, behaviors, and values of Americans, who account for only about 5% of the world's population, to global proportions. When Western and/American norms are set as standards for the world, there can be large gaps in our understanding, as well as inappropriate assumptions of health and functioning on a global level (Arnett, 2009). While psychology presents itself as a human science, Arnett argues that it may be more accurately described as an American science in its current form and focus.

Even though Muslims represent 24% of the world's population, less is understood about the culture, psychology, and lifestyle of Muslims than either American or WEIRD populations that account for 5% and 12% respectively. Geographically, most Muslims are situated in Asian and Middle Eastern/North African (MENA) countries, where much less psychological research is conducted as a whole (Arnett, 2009; see also Chap. 16 in this book). Additionally, in utilizing Muslim participants, researchers often fail to capture the heterogeneity of the population, such as the sect to which a Muslim may ascribe, whether the participant was born Muslim or converted (within Islamic communities, these are often call reverts rather than converts) and the country of origin. The lack of detail in these and other characteristics of Muslim American participants can have a significant impact on the generalizability and context of findings (Amer & Bagasra, 2013), especially if these findings are then applied to Muslims as a global entity. Without gathering

appropriate classification of demographic information, it is difficult to discern the influence of confounding variables such as the ones listed above. Finally, much of the focus of studies conducted by WEIRD researchers appears to be on Islamophobia, or themes regarding 9/11 and terrorism, which serve the interests of WEIRD populations but does little to enhance our understanding of the mental health needs and culture of Muslims themselves (Amer & Bagasra, 2013).

Garner and Selod (2015) found that the publication of journal articles with the word “Islamophobia” in the title or somewhere in the article has increased substantially since 1980, with the greatest number of studies on the topic being published in 2011. Between 1980 and 1989, they found only one article with Islamophobia in the title and 50 articles with Islamophobia mentioned somewhere in the article. Compare this to the period of 2000–2009 where 296 articles were published with Islamophobia in the title and 5650 articles used the term somewhere in the article. Islamophobic rhetoric also increased with the US-led “War on Terror”, which positioned Islam as the enemy of democracy and made popular the notion of “good Muslims” and “bad Muslims”—a dichotomy that serves to place Muslims as one extreme or the other based on perceived allegiance to Western political interests. This essentially erases the social, religious, and political diversity of Muslim communities in WEIRD societies and around the world, creating two camps of people who are either “with us” or “against us”. Moreover, “bad Muslims” are not only those who commit acts of terror, but those who don’t agree with Western imperialistic policies premised on the notion of liberating oppressed people around the world. “Good Muslims” stand with the beneficent imperialism of non-Muslim majority governments, uphold secular values reflecting WEIRD cultural norms, and can offer personal testimonials of the oppressions they have experienced in Islam, while praising the freedoms available in the West. It is important to note that in the “War on Terror”, US President Bush acknowledged the existence of “good Muslims”; however, the default position was that all Muslims are “bad Muslims” until they can prove otherwise (Maira, 2009; Mamdani, 2005).

It is no surprise that politics has a huge impact on the types of research that is conducted and/or funded. As most research continues to be funded by Western agencies and conducted by researchers in WEIRD nations (Arnett, 2009), the experiences of Muslims in the social science literature are often that of a minority population. As a result, the deficits and areas of concern within Muslim communities as they function within largely non-Muslim majority contexts are highlighted, inadvertently reinforcing existing biases against Muslims. Even within Muslim majority regions, the standard trope of psychological studies is on negative experiences or finding ways of alleviating human suffering. By highlighting ways in which Muslims experience mental illness, prejudice, and stigma without providing an adequate number of counter-narratives of Muslim experiences of joy and wellbeing, psychological research can contribute to stereotypes of Muslims as dangerous “others”. Although not an exhaustive list by any means, some examples of research focusing on deficit-oriented coverage of Muslim populations are shown in Table 3.1.

While deficit-oriented research with Muslim populations is not limited to WEIRD regions (as evidenced by the examples shown in Table 3.1), positive psychology

Table 3.1 Examples of deficit-oriented research with Muslim populations

Study	Deficit orientation	Location(s) of study
Macey, M. (1999). Religion, male violence, and the control of women: Pakistani Muslim men in Bradford, UK. <i>Gender & Development</i> , 7(1), 48–55.	Gender-based violence and psychological control of women	United Kingdom
Fekete, L. (2004). Anti-Muslim racism and the European security state. <i>Race & Class</i> , 46(1), 3–29.	War on Terror, racism	Europe
Raza, A. (2006). Mask of honor—Causes behind honor killings in Pakistan. <i>Asian Journal of Women's Studies</i> , 12(2), 88–104.	Honor killings	Pakistan
Kahn, R. A. (2007). The headscarf as threat: A comparison of German and US legal discourses. <i>Vanderbilt Journal of Transnational Law</i> , 40, 417–444.	Fear of visible Muslims	Germany and the US
Najeeb Shafiq, M., & Sinno, A. H. (2010). Education, income, and support for suicide bombings: Evidence from six Muslim countries. <i>Journal of Conflict Resolution</i> , 54(1), 146–178.	Suicide bombing	Indonesia, Jordan, Lebanon, Morocco, Pakistan, and Turkey.
Brooks, R. A. (2011). Muslim “home-grown” terrorism in the United States: How serious is the threat? <i>International Security</i> , 36(2), 7–47.	Terrorism	US
Al-Solaim, L., & Loewenthal, K. M. (2011). Religion and obsessive-compulsive disorder (OCD) among young Muslim women in Saudi Arabia. <i>Mental Health, Religion & Culture</i> , 14(2), 169–182.	Obsessive-compulsive disorder	Saudi Arabia
Haroun, Z., Bokhari, A., Marko-Holguin, M., Blomeke, K., Goenka, A., Fogel, J., & Van Voorhees, B. W. (2011). Attitudes toward depression among a sample of Muslim adolescents in the Midwestern United States. <i>International Journal of Adolescent Medicine and Health</i> , 23(3), 293–301.	Depression	US
Victoroff, J., Adelman, J. R., & Matthews, M. (2012). Psychological factors associated with support for suicide bombing in the Muslim diaspora. <i>Political Psychology</i> , 33(6), 791–809.	Suicide bombing	Great Britain, France, Germany, Spain, and US
Saghaye-Biria, H. (2012). American Muslims as radicals? A critical discourse analysis of the US congressional hearing on ‘The Extent of	Radicalization	US

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Table 3.1 (continued)

Study	Deficit orientation	Location(s) of study
Radicalization in the American Muslim Community and That Community's Response'. <i>Discourse & Society</i> , 23(5), 508–524.		
Modarres, M., Afrasiabi, S., Rahnama, P., & Montazeri, A. (2012). Prevalence and risk factors of childbirth-related post-traumatic stress symptoms. <i>BMC Pregnancy and Childbirth</i> , 12(88), 1–6.	Childbirth-related PTSD	Iran
Aroian, K. J. (2012). Discrimination against Muslim American adolescents. <i>The Journal of School Nursing</i> , 28(3), 206–213.	Discrimination	US
Nadal, K. L., Griffin, K. E., Hamit, S., Leon, J., Tobio, M., & Rivera, D. P. (2012). Subtle and overt forms of Islamophobia: Microaggressions toward Muslim Americans. <i>Journal of Muslim Mental Health</i> , 6, 16–37.	Microaggressions, Islamophobia	US
Lyons-Padilla, S., Gelfand, M. J., Mirahmadi, H., Farooq, M., & Van Egmond, M. (2015). Belonging nowhere: Marginalization & radicalization risk among Muslim immigrants. <i>Behavioral Science & Policy</i> , 1(2), 1–12.	Marginalization and Radicalization	US
Robinson, R. S. (2016). Hijab in the American workplace: Visibility and discrimination. <i>Culture and Religion</i> , 17(3), 332–351.	Hijab discrimination	US
Budhwani, H., & Hearld, K. R. (2017). Muslim women's experiences with stigma, abuse, and depression: results of a sample study conducted in the United States. <i>Journal of Women's Health</i> , 26(5), 435–441.	Stigma, abuse, depression	US
Hadi, A. (2017). Patriarchy and gender-based violence in Pakistan. <i>European Journal of Social Science Education and Research</i> , 4(4), 297–304.	Gender based violence, patriarchy	Pakistan
Wilkins-Laflamme, S. (2018). Islamophobia in Canada: Measuring the realities of negative attitudes toward Muslims and religious discrimination. <i>Canadian Review of Sociology/Revue Canadienne de Sociologie</i> , 55(1), 86–110.	Islamophobia	Canada

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Table 3.1 (continued)

Study	Deficit orientation	Location(s) of study
Keegan, K., & Morris, W. L. (2018). Mass Murder in the News: How Religion Influences Perception of Terrorism. <i>Psi Chi Journal of Psychological Research</i> , 23(5), 354–363. https://doi-org.ezproxy.uhd.edu/10.24839/2325-7342.JN23.5.354	Terrorism	US
Lowe, S. R., Tineo, P., & Young, M. N. (2019). Perceived discrimination and major depression and generalized anxiety symptoms: in Muslim American college students. <i>Journal of Religion and Health</i> , 58(4), 1136–1145.	Perceived discrimination, depression, anxiety	US
Boysen, G. A., Isaacs, R. A., Tretter, L., & Markowski, S. (2020). Evidence for blatant dehumanization of mental illness and its relation to stigma. <i>Journal of Social Psychology</i> , 160(3), 346–356. https://doi-org.ezproxy.uhd.edu/10.1080/00224545.2019.1671301	Dehumanization, mental illness, stigma	US and Canada
Beller, J., & Kröger, C. (2020). Religiosity and perceived religious discrimination as predictors of support for suicide attacks among Muslim Americans. <i>Peace and Conflict: Journal of Peace Psychology</i> , Advance online publication. https://doi.org/10.1037/pac0000460 .	Religiosity, religious discrimination, and support for suicide attacks	US

research conducted with Muslims who live in Muslim majority, non-WEIRD countries, has the advantage of centering Islamic cultures and allowing researchers to focus on wellness as it is defined and exists within Muslim communities. Utilizing a sample of Muslim undergraduates in the United Arab Emirates, Aveyard (2014) focused on culturally congruent symbols and rituals (such as the *adhan*, or Muslim call to prayer) to measure the psychological construct of morality. Noting the affective salience of the stimuli (namely, listening to the *adhan*) to Muslims, the authors discussed cultural variations in the route of processing. That is, in some cultures, sensory stimuli such as hearing the *adhan* become paired in one's mind with a sense of virtue and good character, creating an affective link to the concept of morality. In contrast, other cultures may connect with a concept such as morality through a purely cognitive lens (Aveyard, 2014). In regions where Muslims are the minority, one would not hear the Islamic call to prayer announced in public spaces, thus the impact of such measures on Muslim lives cannot be accurately assessed in WEIRD contexts. Other studies conducted with Muslim majority populations describe Islamic influences on preventive health behaviors as well as appropriately pairing measures of religiosity with measures of wellbeing when assessing the

impact of religious identity on Muslim populations (Achour, Grine, Nor, & MohdYusoff, 2015).

Culturally responsive research should identify the strengths and values of a community, seeking to enhance wellbeing and effectiveness of the community through the research. There is an imperative need to better understand Muslim populations, as well as the utility and contributions of Islam to the field of psychology and mental health (Haque, Khan, Keshavarzi, & Rothman, 2016; Rothman & Coyle, 2018). It is important to remember there is no single “Islamic culture”; Muslim majority regions represent highly diverse cultures, sects, and histories. If such diversity is to be understood, the ways we ask questions must be as varied as the diversity we encounter. Given that WEIRD researchers represent the dominant narrative that continues to perpetuate biases of minoritized populations (Kline, Shamsudheen, & Broesch, 2018), alternative models are necessary to present the voices and data that is missed in deficit-based research. Table 3.2 provides examples of strengths-based studies of Muslim populations as a counterpoint to deficit-oriented research. In comparing strengths-based to deficit-based models, it is important to acknowledge that wellbeing is not the opposite of depression, but rather a unique way of understanding how individuals thrive. As positive psychology research utilizes the strengths of a population to understand constructs such as happiness, subjective wellbeing, and life satisfaction (Jorm & Ryan, 2014; Seligman, 2006), it is an approach that centers wellness—rather than the absence of distress or disease—as a key feature of health (WHO, 2018). Although a complete list of studies addressing Muslim populations and wellbeing is beyond the scope of this chapter, Table 3.2 highlights some of the studies conducted within the last 5 years in Muslim majority countries.

Looking at the studies highlighted in Table 3.2, we can see another thorny issue in conducting research with Muslim participants: namely the lack of culture-specific scales. Despite calls for more indigenous measures of psychological constructs (Abu Raiya et al., 2007; Lambert, Pasha-Zaidi, Passmore, & Al-Karam, 2015), the instruments used by researchers working with Muslim populations continue to substantiate the prominence of Western conceptualizations. Interestingly, even though the studies in Table 3.2 were conducted with Muslim populations living in Muslim majority regions, they largely utilized Western measures of wellbeing. Given that Islamic beliefs and practices have been empirically linked to Muslims’ wellbeing (Abu-Raiya, 2013; Tiliouine, Cummins, & Davern, 2009), the importance of including Islam as a factor cannot be ignored. Batchelor’s (2013) Islamic Index of Wellbeing (IIW) for Muslim Majority Countries is one such scale, but much more needs to be done to develop culturally responsive tools that can capture the experiences of Muslims in both Muslim majority and Muslim minority contexts (see Chap. 15 in this book). While researchers may use religiosity scales to include this aspect of Muslim experiences, it does not negate the need for more non-Western conceptualizations of happiness, wellbeing, life satisfaction, and other positive psychology constructs.

Table 3.2 Selected studies of wellbeing, happiness, and life satisfaction among Muslim populations

Study	Positive psychology scale(s) or construct (s)	Region of study
Maham, R., Bhatti, O. K., & Öztürk, A. O. (2020). Impact of Islamic spirituality and Islamic social responsibility on employee happiness with perceived organizational justice as a mediator. <i>Cogent Business & Management</i> , 7(1), 1788875.	Oxford Happiness Questionnaire (Hills & Argyle, 2002)	Malaysia
Rosli, N. A. M., Suhaimi, H., Saari, Z., Siwok, S. R., Latif, A. A., Masroom, M. N., ... & Othman, N. (2020). Happiness in Islamic Perspectives among Multi-Tasking Women in Malaysia. <i>UMRAN-International Journal of Islamic and Civilizational Studies</i> , 6 (3–2), 125–137.	Qualitative analysis of interviews on happiness	Malaysia
Maham, R., & Bhatti, O. K. (2019). Impact of Taqwa (Islamic piety) on employee happiness: A study of Pakistan's banking sector. <i>Cogent Business & Management</i> , 6(1), 1–22.	Oxford Happiness Questionnaire (Hills & Argyle, 2002)	Pakistan
Alorani, O. I., & Alradaydeh, M. T. F. (2018). Spiritual well-being perceived social support, and life satisfaction among university students. <i>International Journal of Adolescence and Youth</i> , 23(3), 291–298.	Satisfaction with Life Scale (SWLS, Diener, Emmons, Larsen, & Griffin, 1985)	Jordan
Munawar, K., & Tariq, O. (2018). Exploring relationship between spiritual intelligence, religiosity and life satisfaction among elderly Pakistani Muslims. <i>Journal of Religion and Health</i> , 57(3), 781–795.	Satisfaction with Life Scale (SWLS, Diener et al., 1985)	Pakistan
Demirci, İ., & Ekşi, H. (2018). Keep calm and be happy: A mixed method study from character strengths to well-being. <i>Educational Sciences: Theory & Practice</i> , 18(2).	Qualitative analysis of interview data conceptualizing peace and happiness; Quantitative items of peace and happiness developed from qualitative results	Turkey
Bhatti, M. I. (2017). Meaning in life and psychological well-being among flood victims in Pakistan: The moderating role of resilience. <i>Bahria Journal of Professional Psychology</i> , 16(2), 73–86.	Warwick-Edinburgh Mental Well-being Scale (Tennant et al., 2007); The Ego Resiliency Scale (Block & Kremen, 1996); Meaning in Life Questionnaire (Steger, Frazier, Oishi, & Kaler, 2006)	Pakistan
Robbins, M., Francis, L. J., & Tekke, M. (2017). Religious affect and personal happiness: A replication among Sunni students in Malaysia. <i>Journal of Muslim Mental Health</i> , 11(2), 3–15.	The Oxford Happiness Inventory (Argyle et al., 1989)	Malaysia

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Table 3.2 (continued)

Study	Positive psychology scale(s) or construct (s)	Region of study
Achour, M., Nor, M. R. M., Amel, B., Seman, H. M. B., & Mohd Yusoff, M. Y. Z. (2017). Religious commitment and its relation to happiness among Muslim students: The educational level as moderator. <i>Journal of Religion and Health, 56</i> (5), 1870–1889.	Subjective Item Scale (Achour et al., 2017)	Malaysia
Hamsyah, F., & Subandi. (2017). Dzikir and Happiness: A Mental Health Study on An Indonesian Muslim Sufi Group. <i>Journal of Spirituality in Mental Health, 19</i> (1), 80–94.	Adapted SWLS (Diener et al., 1985); Adapted PANAS (Watson, Tellegen, & Clark, 1988)	Indonesia
Al-Seheel, A. Y., & Noor, N. M. (2016). Effects of an Islamic-based gratitude strategy on Muslim students' level of happiness. <i>Mental Health, Religion & Culture, 19</i> (7), 686–703.	The Scale of Positive and Negative Experience (SPANE, Diener et al., 2009); Satisfaction with Life Scale (SWLS, Diener et al., 1985)	Malaysia
Aghababaei, N., Sohrabi, F., Eskandari, H., Borjali, A., Farrokhi, N., & Chen, Z. J. (2016). Predicting subjective well-being by religious and scientific attitudes with hope, purpose in life, and death anxiety as mediators. <i>Personality and Individual Differences, 90</i> , 93–98.	Subjective Happiness Scale (SHS; Lyubomirsky & Lepper, 1999); SWLS (Diener et al., 1985); Hope Scale (Snyder et al., 2002); Purpose in Life Test (PLT; Crumbaugh & Maholick, 1964)	Iran
D'raven, L. L., & Pasha-Zaidi, N. (2015). Happiness in the United Arab Emirates: conceptualisations of happiness among Emirati and other Arab students. <i>International Journal of Happiness and Development, 2</i> (1), 1–21.	Qualitative analysis of written responses to conceptualizations of happiness	United Arab Emirates
Joshanloo, M. (2015). Conceptions of happiness and identity integration in Iran: A situated perspective. <i>Middle East Journal of Positive Psychology, 1</i> (1), 24–35.	Eudemonia Scale (Joshanloo, 2014)	Iran
Achour, M., Grine, F., Nor, M. R. M., & Mohd Yusoff, M. Y. Z. (2015). Measuring religiosity and its effects on personal well-being: a case study of Muslim female academicians in Malaysia. <i>Journal of Religion and Health, 54</i> (3), 984–997.	SWLS (Diener et al., 1985); Job satisfaction scale (Hackman & Oldham, 1975)	Malaysia
Khan, Z. H., Watson, P. J., Naqvi, A. Z., Jahan, K., & Chen, Z. J. (2015). Muslim experiential religiousness in Pakistan: Meaning in life, general well-being and gender differences. <i>Mental Health, Religion & Culture, 18</i> (6), 482–491.	General Well-Being Scale (Dalbert, 1999); Meaning in Life Questionnaire (Steger et al., 2006)	Pakistan

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Table 3.2 (continued)

Study	Positive psychology scale(s) or construct (s)	Region of study
Farhan, R., Dasti, R., & Khan, M. N. S. (2015). Moral intelligence and psychological well-being in healthcare students. <i>Journal of Education Research and Behavioral Sciences</i> , 4(5), 160–64.	Ryff Scale of Psychological Well-being (Ryff et al., 2007)	Pakistan
Eryilmaz, A. (2015). Investigation of the relations between religious activities and subjective well-being of high school students. <i>Educational Sciences: Theory & Practice</i> , 15(2), 433–444.	SWLS (Diener et al., 1985); Positive-Negative Affect Scale (PANAS; Watson et al., 1988); Adolescents' Subjective Well-being Increasing Strategies Scale (Eryilmaz, 2010)	Turkey
Joshanloo, M., & Daemi, F. (2015). Self-esteem mediates the relationship between spirituality and subjective well-being in Iran. <i>International Journal of Psychology</i> , 50(2), 115–120.	SWLS (Diener et al., 1985)	Iran

3.4 Culturally Responsive Research

Researchers working with minoritized populations sometimes publish findings that reinforce negative stereotypes, while providing little if any benefit to the actual population being studied (Scharff et al., 2010; Simonds & Christopher, 2013). A quick search for research related to African Americans, Hispanic populations, and Native Americans, presents numerous titles of deficit-based studies; categorizing these communities by poverty, crime, substance use, and poor academic outcomes. With respect to Native American communities, researchers have emphasized risk factors that reinforce social stigmas such as suicide rates, substance abuse, and domestic violence, often overlooking strengths or identifiable needs of the community. Reinforcement of negative trends within minoritized communities (i.e., Native Americans have higher rates of substance abuse, domestic violence, and rape) not only damages the relationship between the community and the researcher, it ends up further dehumanizing the minority population. In Native American communities, the term “helicopter researchers” (Boyer et al., 2011; Campbell, 2014) reflects the notion that researchers often encroach upon a community with the intent of fulfilling a research agenda, while paying little attention to the needs of the community. Helicopter researchers display a lack of sensitivity and often make little effort to use the data to benefit the community they have studied. Given the lack of nuanced information in the traditional psychology research literature about minoritized groups, focusing repeatedly on the dysfunctional (or perceived dysfunctional) aspects of such a community is not only irresponsible, but unjust.

Sensitivity is thus a requirement of research conducted with minoritized population groups. Dillard’s (2000) model presents a framework for culturally sensitive research, emphasizing the relationship of the researcher to the community, acknowledging power and systemic influences, and placing responsibility on the researcher

to accurately represent the community, both its strengths and challenges. Many researchers demonstrate their own voices as a primary source of information when representing study participants. Unfortunately, this approach centers the researcher, not the minoritized community, and essentially contributes to the silencing of disenfranchised voices. Culturally sensitive researchers, on the other hand, attempt to achieve resonance with, rather than power over, the population they are studying, and acknowledge the historical traumas that have impacted marginalized communities. When researchers from a WEIRD population conduct studies using participants from minoritized communities, the balance of power favors the researchers' worldview, which may not capture the nuances of minoritized experiences (Watson-Singleton, Black, & Spivey, 2019).

Muslims in the United States often face discrimination, especially in the post 9/11 era of Islamophobia. The increase in negative representation of Muslims in the media adds to the vulnerability and stressors within these communities (Amer & Bagasra, 2013). Researchers would benefit from asking themselves why Muslims would want culturally and religiously ill-informed researchers representing them to the greater public. As it stands, Muslims are often wary of participating in research until they can be certain that the information collected will not be used to further inflame Islamophobic discourse (Abu Raiya, Pargament, Stein, & Mahoney, 2007; see also Chap. 15 in this book). It is worth reiterating here that researchers bear a responsibility to paint stigmatized populations, including Muslims, in ways that reflect their humanity to the greater society. Researchers are in the position to act as advocates for minoritized groups and must consider their role to do no harm to the populations with whom they interact (Tillman, 2002). Culturally responsive researchers take great care to protect the humanity and the rights of the communities they represent. If researchers limit their inquiries to biased topics, they stand the risk of defining groups of people in public opinion based on these biased inquiries. For example, Muslim Americans have become known in the research based on their relationship to 9/11, religious rituals condoning violence, and cultural practices viewed by the Western world as oppressive (Amer & Bagasra, 2013). How do these topics shape our understanding of Muslims in general? How much is missing? What potential harm could we be contributing by furthering these narratives?

Sensitivity to the needs of the population being studied and using research to improve the quality of life or address a key problem in the lives of the individuals being studied is present in a growing body of qualitative research (Tervalon & Murray-Garcia, 1998). Culturally sensitive research methods are advocacy-minded and therefore use approaches that preserve the voice of the individuals being studied, through interviews, naturalistic observation, and narratives. Thus, qualitative methodologies tend to be a good match for researchers interested in advocacy. The ability to present the stories of a population accurately from the population's perspective, the hardships and strengths as they occur around the topic of inquiry, reflects a tenet in the cultural humility model of using the power of the researcher to remove barriers for the minoritized population (Tillman, 2002). Researchers bear a responsibility to not reinforce social stigmas for a population, but to present research in a way that preserves the dignity and social standing of the minoritized population being

represented. How can researchers best partner with their participants to address the problems that are being observed? This question is important to the establishment of ethical research practices (Tillman, 2002). Furthermore, culturally responsive research must not only identify a problem or phenomenon within a community, but also provide connections to the outside world to discuss the problem or phenomenon in productive ways that do not replace the voice of the community with the voice of the researcher. All researchers should therefore aim to empower the community and address their need to have accurate and nuanced representation (Watson-Singleton et al., 2019).

Cultural humility as a model for research and clinical practice assumes the position of the researcher as a lifelong learner, a student rather than an expert, open to new knowledge and actively working to increase understanding of research and practice with diverse populations (Tervalon & Murray-Garcia, 1998; Yeager & Bauer-Wu, 2013). One way of conducting culturally sensitive research is through participatory methods that involve active collaboration between researchers and the community being studied, where participants can be involved in the process and assume responsibility for parts of the study. This approach to research differs from traditional methods and can be a key component in giving a voice to marginalized populations and lessening the power imbalance between academia and communities. Participatory research allows for communities that have been painted with stereotypes and misinformation to have an active voice in representing themselves. For Muslims, researchers outside of the community may inadvertently overgeneralize, or incorrectly interpret aspects of Muslim life and culture due to their own lack of knowledge. Participatory research can be an asset for informing the research and lessening misinformation and may be a starting point to better serve the needs of the Muslim community (Pasha-Zaidi, 2019).

A Deeper Dive: Culturally Responsive Questions to Engage with Minoritized Communities

Munir Shah and Nasreen Shah

Culturally responsive research is imperative when working with disenfranchised groups. What are some of the ways in which researchers can begin to utilize cultural sensitivity in designing and conducting studies, especially when those researchers are not a part of the community being studied? Cultural humility and authentic interest in the community's needs and perspectives can be gauged through the types of interactions researchers have with community leaders. As researchers, we may find ourselves in the unenviable position of not knowing where to start and what questions to ask to help us be responsive to the communities we are serving with our research. The key word here is service: How can we best serve the community? When

(continued)

engaging in dialogue with community leaders, researchers can use the following points of consideration to guide the conversation:

- What does this community need from me as a researcher and/or clinician?
- How can my work best be utilized to serve this community?
- What concerns do community members have about our research? How can we best address these concerns?
- What is it you need us to know about this community?
- How can I help?

3.5 Mindful Research and Cultural Humility

Before embarking on a study of minoritized groups, researchers must identify the subgroups that are of interest: what level of the system is the researcher aiming to target? If the aim is to gain information on Muslim youth, for example, it may be helpful to engage with school personnel, such as teachers, guidance counselors, school psychologists, as well as parents, to understand systemic influences relevant to the study (Ahmed & Amer, 2013). School personnel who work closely with the targeted population can be valuable collaborators in the research process. Secondly, when working with youth, securing interpreters for parents who might have a different first language is important. Researchers should also consider the setting in which the study will be conducted and whenever possible, go to the population with whom they would like to work as opposed to expecting participants to physically come to them. Meeting in safe spaces such as their mosque or school, or a neutral setting such as a community center, in addition to having interpreters, are factors that create a climate of comfort and trust. Requiring minoritized groups to go into predominantly White institutionalized settings can be intimidating and may add to a power imbalance between participants and the researchers.

Research conducted on minoritized populations should be done for the community and preferably from within the community. Researchers are encouraged to first build relationships with the community they seek to target, including collaboration with scholars and practitioners within that community or adjacent to it. For example, if non-Muslim researchers are interested in collecting data on the use of mental health services among Muslim women, they can start by engaging in discourse with leaders of Muslim women's programs at local Islamic centers. One way to build relationships if the researcher has no ties to the community, is to collaborate with a colleague who is part of this community, or who has already built a relationship with the community (Ahmed & Amer, 2013). Researchers may be able to increase involvement from Muslim participants if their work is promoted by a known and trusted figure such as an imam or council member. Taking the time to meet with members of the Muslim community, to hear their concerns and build relationships with them, also increases likelihood of participation as well as facilitating a culture of trust. Without establishing such relationships, researchers may face barriers in

accessing the population they wish to study. They are also less likely to obtain authentic data, especially if the participants are suspicious of the intent of their research. Being good stewards of the data facilitates ongoing relationship and engagement with the community and reflects the condition of trust and the mission of utilizing the data to first benefit the community being represented.

The tenets of cultural humility can empower communities by enhancing ethical research practices. It is important to carefully consider the ways researchers have misrepresented communities, often unintentionally, by neglecting culturally responsive methods of data collection and analysis. Investigators and consumers of research should pay particular attention to methodology, language, and pre-existing data as it shapes how current data is presented. By engaging in cultural humility, researchers may be better able to identify best practices and ways of ethically partnering with minoritized communities.

3.6 Resiliency Theory: Strengths-Based Research

Research is an important tool for identifying the deficits and needs of a community to support wellbeing and navigate barriers. Concerns within Muslim families, social structure within the mosque, and inter and intra-group relations represent key areas of focus. However, the cultural diversity within the community creates its own challenges. Three quarters of Muslim Americans are either first or second-generation immigrants spanning a range of continents from Asia, Africa, Europe and the Middle East (Lipka, 2020). The imam and governing board make key decisions regarding services, education, and social support of members; and mosques function as a place of community for members of diverse cultural, racial, and generational backgrounds (Nguyen, 2017). However, mosques and Islamic centers in the United States face challenges in accommodating a diversity of values, needs, and practices. Culturally responsive researchers may find it challenging to investigate the concerns of marginalized groups in a manner that does not reinforce negative perceptions of the community. One way that researchers can address areas of concern without furthering bias is through monitoring their work for biased language and use appropriate terminology (American Psychological Association, 2019). This is not a simple endeavor and requires researchers to consider an alternative approach to developing and conducting research. Research traditionally begins with a “problem statement”; as such, it lends itself to a deficit view of the topic. However, research questions and study designs do not necessarily need to be deficit-oriented. Topics such as depression, trauma, and stress can instead be approached from a resiliency model. Resiliency Theory provides a conceptual framework for exploring traditionally negative psychological functioning through the opposite side of the coin: the positive contextual, individual, and social variables that can offset risk factors (Werner & Smith, 1992; Zimmerman et al., 2013). These are known as protective factors and may come in the form of assets (personal or individual strengths) or resources, such as parent and/or community supports. Even in studies designed to investigate primarily

Table 3.3 Examples of traditional and strengths-based research questions

Traditional research question/topic	Strengths-based research question/topic
<ul style="list-style-type: none"> • What is the impact of Islamophobia on depression and anxiety? 	<ul style="list-style-type: none"> • What protective factors impact the influence of Islamophobia on depression and anxiety?
<ul style="list-style-type: none"> • Muslim women, the veil, and the role of women in Islam 	<ul style="list-style-type: none"> • Muslim Women: narratives of intersectionality, values, and personal identity
<ul style="list-style-type: none"> • What is Islamic extremism? 	<ul style="list-style-type: none"> • What is the impact of labels such as “extremist” and “terrorist” on the wellbeing of Muslim communities?
<ul style="list-style-type: none"> • What is the impact of Muslim identity on self-esteem and academic performance? 	<ul style="list-style-type: none"> • How does religious identity contribute to self-esteem and academic performance?
<ul style="list-style-type: none"> • In what ways do traditional Muslim views of gender contribute to incidences of domestic violence in Muslim homes? 	<ul style="list-style-type: none"> • What protective factors are viable for the reduction of domestic violence in Muslim communities?
<ul style="list-style-type: none"> • What factors contribute to employment discrimination among visibly Muslim job applicants? 	<ul style="list-style-type: none"> • How does the employment of visible religious minorities enhance diversity in the workplace?

deficit-oriented topics, protective factors can be included as secondary research questions. In working with marginalized populations, in particular, it is important to include information on the assets and resources that may combat the deficits being discussed. Research is not apolitical and providing sources of strengths and resilience within marginalized communities can provide more equitable coverage of deficit-oriented topics (Table 3.3).

Social justice is an ethical tenet across multiple disciplines of mental health work (Munsey, 2011) and psychological research with minoritized groups requires that the same ethical principles be applied in constructing and disseminating knowledge. Muslim communities are expected to adhere to the social justice framework that comes from the Qur’an and *hadith*, which pair well with the APA code of ethics for social justice (Table 3.4). This common ground creates a space in which researchers can develop coherence toward responsible research practices.

3.7 Recommendations for Conducting Research with Muslim American Populations

Although research focusing on Muslims has increased since 9/11, there continues to be a gap in comparison to the coverage of WEIRD populations. In working with Muslim communities, researchers should bear in mind the hesitancy participants may feel in contributing to research studies (Ahmed & Amer, 2013). In particular, the impact of Islamophobia on psychological research creates a fear that results will be used to add fodder to existing stereotypes. As such, many Muslims, particularly those living in non-Muslim majority regions, tend to be suspicious of the reasons behind the research. Self-report research, which accounts for a large number of

Table 3.4 Aligning social justice in the Qur’an with the APA code of ethics

Selected quotes from Qur’an and <i>Hadith</i>	APA code of ethics
Indeed, Allah enjoins justice, and the doing of good to others; and giving like kindred; and forbids indecency, and manifest evil, and wrongful transgression. He admonished you that you may take heed. (Al Qur’an 16:91) The reward of goodness is nothing but goodness. (Al Qur’an 55:61)	Beneficence: do good
Whosoever killed a person ... it shall be as if he had killed all mankind” (5:32) The Messenger of Allah, peace and blessings be upon him, said, “Do not cause harm or return harm. Whoever harms others, Allah will harm him. Whoever is harsh with others, Allah will be harsh with him.” (<i>Hadith</i> of Abu Sa’id al-Khudri)	Maleficence: do no harm
Hadith: “Honesty descended from the Heavens and settled in the roots of the hearts of men (faithful believers), and then the Qur’an was revealed and the people read the Qur’an, (and learnt it from it) and also learnt from the sayings and traditions. Both the Qur’an and the traditions strengthened their honesty. (Sahih Al-Bukhari)	Fidelity
“Woe unto those who give short measure, those who, when they are to receive their due from people, demand that it be given in full but when they have to measure or weigh whatever they owe to others, give less than what is due. Do they not know that they are bound to be raised from the dead (and called to account) on an awesome Day, the Day when all men shall stand before the Sustainer of all the worlds?” (Qur’an 83:1–6)	Justice & Integrity

psychological studies, is subject to a number of biases, including social desirability bias (Laajaj et al., 2019). In other words, participants may provide information that makes them look good. Thus, conducting research focusing solely on deficit-oriented topics within Muslim communities can be difficult.

Building trust is an essential prerequisite to conducting research with marginalized populations. As noted earlier in this chapter, developing relationships with Muslim researchers, community organizations, and Islamic centers is a good way to begin (Ahmed & Amer, 2013; see Chap. 14 in this book for opportunities and challenges of American Islamic centers). Learning about the essential tenets of Islam and how they may influence Muslim worldviews requires researchers to delve more deeply into their own understanding of the population they are planning to study. Qualitative research utilizes data collection methods, such as interviews, narratives, and ethnographies that centers marginalized voices. Participatory research designs attempt to go further by including marginalized communities in many, if not all, aspects of the study design, data collection, and interpretation of findings. In disseminating information, researchers should provide historical context and cultural values as necessary background in articles and presentations.

Centering the American Muslim perspective within research studies can also be achieved by a broader call to include cultural context as a standard in any psychological research. Even within mainstream research, audiences will filter information from their point of view. Therefore, including a cultural and historical context for the

area of focus allows audiences to consider the specific (other) viewpoints needed to understand the problem, and may help reduce the biases and stereotypes arising from their own cultural experience. Although cultural context is generally included in journal articles that reflect lesser-studied, international, marginalized or non-White populations, it is in fact also important to include cultural context within articles that rely on participants from WEIRD backgrounds. This can alert consumers of research about the influence of majority norms on the results and discussion of constructs, rather than normalizing WEIRD experiences as the standard. By highlighting the importance of culture within mainstream research, we can begin to expand our understanding and acceptance of norms, behaviors and customs outside of the Western majority, enhancing application and value of the research.

3.8 Conclusion

In this chapter, we discussed the influence of cultural constructs on the development and acceptance of social norms that impact understanding of “othered” populations. We posit that the application of cultural humility can center the experiences of minoritized and non-Western populations in research, thus limiting “helicopter” practices that add to the existing social science literature while disregarding the needs and ramifications of findings to the communities being studied. Research is not apolitical and the ways in which researchers approach knowledge-seeking affects marginalized groups for better or worse (Dupont, 2008). In developing research designs and questions, researchers rely on existing publications to inform their own studies. This is one of the first steps in the scientific method. If literature reviews indicate overwhelmingly negative coverage of minoritized experiences without corresponding strengths-based approaches to offset that slant, researchers should consider reformulating their questions to consider positive psychology concepts such as resilience, post-traumatic growth, meaning in life, subjective wellbeing, hope, and mindfulness. As North American and WEIRD populations continue to be the main source of psychological information (Arnett, 2009), extant literature provides diverse options for understanding the experiences of the 5–12% represented in these regions. However, much less is understood about the psychology of individuals who reside in other parts of the world, which leaves more room for the proliferation of stereotypical information and less opportunity to counterbalance those narratives. As such, researchers must be mindful of the impact their studies have on the information that is available. Muslim populations, like other stigmatized groups, may be suspicious of researchers’ intent, and wary of adding to Islamophobic rhetoric (Abu Raiya et al., 2007). Not only can this lead to more difficulty in obtaining the participation of Muslims in research studies; it adds to the dilemma of how to best approach the realities of many Muslim regions that are ravaged by war and political instability. In addressing these issues, it is not enough to

describe the negative consequences; researchers must go further to elucidate the strengths and coping strategies that Muslim individuals need and rely upon to face social, political, and economic injustices. As researchers, we are in the position of creating knowledge that either stokes fears and biases or helps put them into perspective. With the right methods and research questions at our disposal, the way the world sees a minority population can be elevated in ways that do good rather than harm. The responsibility of that knowledge lies with us.

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