



Tradition and Taboo: Understanding the Role of South Asian Culture in Mental Health
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Abstract (298)

In the United States, about 59.3% of adults experience mental illness each year (National Institute of Mental Health, n.d.), yet in South Asia, only an estimated 7.5 to 10 % of people are identified as suffering from mental disorders (Naveed et al., 2020). Does this mean South Asians experience greater mental health? Not necessarily. A study done in 2020 showed that South Asians show high rates of mental issues, but they rarely seek treatment (Shah, 2022). It was hypothesized that while cultural practices like strong community support and shared traditions may offer a positive impact on the mental health of South Asian people, these traditions and the taboos that come with them also lead to higher levels of stress, anxiety, and feelings of isolation. In order to test this, an online survey was completed by 53 women and men with a South Asian background. Countries represented included Bangladesh, Bhutan, India, Pakistan, Nepal, Sri Lanka, the Maldives, and parts of Afghanistan, and the majority of the responses (36) came from an Indian background while Pakistani (14) had the second largest pool of responses. Based on the survey responses, the data mostly supports the hypothesis. Some of the results showed the positive effects. For example, many respondents agreed that South Asian culture emphasizes academic success and family support, which they saw as helpful. However, responses were mixed when it came to emotional support and being able to talk openly about mental health. This shows that while cultural values can help people feel connected, they can also make it harder to speak up or get help when someone is struggling. Overall, this study shows the need for more open conversations about mental health in South Asian communities and for more culturally sensitive ways to support people who are struggling.

Literature Review

In the United States, about 59.3% of adults experience mental illness each year (National Institute of Mental Health, n.d.), yet in South Asia, only an estimated 7.5 to 10 % of people are identified as suffering from mental disorders (Naveed et al., 2020). Does this mean South Asians experience greater mental health? Not necessarily. A study done in 2020 showed that South Asians show high rates of mental issues, but they rarely seek treatment (Shah, 2022). South Asia is made up of several countries, including Bangladesh, Bhutan, India, Pakistan, Nepal, Sri Lanka, the Maldives, and parts of Afghanistan. South Asia is home to diverse cultures and societies. However, many of these cultures are rooted in festivals and celebrations as well as social norms related to family respect, traditional gender roles, and religion. While cultural practices like strong community support and shared traditions may offer a positive impact on the mental health of South Asian people, these traditions and the taboo that comes with them tend to lead to higher levels of stress, anxiety, and feelings of isolation.

Aspects of South Asian community that can positively impact mental well being include having strong relationships, intergenerational support, a strong sense of collective identity, and deep rooted cultural traditions. Strong community support within these communities can allow people to feel more understood when sharing their feelings due to the shared cultural experiences. A member of the ASAC Editorial Team (2022) mentioned how having an understanding community can improve mental well being. The author talked about how a South Asian individual found greater success in therapy after switching to a psychologist with shared cultural experiences. The article states, “For example, thanks to her understanding of Indian culture, the new psychologist asked thoughtful and relevant questions, which encouraged my friend to engage more deeply with her experiences and by doing so, she was able to better articulate her thoughts and feelings” (ASAC Editorial Team, 2022, para. 8). The psychologist's ability to frame questions from a cultural perspective shows how understanding and having relatable support within a community can help people process their feelings better. Additionally, as members of these communities open up about their experiences, it strengthens their connections to one another. An article that has a focus on South Asian communities brings up information from the World Economic Forum that South Asian cultures are among the regions that place a high value on community support. The article argues that “When people have deep and meaningful relationships with other people in their communities, it enhances their emotional state and puts them in a better condition to collaborate with and support fellow community members to achieve more than any one of them could achieve alone (Kaneriya, 2017, para. 14). This demonstrates how in South Asian cultures, strong relationships are encouraged that strengthen community support. When people come together to achieve things, it helps them feel more comfortable and understood, making them feel better overall.

Shared traditions in South Asian communities can help bring people together, creating a sense of belonging and support that can improve mental well being. Shared cultural practices, like the celebration of Diwali. The Hindu holiday is centered around the idea of hope and renewal. It helps create a sense of belonging and community, which in turn supports a positive mental well being for many. An article mentions how these traditions can help people feel connected to their heritage and provide opportunities to share these experiences with others. The author, Srilekha states, “I’ve had the opportunity to spread this tradition to all sorts of people [...] take the time to be an ally to the community by learning about the deeper meaning of it” (C, 2023, para. 4). By introducing these traditions to others, individuals can strengthen their sense

of identity and belonging. Feeling connected to one's cultural roots and sharing these experiences with a community can reduce feelings of isolation and provide emotional support. This sense of connection fosters well-being by reinforcing social bonds and creating an environment where people feel valued and understood, which are key factors in maintaining a positive mental health. Participating in the social and communal aspects of other celebrations, like Eid, helps to create a sense of belonging and reduces social isolation, which are both linked to better mental health. Eid al-Adha, a significant holiday for Muslims in many South Asian communities, is centered around the story of prophet Ibrahim's willingness to sacrifice his son as an act of obedience to God. This holiday includes many social and religious acts such as attending special prayers, sharing meals with family and friends, and giving to those in need. Dr. David Spiegel, a psychiatrist and director of the Center on Stress and Health at Stanford Medicine, explains: "Having a community act that gives you a sense of doing something and doing something together with other people does help people to manage stress better" (Haider, 2024, para. 22). This shows how celebrations like Eid can provide a strong sense of community, which helps alleviate stress and improve mental well being. By participating in the holiday of Eid, with its rituals of giving and connection, people can gain emotional support, reinforcing the positive impact of cultural traditions on mental well being. Overall, the strong sense of community, shared traditions, and cultural practices in South Asian societies play a crucial role in fostering emotional support and connection, which significantly contributes to improved mental well being.

However, the negative impacts of South Asian communities on a person's mental health revolve around the strict cultural expectations and societal norms. Cultural and societal norms can create unreasonable expectations for both men and women. According to a study, the cultural and societal norms in Afghanistan allow women very little to no public life and their rights are severely restricted. This expectation negatively impacts mental health which can be seen because socially, 98% of women reported have little or no influence in community decisions. The number of women with influence in their homes has decreased by 60% in the past year. This lack of rights showed the escalating mental health issues when 68% of women reported having "bad" or "very bad" mental health (Penn, 2024). These findings prove how restrictive cultural norms can contribute to feelings of powerlessness and isolation, which are closely related with poor mental health. When individuals, especially women, are denied from having a say in their communities and households, it limits their freedom and increases psychological distress. In many South Asian cultures, men are pressured to suppress their emotions and avoid seeking help. The website article reveals that "societal expectations and traditional gender norms often influence how men express and cope with anger. It is common to believe that expressing vulnerability or seeking mental health support is a sign of weakness" (Action Against Hunger, 2023, para. 16). By discouraging emotional expression and seeking help, these cultural expectations force men to internalize their struggles and actively prevent them from seeking help. This can lead to long term mental health issues like stress, anxiety, and depression. The pressure to conform to traditional masculinity isolates individuals and creates a cycle where mental health issues often go unaddressed. An article written by Unaiza Niaz, a worker at the Psychiatric Clinic and Stress Research Center in Karachi, Pakistan notes that 50% of women in Pakistan experience physical violence towards them, and 90% have dealt with mental and verbal abuse (2004). due to cultural norms like marriage customs and the demand for women to uphold family honor (Niaz, 2004, para. 7). The prevalence of abuse is driven by cultural expectations that cause psychological harm and creates an environment of fear and

helplessness that can cause lasting mental health effects. When societal norms prioritize family honor over a person's well being, it creates a cycle of trauma and silence that makes it harder for women to seek help or get away from their harmful environments. A journal article states that "...South Asian women have high rates of suicide and self-harm as individuals may not seek help and view these acts as a way of managing distress" (Sangar and Howe, 2021, p. 18). This is influenced by the fact that many women have to conform to cultural expectations, such as keeping family honor, worsening their mental health due to those pressures. The pressure for women to uphold cultural expectations can cause them to feel trapped with no safe place for them to express their feelings, which leads to dangerous coping mechanisms like self harm. Strict cultural norms in these communities often create unrealistic expectations around mental health. An article mentions "In many South Asian communities, there is a strong taboo against speaking about mental health issues. Elders and others of repute within the community might talk about mental health as "all in your head," which gives the impression that "positive thinking" and "determination" should be enough to move past many mental health issues ("South Asian Mental Health Stigma", n.d., para. 5). When mental health struggles are dismissed as personal weaknesses rather than real concerns, people may feel invalidated and hesitate to seek help. This stigma not only prevents early intervention but also worsens feelings of loneliness and distress, making recovery more difficult.

Mental health treatment also often goes against strong religious beliefs within these cultures.

In a video it mentions how in Pakistan, mental health struggles are often perceived as a "curse from God," reinforcing stigma and discouraging individuals from seeking treatment (PBS News Hour, 2015). This belief leads to harsh treatments for those suffering from mental illnesses, further demonstrating how religious and cultural perceptions can be barriers to mental health care. This isolates the people struggling and reinforces harmful practices that worsen mental health. In a journal article, it mentions how many Muslims interpret their mental health issues as a sign of weak faith or a punishment for their sins. They may also relate it to evil eye or black magic (Alharbi et al., 2023). Viewing mental illness as a weakness in faith can discourage people from acknowledging their struggles, causing them to suffer in silence. This mindset prevents open discussions about mental health and makes it more difficult to change the stigma around getting professional treatment. A website article states that "Many Muslims believe that today's mental health issues are tests from God and therefore are not addressed" (Institute for Muslim Mental Health, n.d., para. 11). In many South Asian cultures, religious beliefs shape people's view of mental suffering which causes them to prioritize spiritual healing over seeking professional treatments, reinforcing the idea that seeking mental health care contradicts faith. When spiritual healing is prioritized over professional medical help, people may completely give up necessary treatment, worsening their condition. This belief system creates a barrier between faith and mental health care, making it harder for people to seek the help they need without judgement.

While having a strong community to rely on for support that comes with shared traditions does offer a positive impact on the mental health of South Asian people, there are many unreasonable expectations that cause stigma surrounding the topic which tends to lead to a higher prevalence of mental disorders. The shared cultural experiences within the community help cultivate a better sense of understanding that helps build a sense of belonging that can improve mental well being. Celebrations like Diwali and Eid reinforce social bonds, reducing feelings of isolation and providing individuals with a support system. However, restrictive cultural

expectations, gender roles, and the stigma surrounding mental health often prevent individuals from seeking help. The pressure to conform to societal norms can lead to stress, anxiety, and depression, particularly for men and women who feel trapped by these strict expectations. Additionally, religious beliefs sometimes act as barriers to professional mental health care, further isolating those in need. Addressing these challenges requires breaking the stigma around mental health discussions, promoting culturally sensitive therapy, and encouraging a balance between tradition and mental well being. By fostering open conversations and creating supportive environments, South Asian communities can ensure that mental health is prioritized alongside cultural values.

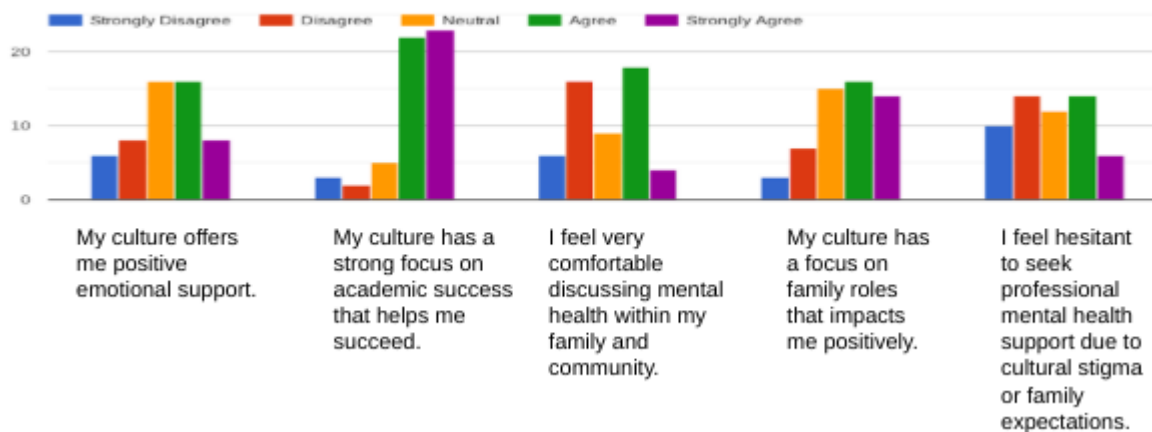
Data Collection and Methods

It was hypothesized that while cultural practices like strong community support and shared traditions may offer a positive impact on the mental health of South Asian people, these traditions and the taboos that come with them also tend to lead to higher levels of stress, anxiety, and feelings of isolation. In order to test this, an online survey was conducted. The questionnaire was distributed the week of March 12-19th 2025 and was completed by 53 women and men with a South Asian background. Countries represented included Bangladesh, Bhutan, India, Pakistan, Nepal, Sri Lanka, the Maldives, and parts of Afghanistan, and the majority of the responses (36) came from an Indian background while Pakistani (14) had the second largest pool of responses. The questionnaire asked about particular aspects of culture and religion and how they might affect a person's perception on mental health and their likelihood to seek help.

Results and Analysis

Figure 1

Identify to what degree you agree with the following statements.



This figure shows the extent to which respondents agree or disagree with statements about the impact of South Asian culture on emotional support, academic success, open discussions, family roles, and seeking help. The first statement asked whether people felt that South Asian culture provides emotional support. Responses were split: 15.1% strongly agreed, 15.1% strongly disagreed. The largest group, 30.2%, was neutral, while the rest were evenly divided between strong agreement and strong disagreement. This shows that while some respondents feel emotionally supported by their culture, an equal portion do not, and a larger share remains unsure. This supports the part of the hypothesis suggesting that cultural norms like the stigma surrounding open emotional communication in South Asian households can create barriers to expressing emotional needs and lead to feelings of isolation.

In contrast, there was overwhelming agreement with the statement that South Asian culture emphasizes academic success in a way that helps individuals succeed. A combined 84.9% of respondents agreed or strongly agreed, which challenges the part of the hypothesis that suggests cultural expectations might negatively affect mental health. Instead, this suggests that for many, cultural pressure to achieve is viewed as a motivating force rather than a source of stress.

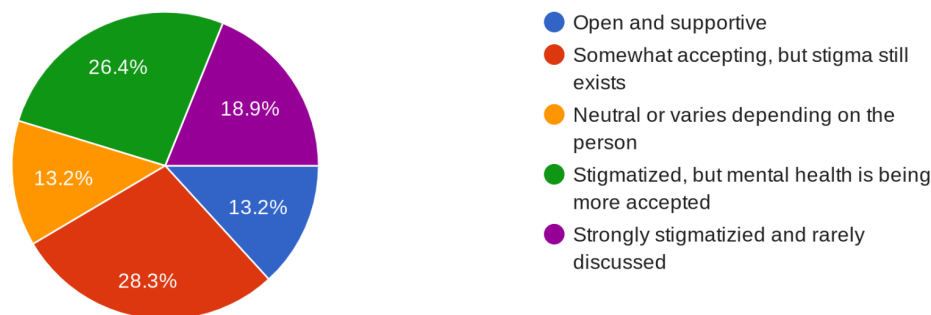
Responses to the statement about openly discussing mental health within families and communities were more balanced. About 41.5% agreed or strongly agreed, and another 41.5% disagreed or strongly disagreed, while only 17% were neutral. This even shows how some families are becoming more open to mental health conversations, while others still face silence and stigma. This supports the hypothesis that cultural taboos continue to influence mental health struggles by limiting open discussion.

Surrounding the role of family expectations, 56.6% agreed or strongly agreed that these cultural values have a positive impact, while 28.3% were neutral, and 22.6% disagreed or strongly disagreed. This mixed response supports the hypothesis that while traditional roles may offer structure and a sense of connection, they can also lead to conflict in terms of meeting expectations.

Lastly, 37.7% of respondents agreed or strongly agreed that they feel hesitant to seek professional mental health support due to cultural stigma or family expectations, while 45.3% disagreed or strongly disagreed, and 26.4% were neutral. This shows that while stigma remains a significant barrier for many, others are beginning to shift away from traditional views. This finding aligns directly with the hypothesis, emphasizing how cultural stigma continues to discourage help-seeking behaviors, potentially leaving mental health needs unaddressed.

Figure 2

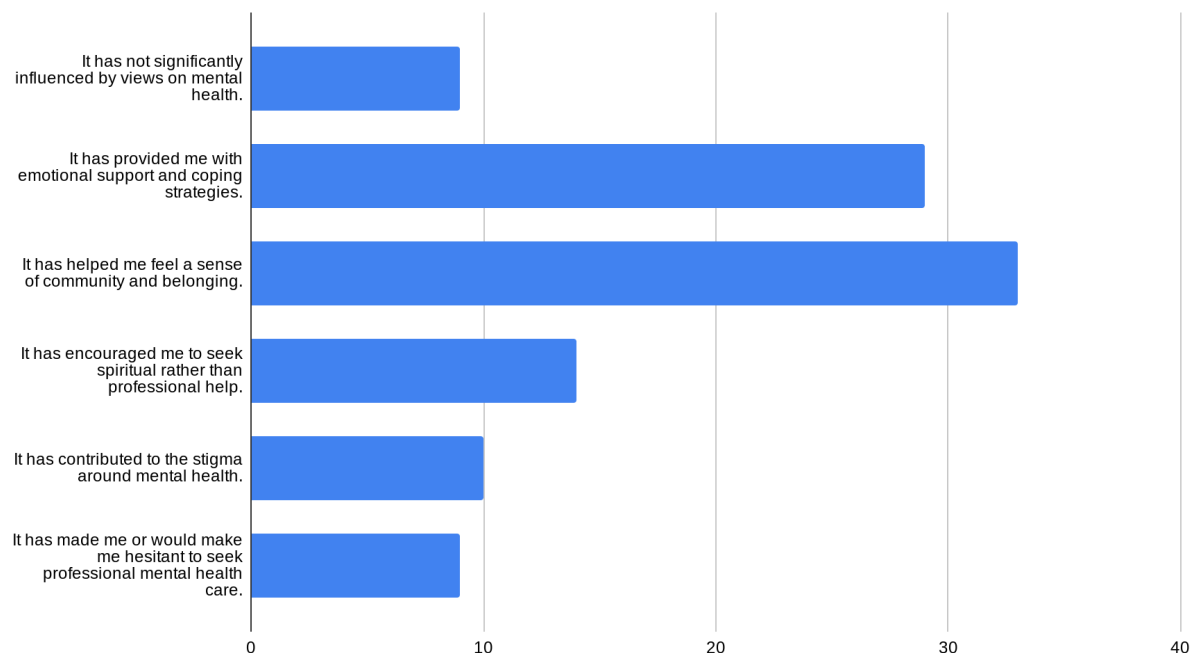
How would you describe your community's attitudes towards mental health issues?
53 responses



This pie chart shows how respondents perceive their community's attitudes toward mental health. Only 13.2% of the respondents described their community as open and supportive, showing that full acceptance of mental health discussions is uncommon. Similarly, 13.2% selected the option "neutral or varies, depending on the person", which shows inconsistency in attitudes across individuals and communities within the same cultural context. The most common response, chosen by 28.3%, was "somewhat accepting, but stigma still exists." This highlights a pattern where there is increased awareness, but there are still cultural barriers that continue to shape how mental health is discussed or avoided. Additionally, 26.4% described their community as "stigmatized, but mental health is being more accepted." This shows a transition phase for many communities, where traditional views are being changed over time, even though stigma has not fully disappeared. Meanwhile, 18.9% of the respondents said mental health is "strongly stigmatized and rarely discussed," contributing to the idea that in many communities, mental health remains a taboo subject. These results support the hypothesis since while there are positive cultural elements, such as shared traditions and a growing openness in some communities, stigma still plays a significant role in preventing open conversations and professional support. The majority of responses fall into categories that acknowledge some level of stigma which suggests that although process is being made, cultural norms rooted in silence, family reputation, and traditional roles continue to negatively influence mental health openness.

Figure 3

How has religion personally influenced your views on mental health?

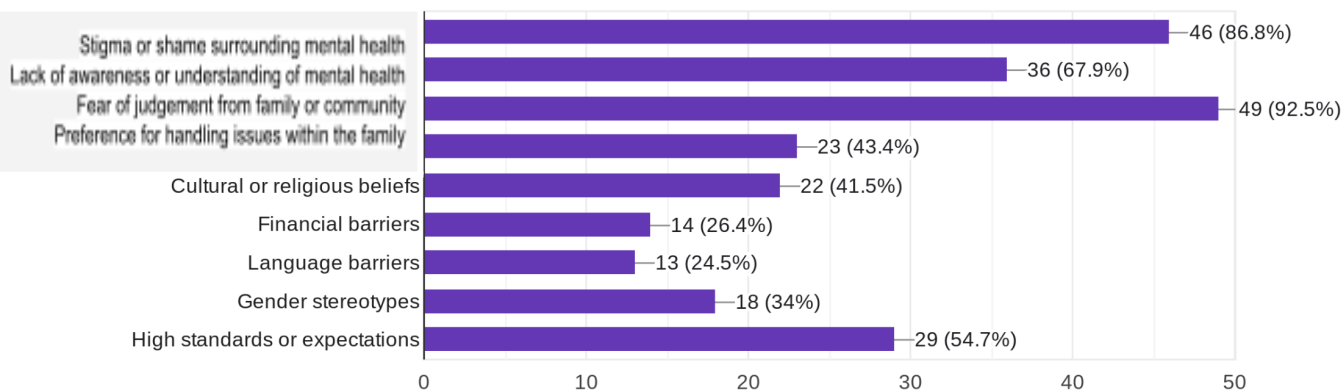


This graph explores how religion has personally influenced respondents' views on mental health, with the option to select multiple responses. The results reflect how in South Asian communities, religion can be a source of strength and a potential barrier to professional mental health care. A majority of respondents indicated positive associations with community and religion. 54.7% said that religion provides them with emotional support and coping strategies, while an even larger 62.3% said religion helped them feel a sense of community and belonging. These findings support the part of the hypothesis that emphasizes the positive impact of shared traditions and community support on emotional well-being. In many South Asian communities, religious spaces often serve as places for bonding and emotional resilience. However, the data also reveal some of the challenges that religion can pose to mental health. 17% of respondents said that religion has made or would make them hesitant to seek professional mental health care, and 18.9% stated that it contributed to stigma surrounding mental health. Additionally, 26.4% said that religion encouraged them to seek spiritual guidance rather than professional help. These responses show how certain religious or cultural beliefs may unintentionally add to the taboo around mental health treatment, which aligns with the hypothesis that cultural stigma and traditional norms can increase feelings of isolation and discourage help-seeking behaviors. Meanwhile, 17% of participants said that religion has not significantly influenced their views on mental health. This suggests a growing part of the community may be separating religious beliefs from their approach to mental health, potentially reflecting attitude shifts. Overall, while religion can sometimes contribute to silence or stigma around mental health, the data show that a clear majority of respondents identified religion as a source of emotional strength and community support. This suggests that, for many in the South Asian community, religion plays a more positive than negative role in shaping mental health attitudes.

Figure 4

What factors do you think might prevent people in South Asian communities from seeking mental health care?

53 responses



This figure shows the various factors that respondents believe prevent individuals in South Asian communities from seeking mental health care. Participants were able to select multiple answers, and the data showed a pattern of cultural and social barriers as the main issue. The most commonly selected factors, chosen by 92.5% (49 out of 53 respondents) was fear or judgement from family or community. This was followed closely by stigma or shame surrounding mental health, selected by 86.8%, and lack of awareness or understanding, chosen by 67.9%. These top three responses show the deep rooted cultural stigma and silence around mental health in many South Asian communities. These findings strongly support the hypothesis that traditions and taboos within the culture often discourage open conversations and create emotions that can negatively impact one's mental health, especially when people feel they cannot be vulnerable without fear of judgment. Other significant responses include high standards or expectations (54.7%) and a preference for handling issues within the family (43.4%). These also reinforce the idea that traditional values like maintaining family honor, self reliance, and upholding high standards may pressure people to avoid seeking help, even when struggling. This internalization of pressure contributes to the emotional weight that many in the community experience, as stated in the hypothesis. Additionally, 41.5% selected cultural or religious beliefs as a barrier, suggesting that they can contribute to the idea that mental illness is a personal failing. Gender stereotypes were checked by 34%, highlighting how expectations around masculinity and femininity may prevent people from acknowledging or addressing mental health concerns. Finally, while fewer respondents said financial barriers (26.4%) and language barriers (24.5%); these are still important issues that can further isolate individuals. Overall, the graph shows that while some barriers are logistical, the majority are cultural, social, and emotional. The data shows that stigma, fear, and deeply rooted expectations continue to discourage mental health care in South Asian communities, even when people may be suffering in silence.

Discussion/Conclusion

The goal of this research was to explore how South Asian culture affects mental health, both positively and negatively. Overall, the survey findings support this hypothesis. Figure 1 indicates

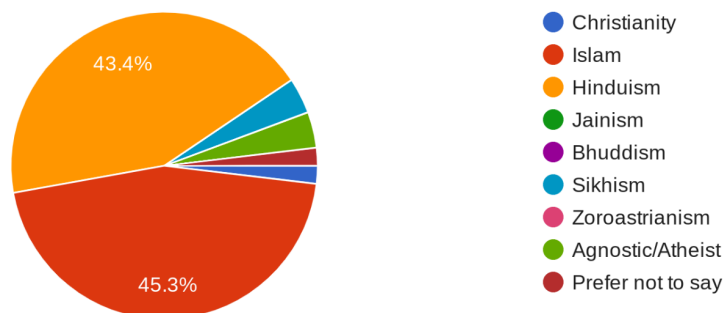
that while community and cultural values can provide a strong sense of support, particularly through academic expectations and family structure, there are mixed views on emotional support and openness around mental health. This is further highlighted in Figure 2, where responses show that while some progress is being made in reducing stigma, many still feel their communities are not fully accepting. Figure 3 shows that religion, a central part of South Asian culture, serves as both a source of emotional strength and a barrier to professional mental health care. Together, the three figures show the dual nature of culture and religion as both positive factors and potential barriers, emphasizing the need for more culturally sensitive mental health support and open communication within these communities. The findings support what other studies have shown like how strong community and traditions can improve mental health (Haider, 2024), but stigma (“South Asian Mental Health Stigma”, n.d.), gender roles (Action Against Hunger, 2023, para. 16), and religious views (Action Against Hunger, 2023, para. 16) can be barriers. One limitation of this study is that most of the surveys were shared at the mosque, so many of the respondents were Muslim (Appendix A) and most were from India (Appendix B). This means the findings may not fully represent people from other South Asian religions or geographical areas. Also, due to response bias, some people might have answered in ways they thought they were expecting rather than what they truly felt, which could have affected the accuracy. In the big picture, this research adds to the conversation by showing how culture can help or harm mental well being depending on how it is experienced. For future research, a larger and more diverse group of participants should be used. It would also be helpful to look deeper into how gender and age play different roles in shaping mental health views. If someone else were trying to continue this project, they should try to gather responses from people in a wider range of settings and not just one religious or cultural space. Overall, this study shows the need for more open conversations about mental health in South Asian communities and for more culturally sensitive ways to support people who are struggling.



Appendix A

What is your religion?

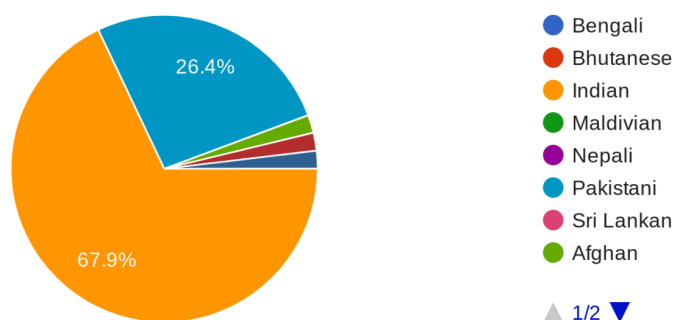
53 responses



Appendix B

Which of the following describes your cultural background?

53 responses



▲ 1/2 ▼



South Asian Culture and Support

B *I* U  

This form is for research purposes only. The results are completely anonymous and no personal information will be gathered. Thank you so much for your participation!

What is your age? *



- ☐ 13-19
- ☐ 20-30
- ☐ 31-40
- ☐ 41-55
- ☐ 55+

What is your gender? *



- ☐ Female
- ☐ Male
- ☐ Non- binary
- ☐ Prefer not to say
- ☐ Other...



Which of the following describes your cultural background? *



- ☐ Bengali
- ☐ Bhutanese
- ☐ Indian
- ☐ Maldivian
- ☐ Nepali
- ☐ Pakistani
- ☐ Sri Lankan
- ☐ Afghan
- ☐ 2 or more of the options above
- ☐ Other...



What is your religion? *

- ☐ Christianity
- ☐ Islam
- ☐ Hinduism
- ☐ Jainism
- ☐ Bhuddism
- ☐ Sikhism
- ☐ Zoroastrianism
- ☐ Agnostic/Atheist
- ☐ Prefer not to say
- ☐ Other...

What generation are you in relation to living in the United States? *

- ☐ I am a first-generation immigrant (born outside the U.S, moved here)
- ☐ One or more of my parents are immigrants, and I am a second- generation (born in the U.S)
- ☐ I am third or fourth generation (born in the U.S but older generations were born in or are still living in a for...
- ☐ Other...



Identify to what degree you agree with the following statements. *



	Strongly Disagr...	Disagree	Neutral	Agree	Strongly Agree
My culture offe...	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
My culture has ...	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I feel very comf...	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
My culture has ...	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I feel hesitant t...	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Community and Religion

The following questions include the word "stigma". Stigma for the purpose of this research is defined as negative attitudes toward mental illness.

How would you describe your community's attitudes towards mental health issues? *



- ☐ Open and supportive
- ☐ Somewhat accepting, but stigma still exists
- ☐ Neutral or varies depending on the person
- ☐ Stigmatized, but mental health is being more accepted
- ☐ Strongly stigmatized and rarely discussed
- ☐ Other...



How has religion personally influenced your views on mental health? Check all that apply. *



- ☐ It has provided me with emotional support and coping strategies.
- ☐ It has helped me feel a sense of community and belonging.
- ☐ It has made me or would make me hesitant to seek professional mental health care.
- ☐ It has contributed to the stigma around mental health.
- ☐ It has encouraged me to seek spiritual rather than professional help.
- ☐ It has not significantly influenced by views on mental health.



What factors do you think might prevent people in South Asian communities from seeking mental health care? *



- ☐ Stigma or shame surrounding mental health
- ☐ Lack of awareness or understanding of mental health
- ☐ Fear of judgement from family or community
- ☐ Preference for handling issues within the family
- ☐ Cultural or religious beliefs
- ☐ Financial barriers
- ☐ Language barriers
- ☐ Gender stereotypes
- ☐ High standards or expectations
- ☐ Other...

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