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## **False Binaries: Recentering South Asian Identity for Healing**

**Shruti Desai, MEd**  
*McKendree University*

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**False Binaries:  
Recentring South Asian Identity for Healing**

**Shruti Desai, MEd**  
*McKendree University*

Many thoughts emerge attempting to define South Asian, Asian, Desi, or Indian. One approach refers to a country, the other cultural norms, and yet another, a racial and ethnic category far too vast. For the sake of this article, South Asian and Desi refer to the composition of individuals with ancestry in Sri Lanka, Bangladesh, Pakistan, Bhutan, Maldives, Nepal, and India. Indian refers to individuals with ancestry solely in India. Asian is the larger United States racial construct for all individuals from the continent of Asia, more specifically South and East Asia such as Japanese, Thai, or Indian. South Asians have a broad definition in terms of racial and ethnic categorization and are one of the fastest-growing minorities in the U.S. (Census, 2012). South Asians, as a racial group, experience a great deal of complexity regarding racial and ethnic constructs in the U.S. These include processes of assimilation, meaning making within the Black and White racial binary, and confronting the stereotypical ‘model minority myth’ as unwavering truth. Because South Asians exist in a racial gray space, they are stereotyped in a contradictory manner as both “model minority” and “dangerous.” Wingfield (2016) describes model minority as “a group whose hard work, initiative, personal responsibility, and success offer proof that American meritocracy works as intended” (para. 1). These challenges positively and negatively affect their narrative.

South Asians have started to take political office, to change the societal climate, and to affect the future of the United States. This shift of South Asians being visible in the U.S. is dramatically different from the historic conflict of whether or not South Asians identified as Black or White in their first days of settlement in America. South Asians still face many challenges that immigrants face in the U.S., but these challenges are not necessarily uniquely associated to South Asian identity. The dynamic of living on the margins and responding to systemic oppression and racial categorization demands greater attention to understand South Asian identity as in-between.

**The “in-betweeners”: Duality of the Racial Binary**

The racism, xenophobia, and pressure to assimilate have inflicted trauma on South Asian people since they began to immigrate to the United States. At the turn of the 20th century, U.S. legal institutions struggled to categorize South Asian citizens and non-citizens alike. The U.S. Supreme Court released a string of conflicting rulings on whether South Asians, and specifically Indians, were to be ruled as “White” or “other” (Ali, 1925; Balsara, 1910; Dolla, 1910; Gokhale, 1928; Mozumdar, 1923; Samras, 1942; Singh, 1917; Singh, 1919; Thind, 1923; Wadia, 1939). The Supreme Court deemed Indians as “White” in 1910, 1913, 1919, and 1920, but declared them people of color or “nonwhite” in 1909 and 1917 (FitzGerald & Cook, 2004). The Supreme Court's pendulum of racial inclusion left South Asian identity in flux, creating anxiety for South Asians and confusion for White U.S. citizens, who were torn between exercising hostility and welcome.

Brown colored skin in America evokes Islamophobia. Additionally, mixed faiths of Hindu, Muslim, and Sikh create fear, and South Asians unwillingness to assimilate produces xenophobia. The 1960s witnessed dramatic increases in South Asian migration, and South Asians sought classification as non-White in order to fall under new civil rights legislative protections (Chakravorty, Kapur, & Singh, 2017). They understood that the label person of color or minority would open doors to contracts and education that would not be available if they maintained White categorization. This choice triggered a shift in how America viewed Indians and, in the future, the larger group of South Asians within its Black-White racial binary. Whereas in the decades' prior, South Asians vied for legal inclusion as White, their choices in the 1960s signaled a reversal that permanently marked them as other.

In Jeff Chang's book, *We Gon' Be Alright* (2016), Chang devotes an entire chapter to Asian Americans' status as "in-betweeners." In the U.S., South Asian Americans do not fit in two dominant camps of Black culture or White culture. Some South Asian Americans belong to the wealthy top 1%, while others live below the poverty line (Chakravorty, Kapur, & Singh, 2017). Some hold on to their culture, while others feel pressure to assimilate and live the "American Dream." As a group, South Asian Americans defy monolithic descriptions such as skin color, religion, country of origin, but without the ready-made categorization of Black or White, South Asian Americans have experienced a psychologically distressing cocktail of positive and negative stereotyping.

South Asians' experiences as "in-betweeners" in the U.S. might stem from the necessity of seeking opportunity in a country with deep racial and ethnic antagonism against non-White individuals. South Asians are attempting to create their own young narrative while trying to adjust to a longstanding binary of people of color and White. How do South Asians create their own meaning of an imposed racial category while attempting to hold on to their cultural values and be successful in America? How are South Asians both model minorities and a threat to American values?

According to a 2015 Department of Justice report, federal agencies have investigated over 800 reports of physical violence, threats, and vandalism against "individuals perceived to be of Middle Eastern origin," including South Asians (Mishra, 2017). Last year alone, South Asian Americans Leading Together (SAALT), a South Asian advocacy group, documented 207 incidents of hate violence against South Asians and Middle Eastern individuals. That is a 34% increase over the last three years (Mishra, 2017). The increase in hate not only reinforces the conflation of stereotypical South Asian skin color and terrorism but also evidences a continued pattern of mistreatment towards South Asians. These mixed messages—between high academic and economic achievement and hostility for their perceived beliefs—contribute to the daily trials of being Brown in America.

### **A Duel between Citizenship and Assimilation**

A recent Pew Research report (2013) utilizing data from the 2010 Census suggests that South Asians remain one of the fastest growing ethnic populations in the U.S. The appeal of migration for many South Asians comes from the availability of educational and employment opportunity in the U.S., as opposed to the cultural and societal values of the U.S. Again, this trend presents conflicting values. For example, Indian Americans, are the most highly educated ethnic group in the U.S., and in 2011 received the most H1-B Visas designed for foreign workers in designated for occupations underrepresented in the U.S. (Pew Research Center, 2013). The

largest groups of South Asians to immigrate to the U.S. in the last two decades are Bangladeshians, Pakistanians, and Sri Lankans (Pew Research Center, 2013). From 2000 to 2013, the South Asian population in the U.S. grew from 1,960,105 to 3,561,462 (Chakravorty, Kapur, & Singh, 2017). Of that population, around 40% became citizens. South Asians have one of the lowest rates of U.S. citizenship of all the Asian-American ethnicities (Desilver, 2014). After decades of migration to the United States, many South Asians straddle owning their cultural roots while managing the degree to which they choose to assimilate in American culture and society.

### **Symptoms of Living in a False Binary**

The paradox of living with conflicting values creates psychological distress presenting unique challenges for educators and administrators. A recent study of college students and identity salience demonstrates that Asians experience psychological distress when positive stereotypes compose their identity (Gupta, Szymanski, & Leong, 2011). Positive stereotypes often upheld the norms of model minority myth. These stereotypes include characterizations of Asians as hardworking, smart, easy to get along with, and other notions of Asians being a “good” race. Asians also experience psychological distress when they believe the model minority myth is not being met (Gupta, Szymanski, & Leong, 2011). Ostensibly, counseling or sustained therapy might alleviate those experiences. In a study regarding the use of collegiate counseling centers, Asian Americans show greater severity in the diagnosis of mental health ailments in their first appointment than their peers of all races, and upon further examination, South Asian students exhibited higher rates of suicide ideation than White students (Kim, Park, La, Chang, & Zane, 2016). However, at the time of termination of the counseling process, South Asian Americans showed less progress in addressing their primary symptoms that led them to seek counseling services than their counterparts (Kim et al., 2016). These comparatively high levels of psychological distress and suicidal ideation are alarming, especially in an increasingly hostile political climate.

The inefficacy of therapy reveals the complicated nature of psychological trauma and pain caused by Asian Americans’ unique socio-political positioning. Counseling might be ineffective in an Asian American student population in part because the premise of therapy does not fit the cultural norms and expectations of Asian American students. Kim, Park, La, Chang, and Zane (2016) gestured towards a mismatch between emphasis on “self-disclosure and discussion of distressing thoughts” and a cultural tendency to avoid negative thinking (p. 307). The incompatibility of individual values and therapeutic strategies might explain why South Asians attended fewer sessions than all other ethnicities. South Asians were statistically more likely to attend just one therapy session even though students typically needed fourteen sessions to achieve significant change (Kim et al., 2016). Therapeutic processes created based on White U.S. norms often do not have the capacity to adjust to a time-limited counseling approach for South Asian students.

Prabhughate (2010) suggests within the South Asian community that higher levels of social support decrease levels of anxiety and depression for individuals in the community. The psychological benefits of community underscore the need to look toward each other. If an individual can find healing through community, it elevates the necessity of professional help and diminishes feelings of shame, selling out, and embarrassment. In other words, turning to friends carries less stigma than seeking counseling does. As mentioned, stereotypes of mental health

counseling and the need for professional counseling are often negative. These stereotypes include assumptions around an individual's family, wellbeing, strength, and assimilation into U.S. cultural norms. Thus, fewer South Asians find opportunities for healing through professional therapeutic avenues. Although social support decreases anxiety and depression, it raises the question of whether or not it eliminates need for professional resources.

The need for social support in an immigrant community is great. Community creates opportunities for shared language, food, faith, and other cultural commodities. Yet, when this set of community values becomes the only measurement of right and wrong, turmoil and conflict can occur. For example, when members of South Asian community can support each other, the negative stigma around help-seeking behavior increases when peers find out an individual has mental health challenges (Loya, Reddy, & Hinshaw, 2010). This insular community thinking creates a barrier. Yet, Loya, Reddy, and Hinshaw (2010) found that personal stigma around counseling for South Asians was lower than their White counterparts. Community needs balanced with individual elasticity presents both a challenge for people with mental health needs and creates an opportunity for the South Asian community to heal within their space and identity values.

As a partial ramification of the model minority myth and cultural values, South Asian students experience constant pressure to achieve in academics, like math and science, and imagine pursuing high paying careers, like becoming a doctor or lawyer. While these are ambitious goals, they also work to perpetuate the myth of American meritocracy and the complicated intersection of the model-minority myth and reality. When some South Asian students enroll in college and begin to understand that medicine, for example, might not be their passion, conflicts between internal and external pressures coalesce where students often feel they ought to pursue particular fields of study. Because this desire to become a doctor is itself a reflection South Asian collectivist and hierarchical norms (Rahman & Witenstein, 2014), the student might try to forge ahead with a major leading to medicine against their better judgment.

Lucrative careers are valued in South Asian cultures because children assume the role of caretaker for their parents in the same manner parents took care of their children. This collectivist mentality creates another false binary of individual care versus family care. Rather than alleviating the internal tension, Gupta et al.'s (2011) study on messaging regarding South Asian identity and psychological distress found that the affirmation of positive stereotypes increased the amount of psychological distress experienced. For example, a South Asian student who does not enjoy or excel in the sciences upholds the model minority myth of meritocracy and hard work by continuing to pursue the sciences. This student ends up with average grades and unable to get into medical school. There is now dissonance in the model minority myth and their current life situation. The psychological pain and trauma faced by South Asians cannot heal by assimilating to this dualistic conflict of model minority or not or by White American therapeutic and cultural norms.

### **Dismantling the False Binary**

Given the psychological distress associated with the model minority myth, the familial tensions within South Asian culture, as well as the cultural perceptions of counseling, dismantling false binaries for South Asians is necessary. Several studies indicate that community support helps to build a defense against anxiety and depression (Loya, Reddy, & Hinshaw, 2010; Prabhugate, 2010; Tummala-Nara, Alegria, & Chen, 2012). The idea of going

back to South Asian cultural norms to find relief is important. Further, the pressure of living up to the model minority myth created in the 1960s by White America disassembles a rich and complicated culture to meritocracy (Wingfield, 2016), which has more to do with race and Whiteness in American society than South Asian culture.

When South Asians re-center their values, narratives, traditions, community, and support and examine their personal experiences that contradict the stereotypes of the model minority myth and Islamophobia they achieve two things: first, they decenter Whiteness as the metric of success and acceptance in the United States. Second, they recognize their capacity for healing by returning to their center focused on tradition, history, faith, community, and celebration. The idea of centering margins assumes that the marginalized identity groups have no center. Most marginalized identity groups (in this case, South Asians) have a center focused on tradition, history, faith, community, stories, and celebrations, such as humility, Diwali, Ramadan, or Bhaghat SinghThind. The idea that South Asians can learn from one another by centering their stories supports the notion of decentering Whiteness. As Hitchcock & Flint (2015) state:

Rather than anonymity, highlight stories of the heart of culture. Rather than socially insignificant, culture should claim the significance of being central. It should not be content to be a placid side tributary; it should claim the mainstream, the styles, the trends, the attention of the country. Not odd, but normal. (p. 9)

Perhaps then, the stories of past challenges and struggles of today will begin to allow people to heal and become one. As a result, mental health concerns of South Asian students could be more appropriately addressed. Perhaps then, the model minority myth will be less relevant to South Asian identity and South Asians can better identify and assert their own identity in U.S. society. Centering South Asian identity without centering Whiteness is an incredible challenge but offers the possibility of racial, identity, and psychological healing.

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**Shruti Desai** serves as Assistant Vice President at McKendree University in Lebanon, IL and is a current doctoral student at Maryville University. Shruti's research examines resilience in women of color serving in Senior Student Affairs positions at four-year predominantly White institutions. Shruti presents regionally and nationally on supervision, creating supportive cultures for marginalized identities, and assessment. Her passion lies around getting beyond the false binary of race in America, examining identity as intersections of power and privilege, and data as storytelling.

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