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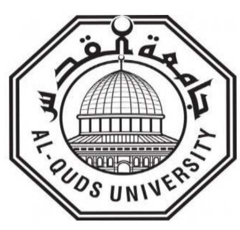

The Impact of Anti-Arab Racism in Social Media on the Mental Health and Daily Lives of Arab Americans (2016-2025)

Hanin Elias Yousef Salsa

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A thesis submitted in partial fulfillment of the requirements for the degree of Master of Arts at Al Quds University

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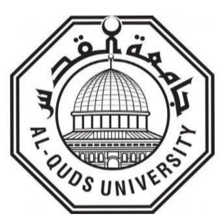

Thesis Approval

The Impact of Anti-Arab Racism in Social Media on the Mental Health and Daily Lives of Arab Americans (2016-2025)

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Jerusalem – Palestine

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DEDICATION

I dedicate this thesis with deep reverence to every courageous woman who journeys through life unaided, embodying resilience and grace in solitude. To my beloved family - my dear mother, whose unwavering love is a beacon of light; my angel sister, whose spirit brings comfort and joy; and to the enduring presence of my father, whose memory continues to inspire and guide me beyond the bounds of time.

الإهداء

إلى كلّ النساء،

وإلى كلّ امرأة تسير بخطى ثابتة في درب الحياة، تواجه تحدّياتها، وتحمل في قلبها أملاً لا يخبو، وعزيمة لا تنكسر

إلى أمي العزيزة، النبع الذي لا ينضب، ومصدر الدعم والسند في كل مراحل حياتي
إلى أختي الغالية، التي تملأ أيامي نوراً ودفئاً بحضورها
وإلى روح والدي الغالية، التي ما زالت تسكن قلبي، وتُرشدني بنورها في كل زمان ومكان

بكم، ولكم، أُهدي هذه الأطروحة

Declaration:

I clarify that this thesis submitted for the degree of Master, is the result of my own research, except where otherwise acknowledged, and that this study (or any part of the same) has not been submitted for a higher degree to any other university or institution.

Signed:
Hanin Elias Yousef Salsa
Date: 27/08/2025

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Abstract

This study investigates the psychological effects of anti-Arab racism on Arab Americans, with a focus on Palestinian communities after the 7th of October war, and the role of social media in amplifying discrimination. Using an intersectional approach, it examines how ethnicity, religion, and gender intersect with systemic biases to intensify stress, anxiety, and social withdrawal, particularly during politically sensitive events. Data from surveys and in-depth interviews reveal limited engagement with formal mental health services, largely due to cultural mistrust, language barriers, and a shortage of culturally competent care. Participants frequently relied on active coping strategies—such as physical exercise, and other coping strategies such as community involvement, activism, volunteering, and meaningful work—as substitutes for therapy, consistent with Abou-Ziab (2016). Findings highlight the need for culturally responsive, patient-centered mental health services that address language, religious values, family dynamics, and intergenerational trauma. The study also emphasizes the importance of community-based interventions, increased visibility of Arab American therapists, and anti-racism training for mental health professionals. Despite a small sample size, the research provides valuable insights into the mental health challenges, coping strategies, and structural barriers experienced by Arab Americans, offering a foundation for future research and culturally informed interventions.

Keywords: anti-Arab racism, anti-Palestinian racism, Arab Americans, social media discrimination, intersectionality, mental health disparities, coping strategies.

Chapter One

Introduction

Growing up as a millennial in the digital age, I was frequently exposed to online content that perpetuated stereotypes and racist portrayals of Arabs. Witnessing these portrayals sparked my interest in understanding how such messages affect individuals, particularly as not all assumptions or opinions online are accurate or fair. The recent war in Gaza intensified this concern, as I observed a surge of anti-Arab and anti-Palestinian content on social media. For me, encountering such racism has the potential to trigger anxiety and depression, prompting me to question how Arab Americans navigate these experiences, how profoundly they are affected, and whether they seek mental health services as a result. This personal concern became the driving force behind this research.

The goal of this study was to explore the lived experiences of Arab Americans with racism, particularly on social media, and to understand the psychological and social impacts on their daily lives. Through surveys and in-depth interviews, I aimed to highlight personal narratives, capture participants' perspectives, and identify ways that society and institutions could better support Arab Americans in feeling safe, valued, and understood.

In the United States, Arab Americans have endured persistent discrimination, which has escalated in the wake of major political and social events such as the September 11 attacks, the implementation of the "Muslim Ban," and more recently, the October 7th war. These events have not only magnified societal biases but have also found amplification through social media platforms, which often serve as echo chambers for prejudice and misinformation.

The impact of this discrimination is reflected in the personal stories and testimonies of individuals who have endured its effects firsthand. These accounts reveal the emotional and psychological toll of systemic racism, highlighting the challenges of navigating a society where such biases contribute to fear and alienation. This study will delve into specific testimonies, illustrating how Arab Americans have confronted discrimination in

both personal and professional contexts, while also shedding light on the broader implications for their mental health and sense of belonging.

There is ample public evidence of anti-Arab racism in American life, reflected in the experiences of well-known figures as well as everyday individuals. Ahmed Ahmed, an Egyptian American comedian, spoke about being typecast as a terrorist in Hollywood and subjected to profiling by law enforcement. In one instance, Ahmed was interrogated at an airport for hours simply because his name matched a common Arabic name flagged on security lists. Reflecting on his experiences, he stated, “I’ve had people call 911 on me over a joke, hecklers, racists and even industry professionals, i.e. agents, managers, casting people and producers did not want to work with me or hire me because of my color.” Ahmed also shared, “I have been detained, arrested and highly profiled because of my name after September 11. Being Muslim in America ain’t no joke!” (Hanania, 2023) These incidents left him feeling dehumanized and contributed to feelings of alienation and anxiety. Ahmed noted that such experiences were not only personal but also reflective of systemic biases that Arab Americans face daily. (Hanania, 2023)

Congresswoman Rashida Tlaib has also spoken out about the broader implications of online discrimination targeting Arab and Muslim communities. Reflecting on the real-world consequences of racism normalized through social media, Tlaib emphasized, “This racism will incite more hate and violence against Arab and Muslim communities and it makes everyone less safe.” She has also shared her personal experiences of being attacked online, highlighting the disproportionate vulnerability faced by minorities in the United States. As an Arab American and Muslim woman in a prominent political role, Tlaib is particularly prone to such discriminatory attacks, which underscore the emotional and societal toll of pervasive biases and contribute to a climate of fear and alienation. Following the October 7th war, Tlaib condemned a racist cartoon depicting her with a detonating pager, released just days after thousands of communication devices exploded across Lebanon in attacks attributed to Israel. She described the cartoon as “disgraceful” and criticized the media for continuing to normalize such racism, further illustrating the harmful impact of these biases. (Arab American News, 2022; Al Jazeera, 2021).

Dr. James Zogby, founder and president of the Arab American Institute, shared his experience of the immediate aftermath of the September 11, 2001 attacks. He recalled how, within hours of the tragedy, the Arab American Institute began receiving calls from members of the Arab-American community who were facing threats. Despite the evacuation orders for the office due to its proximity to the White House, Dr. Zogby and his staff stayed behind to handle the crisis. By the following day, Dr. Zogby himself received a death threat, which he describes as a personal attack, but also as a symbolic exclusion from the collective mourning felt by the nation.

> “[T]he second day, I got the first death threat. It was, ‘Zogby you Arab dog. You'll die. I'll murder you and slit the throats of your children.’ It stung. It stung

> both because of the personal threat of what it represented, but also as I described it, we were in mourning collectively as a country and then someone decided to say to me, 'you can't be part of this,' and pulled me away."

He remembers how this incident forced him to look over his shoulder, as he was made to feel that he couldn't share in the grief the rest of the country was experiencing due to his identity as an Arab. (U.S. Department of Justice, Civil Rights Division, 2012, P.1)

In addition to the broader discrimination faced by minorities in American society, Arab Americans often find themselves navigating the unique challenges of intersecting cultural expectations and external biases. Research indicates that such experiences of prejudice and cultural pressures can lead to significant psychological effects, including heightened levels of anxiety, depression, and feelings of alienation. Arab Americans also experience increased stress from the constant need to manage stereotypes and biases in social and professional contexts (Abu-Ras & Suarez, 2009, p. 48; Padela & Heisler, 2010, p. 284).

For many Arab Americans, the stress of encountering racism online and offline is compounded by deeply ingrained stigmas about seeking mental health services. These stigmas often stem from cultural norms and expectations prevalent in Arab communities, both in the U.S. and in countries of origin. Mental health challenges are frequently viewed as private matters, and seeking professional help can be perceived as a sign of weakness or a failure to adhere to cultural values of resilience and self-reliance. According to Al-Krenawi and Graham (2000), Arab culture emphasizes familial and communal support systems, which often act as the primary source of emotional and psychological aid. As a result, mental health services are underutilized, and individuals may feel shame or fear judgment if they pursue such services. Abu-Ras and Suarez (2009) highlight that this cultural stigma is reinforced by a paucity of culturally competent mental health professionals and the fear of breaching confidentiality within tightly knit Arab American communities.

In one of the few studies that examines mental health services for Arab Americans, Nassar-McMillan and Hakim-Larson (2003) shed light on the distinct mental health challenges faced by this community. Their work emphasizes the importance of culturally sensitive counseling that acknowledges and respects the unique identity of Arab Americans, which is deeply rooted in collective traditions and family-centered values, and often in strong religious beliefs. The study of Nassar-McMillan and Hakim-Larson (2003) highlights the need to address acculturation stress, discrimination, and conflicting cultural expectations, all of which significantly affect the mental well-being of Arab Americans. These challenges are further compounded by the stigma surrounding mental health issues in Arab societies, which often discourages individuals from seeking professional help. The authors advocate for culturally competent counseling strategies designed to meet the diverse experiences of Arab Americans, with a focus on tackling racism, intergenerational tensions, and the psychological impacts of politically charged events.

This study explores the effects of politically induced discrimination against Arab Americans on social media between 2016 and 2025 and raises critical questions about the impact of anti-Arab racism on immigrants and first generation Americans . So, what social media messages about Arab Americans are being purveyed, and how do these reflect broader societal biases? And, what are the specific effects of these messages—whether psychological, social, or physical—on the mental health and overall well-being of Arab American immigrants? How do Arab Americans address and cope with the stress caused by these experiences, particularly in the context of both online and offline discrimination? How does the stigma against mental health services in Arab societies influence their willingness to utilize such services in the United States, even when these services are more accessible? Lastly, to what extent are Arab Americans aware of, or have they accessed, mental health services that acknowledge and address their cultural complexities, particularly in states with significant Arab communities? Through this inquiry, I aim to uncover how the intersection of social media, racism, and cultural identity shapes the mental health experiences of Arab Americans, offering a window into the broader struggles of navigating identity in a polarized world.

This study hypothesizes that anti-Arab racism on social media significantly contributes to increased stress, anxiety, and depression among Arab Americans. My evidence suggests that political events between 2016 and 2025 have intensified anti-Arab sentiment on social media platforms, amplifying its harmful effects. Furthermore, cultural stigma, societal pressures, and identity-related challenges are expected to make Arab Americans less likely to seek mental health services.

This research applies an intersectional approach as a conceptual framework to examine how Arab Americans experience discrimination in both online and offline contexts. Intersectionality emphasizes how overlapping systems of oppression—such as racism, religious discrimination, and cultural stereotyping—interact to create compounded barriers for marginalized groups. This perspective highlights how multiple layers of identity, including ethnicity, religion, and immigrant status, shape experiences of exclusion, hostility, and unequal treatment. By applying this framework, the study illuminates how negative portrayals in social media and public discourse contribute to Arab Americans' psychological distress, reinforce social exclusion, and intensify experiences of marginalization, especially during periods of heightened political tension.

Chapter Two

Literature Review

2.1 Introduction

Arab Americans make up an estimated 3.7 million people in the United States, according to the Arab American Institute. This group includes individuals from countries in the Middle East and North Africa, most prominently Lebanon, Egypt, Syria, Iraq, Morocco, Jordan, and Palestine. Arab Americans are most heavily concentrated in 10 states: California, Florida, Illinois, Michigan, New Jersey, New York, Ohio, Pennsylvania, Texas, and Virginia. The largest communities are found in Michigan—specifically Dearborn, which has the highest percentage of Arab Americans in the U.S.—and in major metropolitan areas like Los Angeles and New York City. Lebanese Americans are the largest subgroup, comprising nearly one-third of the Arab American population (Arab American Institute, 2024).

For decades, racism against Arabs has shaped Western mindsets by promoting agendas that stereotype Arabs as backward and violent. There has been extensive research on how Arabs and Muslims are portrayed in Western, and particularly US media, from Said's (1978) work on Orientalism to Shaheen's (1984, 1994, 2001) important studies on the depiction of Arab and Muslims in Hollywood films and comic books. These studies, both descriptive and critical, consistently find that Arabs and Muslims are represented in a negative and unchanging way and limited to a few stereotypes. These stereotypes often focus on themes like silence and oppression, sexualization against women and links to violence and terrorism. (Muhtaseb, 2020, p. 8)

Given that my research examines anti-Arab racism on social media, it is essential to address the broader context of anti-Arab depictions in media, including Hollywood and comic books. Dr. Jack Shaheen, a pioneering author and media critic, is widely recognized for his expansive research, books, lectures, and documentaries that expose

and challenge harmful stereotypes of Arabs and Muslims in American media and popular culture. These portrayals often reduced Arabs and Muslims to exaggerated caricatures—depicting them as dagger-wielding, villainous, absurd, hypersexualized, inhumane, and incompetent "others" (Tchen, 2018, p. 12). In his book A is for Arab: Archiving Stereotypes in US Popular Culture, published in 2012, which he described as a culmination of “four decades of work,” Shaheen collected depictions of Arabs in American popular culture, including over 2,000 films and television shows, as well as hundreds of comic books, toys, games, and cartoons, all of which vilify Arabs (Museum of Chinese in America, 2014). Shaheen emphasized that these portrayals dehumanize Arabs by stripping away their humanity and focusing solely on negative attributes. He noted that these stereotypes often depict Arab men as terrorists and Arab women as submissive.

Rachid (2015) highlighted how Daniel Pipes, the president of the Middle East Forum and a historian, has written critically about Arabs and Muslims, especially in light of events like the 9/11 attacks, which were carried out by individuals identified as Muslims. Daniel pipes is known for his negative views on Islam and its role in public life. In an interview, he distinguished between Islam as a religion followed by over a billion people for over 1,400 years, and Islamism, which he defines as a modern transformation of Islam into a political ideology that emerged in the 1920s. He compares Islamism to totalitarian ideologies like fascism and communism, emphasizing its aim to control every aspect of a Muslim’s life. According to Pipes, the 9/11 attacks were an Islamist action, carried out by groups like al-Qaeda that seek to implement Islamic law. He argues that the ultimate goal of the 9/11 attacks was to promote the enforcement of Islamic law (Rachid, 2015).

Even criticism that claims to distinguish between Islam as a religion and Islamism as a political ideology can still perpetuate harmful stereotypes by reinforcing the perceived link between Islam and terrorism. Daniel Pipes’ critique is one such example—although it may appear logical, it continues to associate Islam with extremism, thereby reinforcing negative images of Arabs and Muslims. As a result of these pervasive stereotypes, Arab Americans in the United States face various forms of discrimination, including racial and ethnic bias, Islamophobia, workplace discrimination, social exclusion, and negative media representation. This was particularly evident in the post–September 12 era, when policies such as the Patriot Act and the National Security Entry-Exit Registration System (NSEERS) compounded these challenges. The Patriot Act of 2005, enacted after 9/11, expanded government surveillance powers, disproportionately targeting Arab and Muslim Americans under the pretext of national security. Similarly, NSEERS required individuals from predominantly Arab and Muslim-majority countries to register with the government, subjecting them to invasive questioning, fingerprinting, and heightened scrutiny, often without any evidence of wrongdoing. According to Stoller, Townsend, Hussain, and Yablon (2004), these measures fueled racial profiling, deepened mistrust toward law enforcement, and intensified the marginalization of Arab American communities.

2.2 The Role of Social Media in Amplifying Racism and Shaping Public Perception

Social media have become a central part of daily life for billions of people worldwide, playing a significant role in shaping public opinion and amplifying biases. As of October 2024, 5.52 billion people - 67.5% of the global population - were active internet users, and 5.22 billion, or 63.8%, were active social media users (Petrosyan, 2024). With its widespread accessibility and influence, social media has evolved into a powerful tool for spreading ideas and influencing perceptions. For instance, it was strategically utilized during Barack Obama's 2008 presidential campaign to connect with supporters, engage voters, and establish his brand, highlighting its potential to shape public discourse (Russmann, 2022; Bimber, 2014). However, while social media's ability to influence opinions has proven useful in positive contexts, it has also exacerbated biases and amplified harmful stereotypes.

Social media algorithms personalize content based on user preferences, creating "information bubbles" that expose users primarily to viewpoints that align with their existing beliefs. This process, as noted by Alsaad, Taamneh, and Al-Jedaiah (2018), strengthens biases and can lead to more extreme ideologies, reinforcing racial prejudices and fostering narrow, polarized perspectives (Dwivedi et al., 2021, p.26). These "echo chambers" not only isolate users from alternative viewpoints but also intensify negative biases, including those related to race and ethnicity. Matamoros-Fernández and Farkas (2021) further explain that algorithms designed to prioritize emotionally engaging content often promote divisive material, including hate speech and misinformation. User behavior—liking, sharing, and commenting—amplifies this harmful content, enabling toxic ideologies such as racism to thrive. The anonymity of social media platforms and ineffective moderation policies exacerbate these issues, making it easier for harmful behaviors to persist (Daniels, 2013).

This phenomenon is evident in the amplification of anti-Arab racism on social media, where sensational content targeting marginalized groups is prioritized to provoke emotional reactions. Polarized news content often employs inflammatory language, exaggerated headlines, and divisive narratives to capture user attention, driving engagement while reinforcing biases (Mall et al., 2024, p.2). For example, polarization has been widely linked to online news content ,particularly in the context of major events such as COVID-19. News coverage often provokes strong emotional responses, which may manifest as aggressive reactions directed toward the news outlet, fellow readers or viewers, or the subjects of reporting, including refugees, political leaders, nations, and marginalized groups . At the same time, news stories can also generate constructive responses, such as expressions of empathy, solidarity, and hope during crises. These opposing reactions—abusive and supportive—may coexist, resulting in a polarized audience split between hostile engagement and positive interaction (Qureshi et al., 2020; Wakefield & Wakefield, 2023). Such content contributes to societal divisions

and real-world consequences, including increased anxiety and alienation among marginalized communities (Daniels, 2013, p.695–719; Bestvater et al., 2023).

The documentary The Social Dilemma (2020), features interviews with executives and programmers who departed from social media platforms like Pinterest, Facebook, Instagram, and Twitter over ethical concerns. The documentary illustrates how artificial intelligence on platforms like YouTube and Facebook influences user behavior by recommending content based on prior interactions. According to their testimonies, this algorithmic design reinforces existing viewpoints, narrows perspectives, and fosters polarization by excluding alternative opinions. For example, Facebook played a significant role in inciting violence and spreading hate speech in Myanmar, particularly between 2016 and 2018, targeting the Rohingya Muslim minority. During this period, the platform was widely used to disseminate false information, dehumanizing narratives, and inflammatory rhetoric against the Rohingya, often portraying them as terrorists or a threat to national security. These posts, many linked to military and nationalist actors, helped fuel mass violence, displacement, and atrocities that the United Nations later described as having “genocidal intent.” By continually presenting similar content, these algorithms radicalize individuals, normalize divisive ideologies, and perpetuate harmful cycles of bias (Bonnefon, Shariff, & Rahwan, 2016, p.2).

2.3 Political Events and the Surge of Anti-Arab Sentiment on Social Media

For his documentary Reel Bad Arabs: How Hollywood Vilifies a People (2001), which was originally published as a book, Dr. Jack Shaheen conducted an in-depth analysis of over 1,000 films to uncover the persistent stereotypes of Arabs in Hollywood. Shaheen explained, “Politics and Hollywood images are linked; they reinforce one another. Policy enforces mythical images, and mythical images help enforce policy.” Jack Valenti, the former president of the Motion Picture Association of America, echoed this sentiment, stating, “Washington and Hollywood spring from the same DNA.” (Shaheen & Media Education Foundation, 2001, 14:17) Shaheen aimed to demonstrate the strong relationship between Hollywood's portrayal of Arabs and political agendas, highlighting how these depictions shape negative stereotypes of Arabs as terrorists. He argued that such portrayals not only create a damaging public image but also serve to legitimize harsh policies against Arab communities.

This intersection of media and politics is further reflected in how political events have played a significant role in shaping the rise of anti-Arab racism on social media between 2016 and 2025. During this period, a series of critical developments, both within the United States and globally, fueled discriminatory narratives and hate speech targeting Arabs. My research will delve into these dynamics, exploring how political events and their portrayal in media have contributed to the spread of anti-Arab racism online, reinforcing harmful stereotypes and enabling broader societal discrimination.

In particular, the election of Donald Trump in 2016 marked a period where anti-Muslim and anti-Arab sentiments were amplified. Executive Order 13769 (2017), titled “Protecting the Nation from Foreign Terrorist Entry into the United States” and commonly known as the “Muslim travel ban,” was an executive order issued by President Donald Trump; except for the extent to which it was blocked by various courts, it was in effect from January 27, 2017, until March 16, 2017 (Bryan, 2018, p. 121) and directly targeted predominantly Muslim countries including many Arab nations. This policy spurred online hate speech and discriminatory narratives against Arabs and Muslims, fueled by political rhetoric and misinformation spread on platforms like Facebook and Twitter. The idea of banning Muslims from entering the United States was a central theme of Donald Trump's campaign and was promoted online starting December 7, 2015. He called for a "total and complete shutdown of Muslims entering the United States" and repeatedly emphasized this goal in public statements. According to Panduranga, Patel, & Price (2017) this campaign pledge remained online until May 2017, even as legal challenges accused Trump of targeting a specific religion. The "Muslim ban" eventually evolved into policies like "extreme vetting," which Trump described as a way to fulfill his original promise. He defended the measures publicly, including during the second presidential debate and in tweets criticizing court decisions that temporarily blocked the travel ban. For example, Trump tweeted that "EXTREME VETTING" was necessary to protect the country, highlighting his commitment to these policies despite judicial pushback. (Panduranga, Patel, & Price, 2017)

Digital Islamophobia puts Muslims in a vulnerable and exposed position, and certain theoretical ideas help explain how online abuse works. In her article “Cyber Islamophobia in the Wake of the Muslim Ban, 2021” Zeinab Farokhi uses Giorgio Agamben’s concept of bare life (1998) to examine the spread of anti-Muslim content on social media. She introduces the idea of the "Muslim cyber homo sacer" to show how Muslims are specifically targeted online, focusing on hashtags like #MuslimBan and #BanMuslim on Twitter. Farokhi explains that Agamben’s ideas of homo sacer—people excluded from society and left unprotected—state of exception—situations where normal protections are suspended—and the camp—places where such exceptions become permanent—help us understand modern online Islamophobia. In this view, Muslims are visible enough to be attacked but not fully recognized or protected, making them more vulnerable to verbal, emotional, psychological, and even physical harm, despite the existence of laws meant to protect them.

Moreover, the enduring legacy of the 9/11 attacks has continued to shape public perceptions of Arabs and Muslims. During major political events in the U.S. or in the Middle East, even after two decades of the attack, social media sees a surge in Islamophobic and anti-Arab content (Khamis, 2021), perpetuating stereotypes that associate Arabs with terrorism. This narrative has been repeatedly leveraged in political rhetoric, reigniting discriminatory sentiments. For instance, when Donald Trump, on his preferred social media platform, Twitter, falsely alleged that Muslim Americans in New Jersey celebrated the 9/11 attacks. In November 2015, he tweeted, "Credible Source on

9-11 Muslim Celebrations: FBI," accompanied by a link to a fabricated news article. In the weeks that followed, he continued to retweet posts from users claiming to have witnessed these non-existent celebrations. (Harb, 2021)

It is important to note, however, that many scholars in fields impacted by the events of September 11, 2001, challenge the idea that 9/11 was a purely transformative event. Their concern isn't that 9/11 didn't change society, but rather that focusing solely on 9/11 limits the understanding of historical change. Scholars like Edward Said and Jack Shaheen and Melani McAlister who studied race and representation of Arabs and Muslims in American media have demonstrated that the negative portrayals of these groups have deep historical roots, dating back well before 9/11. By treating 9/11 as the defining moment, we risk ignoring a century of American involvement in the Middle East and the long history of negative stereotypes in media, literature, and art. (Elseewi, 2015, P. 165-166).

In short, Anti-Arab sentiments in the United States are not new; these attitudes have existed for a long time. However, they became more visible and stronger after the 9/11 attacks. The memory of that event, along with its political and cultural impacts, has often been used to reinforce negative stereotypes about Arabs. While prejudice against Arabs has been part of American society for years, the period after 9/11 made these views more prominent, particularly in media representations and political discourse.

Political events in the Middle East also exemplified the rise of online anti-Arab racism, particularly during the Syrian refugee crisis. As Arab refugees sought asylum in Western countries, especially at the peak of the Syrian Civil War, the crisis contributed to escalating negative stereotypes and discriminatory attitudes towards Arabs on social media. According to USA for UNHCR (The UN Refugee Agency), the Syrian refugee crisis began in March 2011 when the government’s violent response to protests supporting arrested teenagers in Daraa, a town in the south, spiraled into a civil war. This conflict forced millions of Syrian families to flee their homes, and the resulting influx of refugees intensified the already growing prejudices against Arabs in many Western nations.” (USA for UNHCR, 2024) That is because during this time, at the height of the Syrian Civil War, misinformation and fear-mongering about Arabs on social media escalated. Claims falsely linking refugees to terrorism or cultural incompatibility fueled xenophobia. According to Yigit and Tatch (2017), perceptions and attitudes toward Syrian refugees in the United States have been shaped by such misinformation, which has often led to heightened social tensions and discriminatory practices. (Yigit & Tatch, 2017, p.13)

More recent, the May 2021 Gaza conflict and the October 2023 Gaza war have led to even more polarized social media activity. While some platforms became venues for activism, they also saw surges in hate speech and anti-Arab and anti-Muslim narratives according to Oboler et al. (2024), especially from groups defending Israeli actions.

An analysis by The Intercept attributed one reason for the further exacerbation of biases online to the lack of balanced coverage by American mainstream media outlets. The study found that major U.S. newspapers such as The New York Times, The Washington Post, and The Los Angeles Times consistently displayed bias against Palestinians in their reporting on Israel's war on Gaza. These influential publications, which play a significant role in shaping U.S. perceptions of the Israeli–Palestinian conflict, devoted limited attention to the devastating effects of Israel's siege and bombings on civilians in Gaza. The analysis revealed a disproportionate focus on Israeli casualties, often employing emotional language to describe Israeli deaths while minimizing Palestinian losses. Furthermore, while extensively covering antisemitic incidents in the U.S., these outlets largely overlooked the surge in anti-Muslim racism following the events of October 7 (Johnson & Ali, 2024).

The surge in hate crimes was reflected in real-life incidents following the October 7, 2023, Hamas attack on Israel. The Council on American-Islamic Relations (CAIR) reported a sharp rise in anti-Muslim and anti-Palestinian hate incidents in the U.S. CAIR received 3,578 complaints in the last three months of the year 2023, marking a 178% increase compared to the same period in 2022. These complaints included 662 cases of workplace discrimination, 472 reports of hate crimes, and 448 instances of discrimination in education. (Agencies & ToI Staff, 2024)

Notable incidents included the October 2023 murder of 6-year-old Wadea Al-Fayoume in Illinois. Authorities believe this attack was motivated by anti-Muslim sentiment fueled by the ongoing conflict. Another significant case was the November 2023 shooting and attempted murder of three Palestinian American students in Vermont, where one victim, Hisham Awartani, was paralyzed. Notably, one of the interviewees shared that she was a best friend of Hisham and mentioned him during the interview. CAIR described this rise as part of a broader wave of Islamophobia and anti-Palestinian bias linked to the Israel-Hamas war and the resulting regional tensions (Agencies & ToI Staff, 2024).

Other sources have documented the rise of online hate as well. The Moment Project, a joint initiative by the Online Hate Prevention Institute in Australia, collected data on anti-Muslim hate, anti-Palestinian racism, anti-Arab racism, or a combination of these types of hate as manifested between October 27, 2023, and February 8, 2024. The data was sourced from platforms such as Facebook, Instagram, TikTok, X (Twitter), YouTube, Telegram, LinkedIn, Gab, Reddit, and BitChute (Oboler et al., 2024, p. 1). A specific location could be identified for only 44% of the data. Among those identified, 41% originated from Europe or the UK, 34% from North America, 10% from the Middle East, 6% from Asia, 6% from Australia, and 3% from other regions (Oboler et al., 2024, p. 1). These findings highlight the systemic biases and pervasive discrimination faced by Palestinians and Muslims in online spaces, particularly in the aftermath of the October 7 war.

Arab American politicians also face significant challenges, both online and offline, as they navigate widespread anti-Arab sentiments. Rashida Tlaib, the first Palestinian American woman elected to the U.S. Congress, has often been a target of online criticism and attacks, many of which reflect anti-Arab and anti-Muslim biases.(Atkinson, 2023) On the other hand, according to Shahin (2021), a Facebook ad campaign in August 2021 criticizing Ilhan Omar and Rashida Tlaib, the first Muslim congresswomen in the United States, faced intense criticism. The ads were accused of associating the congresswomen with terrorism, and some religious leaders condemned the campaign as "Islamophobic" for spreading fear and hatred toward Muslims. Tlaib has also faced criticism for proudly showcasing her Palestinian heritage by wearing traditional clothing during her swearing-in ceremony. While many celebrated this act as a sign of representation, others used it as a pretext for further attacks. These reactions highlight the prejudice and stereotypes often faced by Arab American leaders. (Harb, 2019)

2.4 Anti-Arab Racism as a Stressor and Its Impact on Arab American Mental Health

The significant challenges that Arab Americans face due to stereotypes, discrimination, and hate-driven rhetoric can have a lasting impact on their psychological well-being. This is especially relevant in the context of political events such as the aftermath of 9/11 and the rise of anti-Arab sentiments, which have intensified the negative perception of Arabs in American society. These experiences of racism contribute to mental health issues such as anxiety, depression, stress, and social isolation. Williams (2018) examines the impact of race-related stressors on the mental health of populations of color. According to him, "research suggests that anti- immigrant policies and initiatives can trigger hostility toward immigrants that can lead to perceptions of vulnerability, fear, and psychological distress for both immigrants who are directly targeted and those who are not direct targets (Szkupinski Quiroga, Medina, and Glick 2014). (Williams, 2018, p. 476). Stress can also negatively impact physical health, "An earlier body of research found that increases in hostility in the media and general society against Muslims and persons from the Middle East in the wake of the September 11, 2011, terrorist attacks were associated with an increased risk of low birth weight and preterm birth for Arab American women (Lauderdale 2006) and elevated levels of mental health symptoms among persons from the Middle East (Padela and Heisler 2010)." (Williams, 2018, p. 476-477).

Several studies, such as Wolfers & Utz 2022, have also demonstrated that racism in social media, and racism in general, contributes to mental health problems. Also, empirical studies have repeatedly found positive correlations between social media use and stress (Wolfers & Utz, 2022, p.1). One of the ways that social media can cause stress is by promoting misinformation, fake news, and conspiracy theories. (Wolfers & Utz, 2022, p.2) For example, a 2021 study found that during the COVID-19 pandemic, racial discrimination related to the virus was linked to increased risks of depression,

anxiety, self-harm, binge drinking, and suicidal thoughts among Asian American and Pacific Islander students. (Zhou, Banawa, & Oh, 2021)

Paradies et al. (2015) found in their meta-analysis that racism impacts mental health twice as strongly as it affects physical health. The study revealed that BIPOC (Black, Indigenous, and People of Color) individuals who experienced racism were significantly more likely to face mental health challenges, including depression, anxiety, emotional distress, PTSD, stress, and suicidal thoughts. (Paradies et al., 2015) Studies also indicate that constant online hostility significantly impacts mental health for Arab Americans, who often fear that digital harassment could escalate into real-life abuse. Research by the ADL (Anti-Defamation League) highlights that identity-based hate and harassment online remain pervasive, disproportionately targeting marginalized groups, including Arab Americans. This harassment not only affects individuals' emotional well-being but also creates concerns about personal safety, as online threats sometimes manifest offline. Furthermore, marginalized communities report feeling excluded from online spaces, intensifying stress and isolation (ADL, 2022).

Studies of online abuse and its psychological effects demonstrate that the persistent hostility Arab Americans face on platforms like Facebook and Twitter exacerbates stress levels. This is compounded by their experiences of severe forms of harassment, such as doxing, “personal data leaking,” and physical threats, making the transition from digital to physical aggression a genuine fear (Federation of American Scientists, 2022; ADL, 2022).

Jakubowicz et al. (2017) examined the impact of cyber racism and how communities develop resilience in response to it. Their study highlights the disturbing experiences of Arab and Muslim women who encounter anti-Muslim and anti-Arab content online. For instance, a Syrian woman expressed her horror at an anti-Muslim website that featured offensive imagery, such as depictions of an Arab engaging in inappropriate acts with a camel, accompanied by captions implying that such behavior is representative of Islam. Another testimony from a Lebanese woman noted that while discrimination targets Islam, it often appears more specifically directed at Arabs. She pointed out that derogatory remarks tend to focus on Arabs rather than other Muslim groups like Afghans or Turks, indicating a targeted anti-Arab bias rather than a general anti-Muslim sentiment. (Jakubowicz et al., 2017, p. 156-159).

Taken together, these studies demonstrate the severe psychological toll that racism, online hate, and discriminatory policies can have on Arab Americans and other marginalized groups, with effects ranging from stress and anxiety to depression, PTSD, and fears of real-world violence. While existing scholarship provides valuable insight into the general impact of racism and online harassment, there remains a need to understand more specifically how Arab Americans themselves experience and navigate these challenges. To address this gap, the following section will focus on the coping

strategies Arab Americans employ in response to anti-Arab racism, particularly as it unfolds on social media.

2.5 The Role of Culture in Shaping Coping Strategies

To understand the impact of stress, it is essential to recognize that stress affects individuals differently based on various factors including culture (Abou-Ziab, 2016, p. 17). Culture is a complex concept that includes shared beliefs, traditions, customs, and behaviors that help a group of people make sense of the world and create a sense of community and identity (Bustamante et al., 2011; Cohen, 2009; Falicov, 1995, 2007; Harrell, 2015). Scholars describe culture as multidimensional, dynamic, and fluid, existing in various contexts rather than being tied to a single ethnic group (Cohen, 2009; Falicov, 1995; Harrell, 2015; Sue, 2001). Harrell (2015) defines culture as a system of shared meanings, knowledge, and daily practices that shape how a group views the world and behaves in the world. This system evolves over time through people's interactions with their environment and is passed down through shared stories, traditions, and socialization. It provides a framework for individuals to understand reality, connect with others, and form their worldview.

Aldwin (2014) explains that culture influences how people experience stress and cope with it. This includes the types of stressors they face, how they view these stressful events, and the coping methods they choose. Factors like gender, socioeconomic status, religion, ethnicity, location, and sexual orientation can all affect the kinds of stress people encounter and how they respond to it (Aldwin, 2014; Wong, 1993).

In that sense, culture plays a big role in shaping how people cope with stress, especially through social processes like seeking support from others or managing emotions (Ahuvia, 2002; Aldwin, 2014; Chambers, Ryan, & Connor, 2001; Klienke, 1991; Martire, Stephens, & Townsend, 1998). Cultural values also influence whether a person relies more on themselves (internal coping) or depends on others (external coping). This coping process often impacts the surrounding social environment, making it more influenced by cultural norms (Abou-Ziab, 2016, p.19). Which means that the choice between internal and external coping is not only an individual preference but also a reflection of the cultural norms and expectations surrounding the person. Moreover, this coping process often has a direct influence on the surrounding social environment. When external coping is common, for example, communities become actively involved in helping individuals navigate stress, reinforcing collective bonds and social support systems. Alternatively, in contexts where internal coping is emphasized, the environment may play a less visible role, but it still reflects the cultural expectation that individuals manage their struggles independently. In this way, coping is both shaped by cultural values and contributes to the structure of the social environment in which people live.

A study by Hoda Abou-Ziab (2016) titled Addressing Stress and Well-Being Among Women of Arab Descent Living in the United States explores how culture shapes both the stress and the coping mechanisms among Arab Americans. According to the study, as people interact with their environment, culture helps them recognize, define, and understand stressors, leading to coping methods that are influenced by cultural beliefs (Aldwin, 2014; Wong, 1993). For people of Arab descent, common stressors include family expectations, balancing Arab and American values, and adapting to a new culture (acculturative stress). In these situations, culture affects how individuals understand and express stress (e.g., through physical symptoms such as headaches, muscle tension, fatigue, heart palpitations, stomach problems, sweating, or other) and guides them in finding appropriate ways to manage it (Abou-Ziab, 2016, p. 19).

According to Kleinman (1987), one perspective shared by mental health researchers is that culture establishes not only what constitutes an illness, but also the response to that illness. "Thus, what may be considered a mental health problem requiring professional treatment in one society may be seen simply as a routine hassle of daily living in another (Green, 1995)" (Aloud & Rathur, 2009, p. 245). These insights emphasize the critical importance of culturally sensitive mental health services that consider the unique social and cultural experiences of Arab Muslim populations, ensuring that these communities receive appropriate care that aligns with their perspectives and needs.

Coping is a way to handle psychological stress in a challenging environment by managing external or internal pressures that threaten a person's well-being (Bauman, Haaga, & Dutton, 2008; Lazarus, 1993; Lazarus & Folkman, 1984). So how do individuals cope with racism, particularly given its persistent and harmful effects on mental health? Hoda Abou-Ziab (2016) examines coping strategies that people may use unintentionally. One key strategy is relying on social support. This approach aligns with the collectivist values of many communities and has been shown to reduce depression and anxiety. Individuals often turn to their social networks, such as family and friends, as their main source of support for solving problems (Dwairy, 2009; Erickson & Al Timimi, 2001; Kakoti, 2012; Mourad & Abdella, 2010; Nassar-McMillan et al., 2013). (Abou-Ziab, 2016, p. 233).

Lazarus and Folkman (1984) explains coping as a flexible process where people continuously assess and reassess stressful situations, either by addressing the situation directly or by changing how they view it. They categorized coping into three main types: emotion-focused coping, which deals with feelings, problem-focused coping, which addresses the root of the problem (Carver, Scheier, & Weintraub, 1989; Chao, 2011; Lazarus & Folkman, 1984) and Meaning-making coping. (Abou-Ziab, 2016, p. 189)

Emotion-focused coping involves changing how people manage their emotions and react to stress without altering the actual stressful situation (Bauman et al., 2008; Lazarus & Folkman, 1984). Strategies for emotion-focused coping include avoiding the problem, downplaying its importance, distancing oneself, focusing on positive

comparisons, and finding value in negative events (Lazarus & Folkman, 1984). Some people may also cope by blaming or punishing themselves (Lazarus & Folkman, 1993). A key part of this approach is cognitive reappraisal, where individuals change how they view a situation without changing the situation itself, helping to regulate emotions (Chao, 2011; Lazarus & Folkman, 1984).

Problem-focused coping strategies aim to reduce stress by addressing a problem directly. This involves identifying the problem and finding solutions to it (Lazarus & Folkman, 1984). Two types of problem-focused coping are confrontive coping and planful problem-solving (Folkman & Lazarus, 1988). Confrontive coping involves tackling the issue head-on with determination and sometimes risky actions, like "I stood my ground and fought for what I believe in" (Chao, 2011; Folkman & Lazarus, 1988; Kaiser & Miller, 2004). Planful problem-solving, on the other hand, involves carefully planning and taking steps to solve the problem, such as "I doubled my work and efforts because I knew I had to get it done" (Folkman & Lazarus, 1988; Mahat, 1997). Research shows that using problem-focused coping can improve self-confidence and self-esteem (Chao, 2011; Holahan & Moos, 1987). Additionally, problem-focused coping can encourage social support and help people adopt healthier coping strategies that boost self-confidence and promote well-being (Chao, 2011; Holahan & Moos, 1987; Lazarus & Folkman, 1984; Sabina & Tindale, 2008) (Abou-Ziab, 2016, p. 190).

Meaning-making coping refers to how people make sense of stressful or traumatic experiences, and it has been shown to play an important role in improving overall well-being (Lazarus & Folkman, 1984; Manning-Walsh, 2005; Park, 2005). This coping strategy is often studied in relation to trauma, as it can help people grow personally by adapting their thinking after a traumatic event (Ching, Martinson, & Wong, 2012; Kashdan & Kane, 2010; Park, 2005). Meaning-making can act as a link between stress and better physical health outcomes (Koltko-Rivera, 2004; Park, 2010; Manning-Walsh, 2005). For example, post-traumatic growth refers to positive changes after a traumatic experience, such as a greater appreciation for life, stronger relationships, recognizing personal strengths, and sometimes, spiritual growth (Kashdan & Kane, 2010). Research shows that people who focus on making meaning of their trauma, rather than just managing emotions, can recover better (Batten, Orsillo, & Wasler, 2005; Kashdan & Kane, 2010) (Abou-Ziab, 2016, p. 190).

Besides the social support, emotion-focused, problem-focused, and meaning-making coping strategies previously discussed, Abou-Ziab's (2016) research highlights that immigrants to the United States often use active coping strategies to address the stress of adapting to a new culture. Active coping involves drawing on personal knowledge and strengths to tackle cultural challenges and navigate difficult situations effectively (Torres, 2010). This strategy is particularly helpful in managing acculturative stress, as it includes seeking social support, building relationships, solving problems, and engaging in social activities (Hobfoll & Schroder, 2001; Torres, 2010) (Abou-Ziab, 2016, p. 189-190).

Religion can serve as a source of strength and resilience for Arab Americans, as many turn to traditional healers, rely on their faith, or engage more deeply in religious practices as coping strategies for dealing with psychological and medical difficulties (Al-Krenawi et al., 2004; Dalky, 2012; Nassar-McMillan et al., 2013; Al-Krenawi & Jackson, 2014). According to Abou-Ziab (2016), studies have also found that stronger religious involvement can be linked to better mental well-being among Arab Americans (Abou-Ziab, 2016, p. 199). However, being religious can also lead to stress, especially because of growing discrimination based on religion , specifically against Muslims in the U.S., For example, Because Muslim women's faith is visibly expressed through the hijab, and given the persistence of discrimination against Muslims, women who wear the hijab face a heightened risk of racism and violence (Abou-Ziab, 2016, p. 199)

Understanding the religious diversity among Arab Americans is key to gaining a full picture of their culture and its effects, both positive and negative. It is worth mentioning that most Arab Americans identify as Christian (63%), followed by Muslims (24%), and the remaining 13% either belong to other religions or have no religious affiliation (Mourad & Abdella, 2010; Nassar-McMillan et al., 2013). Within these groups, there are further divisions, such as Sunni, Shia, and Druze in Islam, and Orthodox (e.g., Syrian) and Catholic (e.g., Maronite, Syrian) in Christianity (Haboush, 2007; Nassar-McMillan et al., 2013) (Abou-Ziab, 2016, p. 198).

In addition to other methods of coping with stress, social media itself can serve as a tool for coping. Many individuals use social media to express emotions, seek support, or engage with like-minded communities. It can provide a sense of connection, validation, and relief, especially for marginalized groups. For example, social media platforms can serve as a space for solidarity and activism, helping individuals feel heard and supported in the face of racial or gendered discrimination. According to Wolfers & Utz (2022), a person who feels stressed might try to cope by seeking social support, using social media as a tool to do so. How well this strategy works depends on how well it matches the stressful situation. This can lead to either positive or negative effects in the short term (such as reducing stress) and long term (such as improving life satisfaction) [9,10]. For example, if someone can't change a stressful situation, distracting themselves might help them feel calmer. (Wolfers & Utz, 2022, p.1-2)

According to the findings of Wolfers and Utz (2022), social media can play three very different roles in the stress-coping process: it can be a source of stress, a helpful resource, or a tool for coping. However, more detailed research is still needed in order to clarify when social media acts more as a resource or a stressor, and when it is an effective coping tool. This research should consider factors like the timing of social media use, the situation, the coping strategies involved, who the person is communicating with, and the content they encounter. By looking at social media's different functions, we can offer better advice on how to design and use social media in ways that help reduce and prevent stress. (Wolfers & Utz, 2022, p. 4)

2.6 Attitudes toward using Formal Mental Health Services among Arab Americans in the U.S.

What factors affect perceptions of seeking and utilizing formal mental health services within Arab Muslim communities? A study by Aloud and Rathur (2008) explored the factors influencing attitudes toward seeking and using formal mental health services among Arab Muslim populations. Published in the Journal of Muslim Mental Health, their research highlighted key cultural, religious, and social barriers that discourage mental health service utilization within these communities.

In this study, four key factors—cultural and traditional beliefs, familiarity with formal mental health services, perceived societal stigma, and reliance on informal indigenous resources—were analyzed to examine the attitudes of Arab Muslims toward seeking and using formal mental health services in a large Midwestern city in the United States (Aloud & Rathur, 2008, p. 243). The findings revealed that these factors significantly influenced Arab Muslims' willingness to engage with formal mental health care. Demographic variables were generally not significant, except for length of stay in the U.S. These results supported the HSPAM (help-seeking pathways of Arab Muslims) model that the study employed, demonstrating that Arab Muslims often rely on informal resources first and hold less favorable attitudes toward formal services, which in turn reduces their utilization of such services.

The study emphasizes the need for culturally sensitive, affordable, and accessible mental health services, including ethnic-specific facilities, language-matched providers, and community outreach programs, to improve service use, reduce dropout rates, and achieve better outcomes.

A study by Nassar-McMillan and Hakim-Larson (2003) examined counseling within Arab American communities and emphasized that effective counseling requires sensitivity to their cultural identity, which is shaped by collective traditions, family-oriented values, and often strong religious beliefs. The purpose of this study was to describe a focus group interview conducted with a group of therapists working in a large-scale, comprehensive family service agency within an Arab American community. The study highlights the importance of recognizing the impact of acculturation stress, discrimination, and conflicting cultural expectations on the mental health of Arab Americans. These challenges are compounded by the stigma associated with mental health issues within Arab communities, which can hinder individuals from seeking professional help. The authors stress the need for culturally competent counseling approaches that account for the diverse experiences of Arab Americans, particularly in addressing issues such as racism, intergenerational conflicts, and the psychological effects of political events that target their communities.

Nassar-McMillan and Hakim-Larson (2003) also highlight important considerations for counseling Arab Americans, emphasizing the need to account for a range of intersecting

factors. These include cultural and religious backgrounds, country of origin, educational attainment, duration of residence in the United States, level of community involvement, and the reason for immigration—particularly regarding perceptions of the United States. These factors collectively shape the broader context of assimilation for Arab Americans and may significantly influence how an Arab American client perceives a non-Arab therapist or other mental health professional. While some perceive all individuals of Arab descent as part of a unified "Arab Nation" (Abudabbeh & Aseel, 1999) many Arab Americans hold varying self-perceptions of cultural identity. For some, their identity reflects a dynamic interplay between Arab and American influences, resulting in diverse perspectives. Such self-identification often influences counseling needs, as identity-related issues are closely tied to one's country of origin, immigration motivations, and the challenges of navigating complex cultural dynamics.

Building on this discussion, discrimination against Arabs as a minority group in the United States is not a new phenomenon, and it continues to manifest both offline and online, particularly on social media platforms. Political events often exacerbate these prejudices, highlighting and amplifying racist attitudes toward Arabs in both public discourse and digital spaces. Such discrimination has significant mental health implications for Arab Americans, contributing to stress, anxiety, and a sense of marginalization. In particular, the period following the October 7th conflict between Hamas and Israel has intensified these challenges, disproportionately affecting Palestinian communities and underscoring the urgency of understanding these dynamics. This context highlights the significance of the present research, which aims to examine how anti-Arab racism on social media affects the mental health and daily lives of Arab Americans. In the next chapter, the methodology will be presented, detailing the use of surveys and in-depth interviews, analyzed through the conceptual framework of racism and stereotype theory to interpret the findings.

Chapter Three

Research Methodology

The aim of this study was to examine how anti-Arab racism, both online and offline, affects the daily lives and mental health of Arab Americans, using a combination of surveys and in-depth interviews. The study employed a snowball sampling method to survey as many Arab Americans as possible. The primary focus was on participants' experiences with racism in daily life and on social media platforms. The survey also asked participants whether they had experienced periods of heightened discrimination tied to major political events, both inside and outside the U.S., such as the October 7th conflict, and invited them to reflect on how these events shaped their experiences. Participants were further asked to describe how racism impacted their mental health—affecting stress, anxiety, and depression—and to share the coping mechanisms they used, whether consciously or subconsciously.

Additionally, the survey asked whether participants had sought mental health services and, if not, what factors contributed to their decision, whether those factors were attributable to cultural stigma, inaccessibility, or other barriers. It also attempted to determine whether culturally adapted mental health services were available and accessible to Arab Americans and to identify any other factors influencing their willingness to seek professional support.

The study included three key groups: Arab Americans who immigrated to the U.S. from other countries, first-generation Arab Americans born in the U.S. to immigrant parents, and Arab Americans with longer-established lineages in the U.S. Examining these groups allowed for a more comprehensive understanding of how racism affected individuals across different generations and experiences. Immigrants provided insights into adapting to a new culture while managing discrimination, first-generation Arab Americans revealed how they navigated balancing cultural traditions with the realities of American society, and those with multi-generational roots in the U.S. shed light on how Arab identity and experiences of racism evolved when families had been part of the American social fabric for several generations.

The data collected were analyzed to uncover patterns and themes that highlighted the effects of anti-Arab racism on the mental health and daily lives of Arab Americans. Special attention was given to the role of social media, cultural factors, and political events in shaping these experiences. This approach aimed to provide an understanding of the challenges faced by Arab Americans and inform potential solutions to address these issues.

The study was conducted entirely online and was designed to reach Arab Americans residing across various regions of the United States. By utilizing a web-based survey distributed through a shareable link, the research sought to ensure a geographically diverse and accessible participant pool. The online nature of the study also guaranteed anonymity, which increased participant comfort and encouraged more honest and reflective responses.

A mixed-methods approach was employed, combining quantitative and qualitative data collection to examine experiences of discrimination on social media and in everyday life, along with their mental health impacts. In the first phase, participants completed an online survey with both multiple-choice and open-ended questions, allowing them to reflect on their experiences and express their thoughts in detail. At the end of the survey, participants could opt in for a follow-up interview by providing their contact information. In the second phase, semi-structured interviews were conducted via Zoom with selected participants to gain deeper insight into their lived experiences and coping strategies. Prior to participation, all respondents signed an informed consent form outlining the study's purpose, their rights, and confidentiality measures. To ensure privacy, interviewees' names were replaced with pseudonyms, and no identifying information was included in the final report.

To ensure diversity and reduce bias, the survey was distributed across multiple U.S. regions, including states with both large and small Arab American populations. Targeted locations included California, Michigan, Nevada, Massachusetts, and Rhode Island. Participants were sought from a variety of social and economic backgrounds to capture a broad spectrum of experiences. However, the survey did not include questions about political beliefs or affiliations.

Acknowledging that snowball sampling may result in a less balanced sample, steps were taken to minimize this risk by targeting at least 100 survey responses through outreach to a diverse initial group in order to prevent overrepresentation of any single demographic. However, due to time constraints, the final number of respondents was limited to 57. While this approach yielded valuable insights, the findings must be interpreted with caution given the limitations in generalizability. In addition, the survey itself may reflect a degree of response bias, as its framing assumed the presence of racism and was therefore more likely to attract participants who had personally experienced discrimination.

In addition to sampling limitations, participant concerns about personal and professional consequences posed another challenge to data collection. Several individuals who were approached to complete the survey expressed fear that their responses could negatively impact their employment or immigration status in the United States. This concern likely reduced participation from certain segments of the Arab American community, particularly those in vulnerable job positions or with uncertain residency status. As a result, the sample may underrepresent individuals who experience heightened anxiety or stress due to discrimination but were unwilling to disclose these experiences, which could have provided further insight into the most acute mental health impacts of anti-Arab racism. The online and anonymous nature of the survey sought to mitigate these concerns, yet the fear of potential repercussions remained a notable factor affecting response rates and overall generalizability.

Given the sensitive nature of the topic, the study prioritized ethical considerations and emotional safety. Regarding the questionnaire, participants were informed of their right to skip any question or withdraw from the study at any point without consequence. Confidentiality was maintained throughout the process, and data were securely stored. During interviews, participants had the freedom to pause, skip questions, or stop at any time.

From those who volunteered for interviews, five individuals were selected to reflect diversity in age, location, and socioeconomic background. This intentional sampling ensured a more inclusive and representative range of voices and experiences.

For data analysis, quantitative responses were processed using the platform SurveyMonkey to identify patterns and trends across demographics such as gender, age, country of origin, and length of time in the United States. Qualitative data—including open-ended survey responses and interview transcripts—were analyzed using thematic analysis. This approach involved identifying recurring themes, such as coping strategies and regional differences in experiences of discrimination. The findings provided valuable insights for mental health professionals, social media platforms, and policymakers seeking to better understand and support Arab Americans facing online discrimination.

Chapter Four

Arab American Experiences of Racism

4.1 Introduction

As previously outlined in the methodology, to better understand the lived experiences of racism among Arab Americans, this study employed an online survey targeting Arab-identified individuals currently residing in the United States. The survey was designed and administered using SurveyMonkey and distributed through a range of digital networks and platforms. The online format allowed for greater accessibility, geographical diversity, and participant anonymity, which may have encouraged more open and honest responses.

This chapter presents and analyzes the findings related to participants' reported experiences with racism. The survey, conducted in July 2025, received responses from 57 individuals, most of whom have shared personal accounts of racist incidents or discriminatory encounters. The outreach strategy succeeded in reaching Arab Americans residing in various regions across the United States , including 11 from Massachusetts, 5 from New Mexico, 4 from California, 4 from Georgia, 3 from New York, 3 from Florida, 3 from New Jersey, 2 from Michigan, 2 from Missouri, 2 from Virginia, 2 from New Hampshire, 2 from Oregon, and 1 each from Illinois, Maryland, Rhode Island, Nevada, Nebraska, and Washington. Participants represented a wide range of age groups as demonstrated in Figure 4.1.

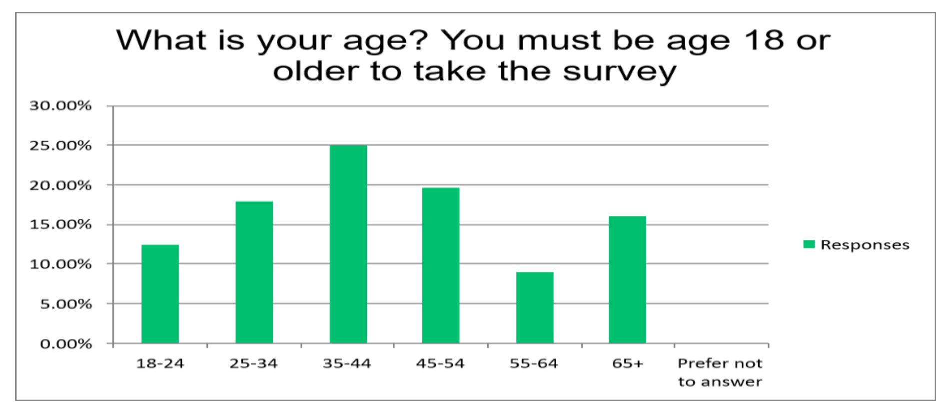

Figure 4.1 Age

In terms of gender distribution, the majority of respondents identified as female (n = 39, 68%), followed by male participants (n = 15, 26%). A smaller proportion identified as non-binary or third gender (n = 3, 5%), and no participants selected the option “prefer not to answer.”

Regarding religious affiliation, the majority of respondents identified as Muslim (n = 40, 70%), followed by Christian (n = 8, 14%). A smaller proportion selected “Other” (n = 6, 10%) or “Prefer not to answer” (n = 3, 5%). Those who chose “Other” reported affiliations such as Secular Humanist, Quaker, spiritual but not religious, or a multi-faith upbringing. Among the 39 female respondents, 6 (15%) reported wearing the hijab, 26 (66%) reported not wearing it, and 7 (17%) indicated that they were not Muslim. Among the 40 Muslim participants, 36 reported being actively religious, with 88% fasting during Ramadan and 69% performing daily prayers. Similarly, 5 of the 8 Christian participants reported regular religious practice, including church attendance and daily prayer. A question about Jewish religious observances (e.g., synagogue attendance, Shabbat, wearing religious garments) yielded no responses, indicating either no Jewish-identifying participants or non-observance among any such respondents.

A total of 57 respondents were asked a general question regarding wearing religious symbols, and 50 participants provided answers. Of those 50, 14% (n = 7) reported regularly wearing religious symbols such as a cross or medallion, 20% (n = 10) wore them occasionally, and 66% (n = 33) reported not wearing such symbols. None selected "Prefer not to say." Of the 57 respondents, 56 provided information regarding their educational attainment as illustrated in Figure 4.2.

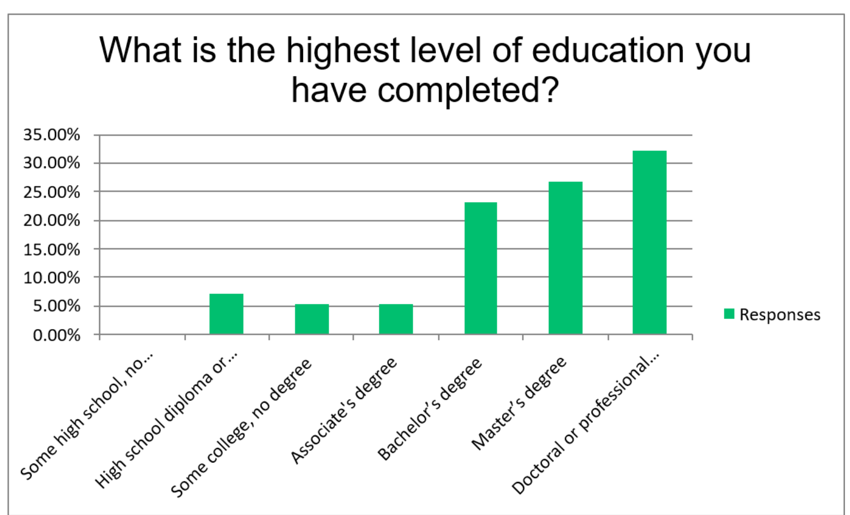

Figure 4.2: Level of education

More than half of the respondents were married (n = 31, 54%), while 28% (n = 16) identified as single. Smaller proportions reported being divorced (n = 5, 8%), living with a partner (n = 2, 3%), or widowed (n = 1, 2%). Among the 33 respondents who provided information about the ethnicity of their spouse or partner, 64% (n = 21) reported having an Arab partner, 33% (n = 11) identified their partner as

Western/European, and one respondent indicated “Other” (Berber). Regarding the spouse or partner’s religious affiliation, 21 were Muslim, 8 were Christian, 3 preferred not to answer, and 1 identified as “Other” (secular).

When asked about the place of birth, of the 51 respondents who answered, 26 (51%) were born in the United States, while 25 (49%) were born outside the U.S. The countries of origin varied widely, with a significant number from Palestine n=7, as well as other Arab-majority countries including Lebanon n=3, Egypt n=2, Jordan n=2, Syria n=1, Yemen n=1, Saudi Arabia n=2, Kuwait n=4, Algeria, and Libya n=1. One respondent reported being born in Bangladesh, and others noted dual heritage or migration from non-Arab contexts.

When asked about their current residence, of 49 respondents who answered, participants reported living across a broad geographic range in the United States, with 11 in Massachusetts (particularly the Boston and Newton areas), 3 in New York, 3 in New Jersey, 4 in California, 3 in Florida, 2 in Virginia, 4 in Georgia, 1 in Illinois, 2 in Michigan, 5 in New Mexico, 2 in Oregon, 2 in Missouri, 1 in Nebraska, 1 in Nevada, 1 in Rhode Island, 1 in Maryland, 2 in Hampshire, and I in Washington State. This reflects a wide geographic dispersion of Arab Americans across both urban and suburban locations. Among the 51 respondents, most were long-term residents or U.S.-born citizens, with varying lengths of stay ranging from less than one year to over 20 years, as illustrated in Figure 4.3.

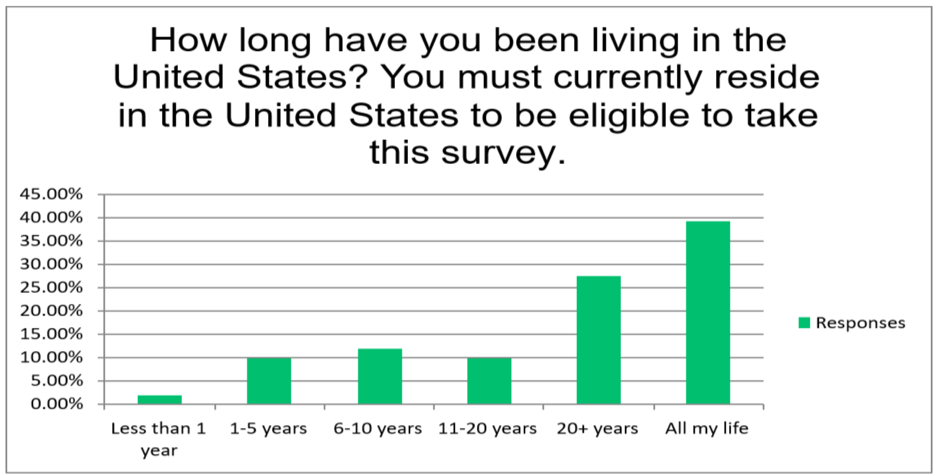

Figure 4.3 Duration of Residence in the U.S.

Among the 50 respondents who provided information on their parents’ birthplaces, 20 indicated Palestine, 5 Syria, 6 Lebanon, 5 Egypt, 3 Kuwait, 1 Iraq, 1 Jordan, 1 Saudi Arabia, 2 Algeria, 1 Yemen, 1 Morocco, 1 Mali, 1 United Kingdom, and 4 the United States. Some participants reported having one parent born in the U.S. and the other abroad, reflecting mixed-national heritage. Similarly, grandparental origins (n=50) reflected deep transnational and diasporic ties to the Arab world. 24 were born in Palestine, 4 in Lebanon, 4 in Syria, 4 in Jordan, 1 in Iraq, 2 in Yemen, 2 in Algeria,1 in Kuwait. Some also included grandparents born in the United States, Uk, or sub-Saharan

African nations like Mali, Senegal, and Morocco, illustrating the diversity within Arab diasporic identities.

4.2 Experiences of Racism Among Arab Americans

Participants were asked to self-assess the frequency with which they have been targets of racism, identify the contexts in which they experienced it, and provide qualitative descriptions of these encounters. The data reveal a multifaceted and persistent reality of racialized experiences, particularly in the wake of rising anti-Arab and Islamophobic sentiment in the United States. The findings show that racism is a recurrent aspect of life for many Arab Americans in the sample, with varying levels of frequency, as illustrated in Figure 4.5

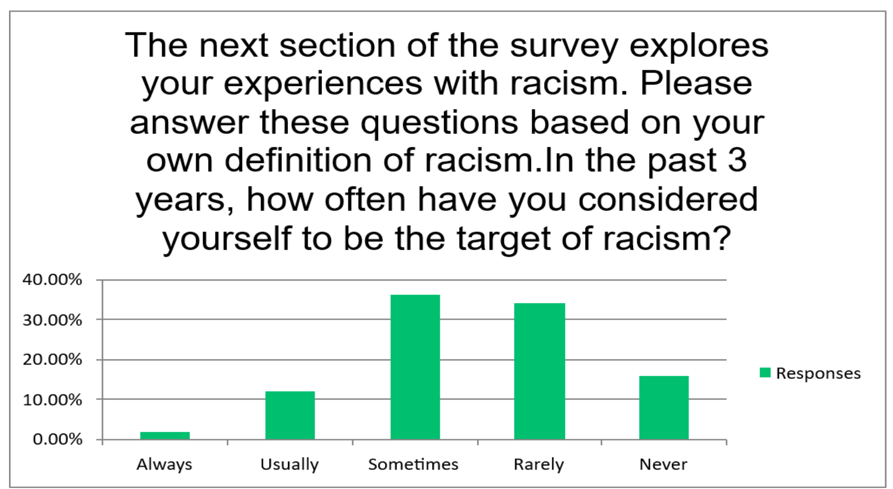

Figure 4.4 Impact of Major Political Events on Anti-Arab Content on Social Media

Respondents reported experiencing racism most frequently on social media, in workplaces, and across various other settings, as illustrated in Figure 4.6

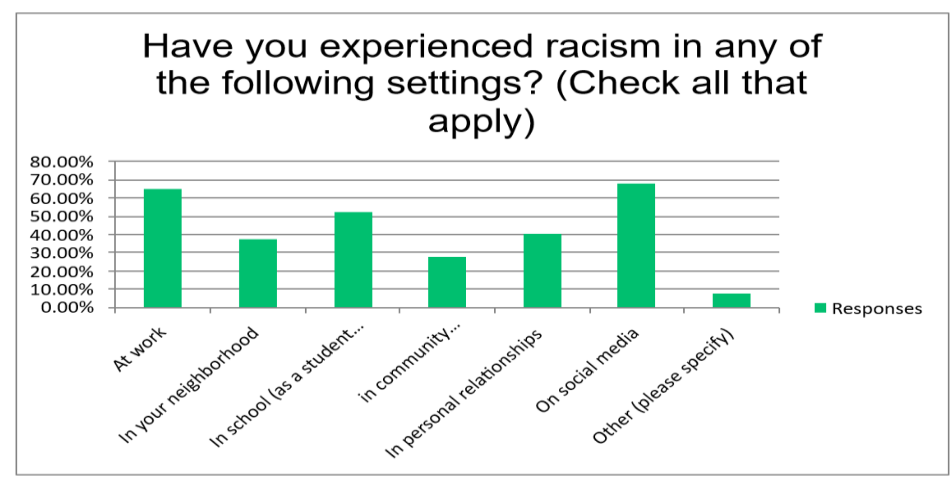

Figure 4.5 Experince of Racism by Setting

4.3 Personal Experiences of Anti-Arab Racism

The open-ended survey responses collected from Arab American participants (Q20) shed light on the complex, varied, and often deeply personal experiences of anti-Arab racism in both online and offline spaces. Many respondents described how their identity—particularly their Palestinian heritage or perceived Muslim affiliation—made them targets of discrimination.

Several participants emphasized that mentioning Palestine, more than simply being Arab, often triggered strong negative reactions. One participant shared, “It is mostly when I mention that I’m Palestinian. Not so much the fact that I’m Middle Eastern or Arab. It’s when I say Palestine. People get offended or try to avoid me altogether. It’s probably because they’re either Jews or Zionists or think I’m Muslim.”

Participants also reported instances of gendered and Islamophobic hate, especially on social media: “On social media, comments that accuse me of being weaker as a woman, submitting to a man, that I deserve to be raped by Muslim men, etc. In real life, micro-aggressions among colleagues at work. Comments that show that their culture is more superior to mine...”. Others reflected on the impact of wearing the hijab, even temporarily, and how it elicited discomfort or discriminatory behavior from colleagues: “At work a few years ago, I tried out wearing hijab and I could see it made some supervisors disgusted. On other occasions, supervisors made ignorant and rude small comments about Islam”.

Academic and professional discrimination were also raised, especially when participants were outspoken about Palestinian rights: “It is possible that I did not get tenure because of my pro-Palestinian stance though I cannot be sure. I hear anti-Arab comments in all areas of my life”; “I received some hate calls at my work when I organized an academic panel on Palestine, Sudan, and Syria”. Some experienced direct consequences in educational and social settings: “I have had to leave many school and social settings because I am Palestinian... I was called in from being reported for Antisemitism for wearing a ‘resist Zionism’ shirt in college”.

Some mentioned intra-community challenges as well as structural racism: “The experience is from my own people as well as from people at work because of my outlook on life... The hypocrisy of societal norms and religious dogma..; “Looking Middle Eastern in today’s era, puts you in somehow uncomfortable situations, where you hear and don’t answer”. Several respondents described how anti-Arab narratives persist in public discourse and are normalized: “While I have not personally received targeted vile racism, I've heard racist comments freely and openly expressed... Arabs are terrorists, unfair and uneven accusations of antisemitic against Arabs; “Discounting my opinions because I am 'one-sided,' falsely accused of supporting terrorism because I believe in a free Palestine...”.

Interpersonal discrimination sometimes came from extended family or broader community spaces: “I consider my in-laws asking me to condemn Hamas a form of racism... Threatening letters for having a Palestine flag that included racist tropes”. Others commented on ignorance and indifference to Arab suffering: “Mostly expressions of distrust and poor knowledge of anything Muslim”; “The racism is not unfair treatment directed at me, but indifference to the suffering of Arabs as a people generally... War is normalized...”.

Several respondents detailed racism experienced during cultural or religious practices: “In a coffee shop after coming from Eid prayers with my kids who were in Muslim clothes”; “Just to name a few incidents: When I was in HS... My son in college was told he was a terrorist because he had a Palestine sticker... Someone walked into my home and said they didn’t know Muslims lived like this”. Historical and recent events were also recalled as moments when anti-Arab racism intensified: “During the Iran hostage crisis”; “Sons experienced racism in school after October 7th... School administrators showed bias in discipline and enforcing equal treatment”.

Many others reported being subjected to Islamophobic and misogynistic comments, anti-Palestinian sentiment, and repeated accusations of antisemitism: “Comments about 9/11, derogatory comments about women in the Middle East, hateful comments about Muslims and violence, and of course endless accusations of anti-semitism for support to Palestine liberation”; “It was not directed at me. It was following the victory of Zohran Mamdani... Groups on Facebook... spewing Islamophobic and racist remarks...”. One noted the intersectionality of their identities: “I’m mixed, Arab and Mexican and this shows up as a specific kind of racism in different communities... Got called a terrorist, or general colorism...” .

Others reported being stereotyped as needing to be “saved” from Arab culture: “At work I have had a few coworkers with the mentality that I need saving from my oppressive and sexist culture... They would keep pushing random Arab stereotypes...”. Workplace and social discrimination also extended to financial and community loss: “Social media posts have been terrible towards Palestinians, Arabs, and Muslims... My workplace has excluded the feelings and fears of Muslim community members...” ; “I have lost business because they found out that I was Arab and Muslim and supported Palestine. I've lost friends for the very same reason”. Finally, respondents reflected on situations of micro-aggressions, often increasing during national or global events: “Numerous micro-aggressions, especially after 9/11 and more recently... Classmates calling me a terrorist... Friends calling Arab foods Israeli...”.

As noted earlier, studies such as Said (1978), Shaheen (1984, 1994, 2001), Muhtaseb (2020), and Tchen (2018) have documented persistent negative portrayals of Arabs and Muslims in Western media, highlighting stereotypes that dehumanize, sexualize, or link Arabs to violence and terrorism. Archival work, such as that collected by the Museum of Chinese in America (2014), further emphasizes the breadth of these harmful representations across films, television, comic books, and other popular culture artifacts.

Research by Rachid (2015) and Stoller, Townsend, Hussain, & Yablon (2004) illustrates how public discourse and post-9/11 policies have reinforced these biases, resulting in discrimination, racial profiling, and marginalization. The responses from my Arab American interviewees and survey participants align closely with these findings: they reported experiencing anti-Arab racism in multiple domains, including social and workplace settings, online harassment, and negative stereotyping, confirming the persistence and real-world impact of these historical and media-driven prejudices.

4.4 Experiences of Racism on Social Media Among Arab Americans

The results provide significant insights into the frequency of social media use, the types of platforms frequented, and the nature and extent of exposure to anti-Arab and Islamophobic content. When asked about their frequency of social media use, a substantial majority of respondents—76% (n = 37)—reported using social media daily, while 10% (n = 5) used it several times a week. Only a small minority used social media less frequently, with 4% (n = 2) indicating they never used such platforms. This high rate of daily usage underscores the importance of social media in shaping the everyday experiences and mental landscapes of Arab Americans. The survey showed that participants used a wide range of social media platforms, with Instagram, Facebook, and LinkedIn being the most common, as illustrated in Figure 4.7

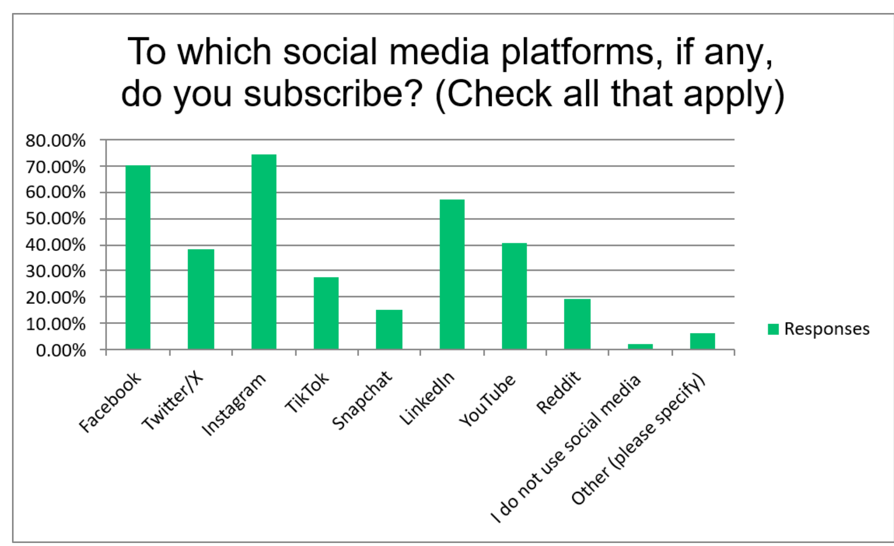

Figure 4.6 Social Media Platforms Sunscribed to by Respondents

The findings indicate that Arab Americans are frequently exposed to anti-Arab or Islamophobic content on social media, as illustrated in Figure 4.8

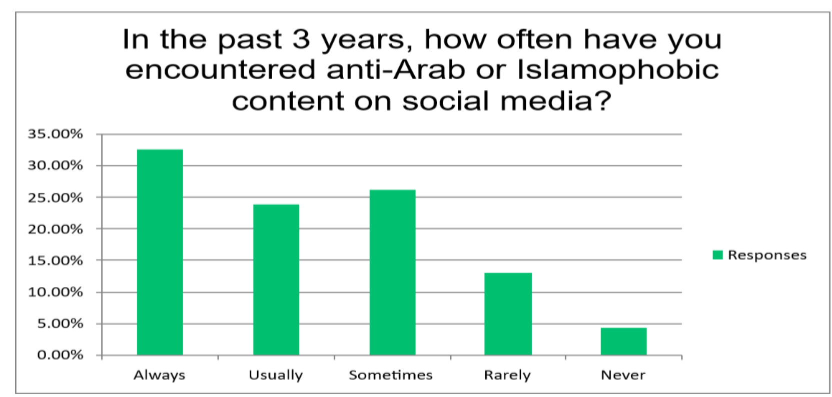

Figure 4.7 Exposure of Arab Americans to Anti-Arab and Islamophobic Content on Social Media

The types of anti-Arab content encountered were extensive and often overlapping. A significant portion of respondents (over 80%) indicated encountering negative stereotypes of Arabs or Muslims, statements attacking Islam, generalizations about Arab culture, and hate speech. Additionally, 88% of respondents reported seeing Arabs or Muslims being labeled as "terrorists," while 40% had witnessed explicit threats against Arabs. Several respondents elaborated in open-ended responses (Q24) that this content often relates to discussions about Palestine, decolonization, or Hollywood portrayals, with one noting: “My general feed is very pro-Palestine, and so I am actively being a victim of normalizing a genocide.”.

Another common theme was the misidentification of all Arabs as Muslims, followed by the association of Muslims with terrorism, highlighting the harmful effects of essentialist and reductionist thinking in online discourse. When asked whether the level of anti-Arab content had changed over the past ten years, 63% (n = 26) of participants reported an increase in such racism on social media, while 34% (n = 14) perceived it to be about the same, and only one respondent (2%) saw a decrease. The majority of participants believed that major political events intensified anti-Arab content on social media, as illustrated in Figure 4.9

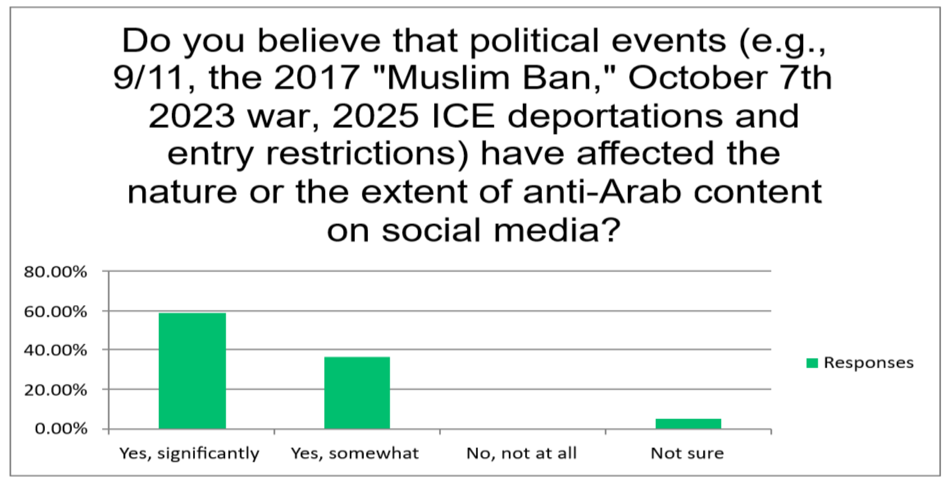

Figure 4.8Impact of Major Political Events on Anti-Arab Content on Social Media

An open-ended question in the survey asked respondents to reflect on any additional experiences or thoughts regarding anti-Arab racism on social media and how political events may have influenced it. Twenty participants responded. Their answers reveal a range of personal reflections, from expressions of concern and trauma to a cautious sense of hope rooted in rising awareness. Below are selected quotes, referenced by date of response.

Some participants expressed cautious optimism about a shift in public perception due to political events and social media exposure. One participant noted: "I personally think that more people are now aware and more informed and know the truth. My social media feeds are filled with people who are very supportive… But that's also partially as a result of the algorithm showing me things that align with my ideology" (Q27). This illustrates how the personalization of social media content can both amplify positive engagement and mask ongoing racism. This aligns with the study I mentioned earlier, which found that by continually presenting similar content, algorithms radicalize individuals, normalize divisive ideologies, and perpetuate harmful cycles of bias (Bonnefon, Shariff, & Rahwan, 2016, p. 2). However, in this case, the participant's reflection also demonstrates a growing awareness of how these algorithms operate, suggesting that while social media can foster solidarity, users are increasingly conscious of the ways in which algorithmic filtering shapes their perceptions and may conceal the persistence of racism.

Another respondent echoed the concern about political events intensifying racism, while also noting a dual reaction from the public: "Post-October 7th 2023, there has been a huge increase in anti-Arab and anti-Muslim content… but at the same time, there have been a lot of people on the other side learning more about Arab & Palestinian culture and feeling more affection towards it". This duality was also present in discussions around policy decisions such as the 2017 Muslim Ban, which, for some, mobilized support for Muslims as a reaction to Trump-era politics.

Respondents also reported witnessing new and intensified forms of racism, especially after October 7th, 2023. One wrote: "The assault on Gaza more than anything I've ever witnessed living here has caused a lot of Islamophobic and racist rhetoric… People just don't read Muslims and Arabs as human". Several responses highlight the normalization and legitimization of anti-Arab racism by public officials and media. One participant observed: "Public leaders, media, judges, academia have felt increasingly comfortable in dehumanizing Arabs in the US… content calling for the humanization and freedom of Arabs is censored… while leaders who openly call for genocide… are broadcast freely". This was further underscored by another participant, who noted: "Listening to major American politicians' statements of support to Israel, while hatred, destruction, and attacks on people defending their honor, country and family is seen, felt as heroic and right". Other participants conveyed distress and alienation. For example: "It is a source of stress and anxiety". "I never heard of doxxing till recently. Additionally, the way some news posts talk about us makes us seem as if we aren't even people".

Another respondent revealed a disturbing form of internalized Islamophobia from within the Arab community: “I’ve heard a Christian I’m related to talking about how she flat-out doesn't like hijabis, and she hates how there are more visibly religious people in Damascus now”. Some emphasized the lack of accountability on social media platforms: “I’m not sure if it’s gotten worse but it’s definitely allowed by these platforms. When things are reported… the reports are usually ignored”.

Yet, not all reflections were negative. One respondent described feeling supported by others: “Support and care from various groups has been really heartwarming”. A strong stance against racism also emerged: “I always speak out against it. I will never be silent. I will never be bullied into silence”. Meanwhile, another respondent reflected on the strategy of "invisibility" adopted by some in the Arab American community: “Mostly people in our community try to stay 'invisible' thinking this will protect them”. Some responses were critical and political: “A genocide of the Palestinian people is occurring… Jews are making speaking against a genocide to be ‘anti-Semitic’. Others pointed to the silencing effect of widespread racism: “At a minimum these events… gave an excuse for people to talk about it, perhaps making an implicit feeling explicitly said”.

In sum, these responses reflect the complex interplay between social media, political events, and public attitudes toward Arabs and Muslims in the U.S. While political crises can sometimes galvanize awareness and allyship, they also expose and intensify deep-seated racism, xenophobia, and misinformation, exacerbating psychological stress for Arab Americans both online and offline. Importantly, the findings in this section align with previous studies highlighted earlier: Jakubowicz et al. (2017) examine the impact of cyber racism on Arab and Muslim communities and how individuals, particularly women, build resilience in response to targeted online abuse; Wolfers and Utz (2022) show how racism on social media, combined with exposure to misinformation and conspiracy theories, contributes to stress and mental health problems; the ADL (2022) documents how identity-based online hate disproportionately targets marginalized groups, including Arab Americans, leading to emotional distress, safety concerns, and social isolation; and the Federation of American Scientists (2022) highlights how severe online harassment on platforms like Facebook and Twitter—such as doxing, data leaks, and physical threats—intensifies fears that digital abuse can escalate into real-world violence.

As discussed earlier, studies such as Bryan (2018), Panduranga, Patel, and Price (2017), Farokhi (2021), Khamis (2021), and Harb (2021) demonstrate how political events, policy decisions, and public rhetoric in the U.S. have intensified anti-Arab and anti-Muslim sentiment, both online and offline. Similarly, research on the Syrian refugee crisis (USA for UNHCR, 2024; Yigit & Tatch, 2017) and conflicts in Gaza (Oboler et al., 2024) highlights how global political developments can fuel misinformation, fear, and discriminatory narratives on social media platforms. Media analyses (Johnson & Ali, 2024) further show how mainstream news coverage often amplifies biases, while studies on Arab American leaders (Atkinson, 2023; Shahin, 2021; Harb, 2019) reveal

how these individuals are targeted for both political and cultural expression. The responses from my Arab American interviewees and survey participants align with these findings, reporting that political events—from the 2016 U.S. election and the "Muslim travel ban" to regional conflicts—significantly increased online harassment, hate speech, and public hostility, confirming the strong link between political discourse and social media–driven anti-Arab racism.

Chapter five

How Arab Americans Cope with Racism

5.1 Introduction

To explore how anti-Arab racism affects mental health, participants were asked how frequently they felt stressed, anxious, or depressed due to their experiences with racism—either in person or online. Over half of respondents reported experiencing mental health symptoms from anti-Arab racism frequently or occasionally, as illustrated in Figure 5.1

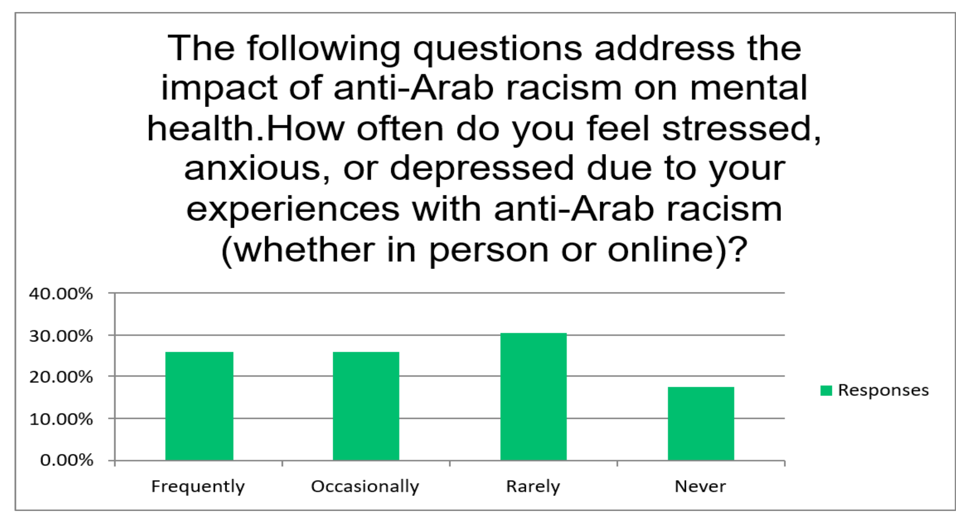

Figure 5.1Reported Mental Health Symptoms from Experiences of Anti-Arab Racism

Participants reported a range of mental health challenges over the past three years, with anxiety, stress, and depression being the most common, as illustrated in Figure 5.2

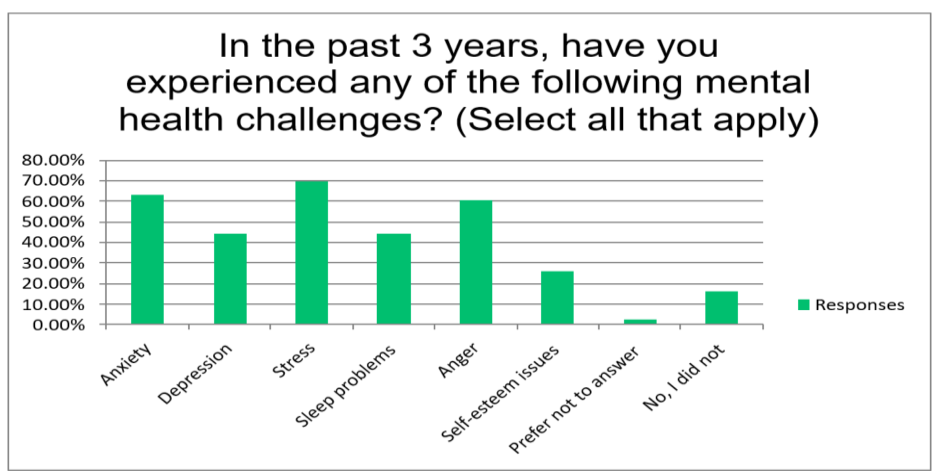

Figure 5.2 Mental Health Challenges Reported by Participants in the Past Three Years

One participant shared: “I'm not sure if these disorders are caused solely by anti-Arab treatment. Parts of it maybe, but living in the USA and contributing to arms sold to kill Arabs in Gaza through my tax dollars causes the most anxiety disorders to any human being.” (Q29) Another respondent noted, “We all experience some of that, but not because of racism.” These responses suggest a complex relationship between racism, political awareness, and emotional distress. For many Arab Americans, social media was seen as a source of stress with mostly negative effects on mental health, as illustrated in Figure5.3

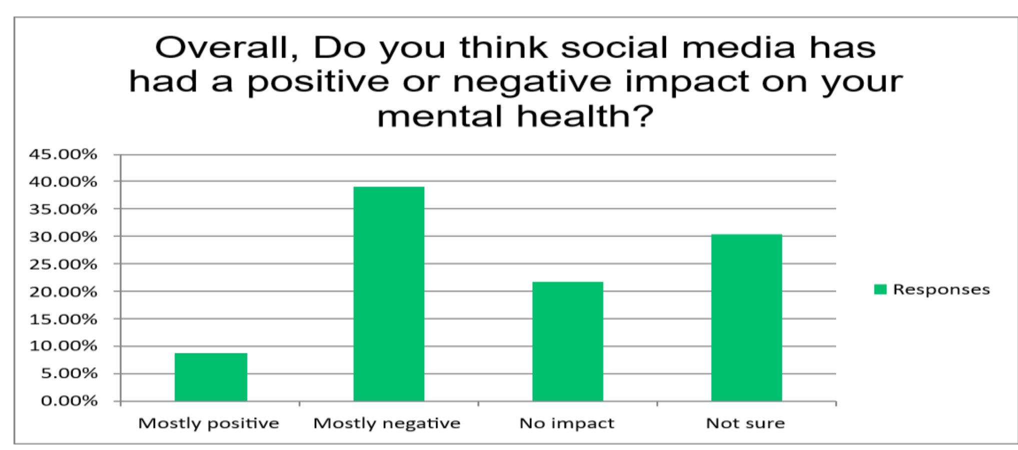

Figure 5.3 Perceived Negative Effects of Social Media on Arab Americans’ Mental Healt

The personal experiences shared by respondents align with broader research findings on the health consequences of racism that I have highlighted earlier. Williams (2018) highlights how anti-immigrant policies and societal hostility create chronic stressors that undermine both the physical and mental health of immigrants and Arab Americans. Similarly, Paradies et al. (2015) show that the effects of racism on mental health are particularly severe—twice as strong as its impact on physical health—manifesting in depression, anxiety, PTSD, and even suicidal thoughts. The testimonies in this study reflect these patterns, as participants described not only the emotional toll of

discrimination but also its lingering effects on their sense of safety and well-being in the United States.

5.2 Coping Strategies

To understand how Arab Americans cope with the mental health effects of racism, participants were asked to select their coping strategies (Q31). Respondents reported using various coping strategies, most commonly family support, physical activity, and hobbies, with fewer turning to therapy, mindfulness, or community groups, as illustrated in Figure 5.4

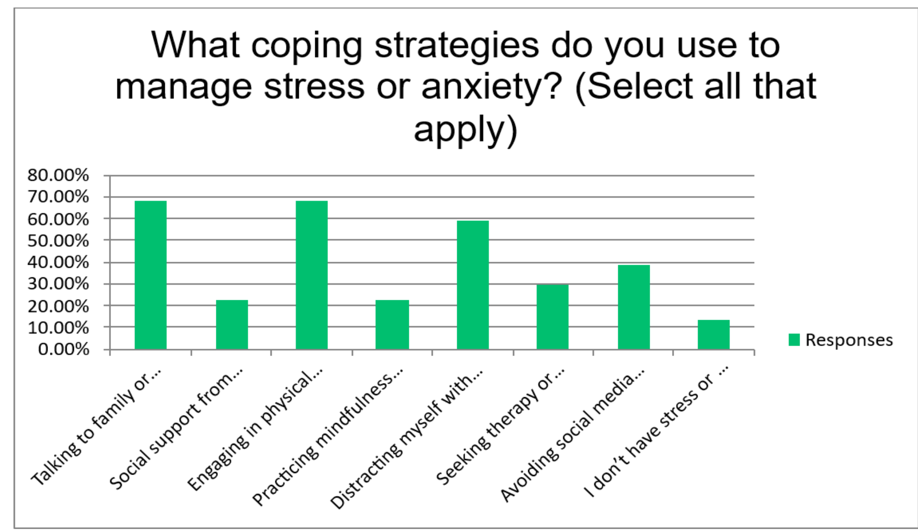

Figure 5.4 Coping Strategies of Arab Americans for Mental Health Effects of Racism

Qualitative responses added nuance to the coping strategies used. One respondent said they use anti-depressants, while another mentioned plans to begin therapy upon returning to the U.S. Others shared faith-based strategies, including prayer, reading the Quran, and trust in God. One participant noted: “My faith helps me deal with stress.” Another described themselves as a “hard worker” who stays focused on work rather than on uncontrollable issues. These findings highlight the diverse and often deeply personal ways Arab Americans manage the emotional burdens caused by racism.

The survey asked participants to describe particular experiences where their mental health well-being was significantly impacted by anti-Arab racism(Q32). Among the 30 respondents, many shared deeply personal and distressing accounts reflecting the pervasive and enduring nature of racism and its psychological toll.

One participant recalled an early experience in college, where disclosing their Palestinian identity led to immediate discrimination: "It happened 22 years ago while I was a student in college. My professor asked us to name the country we were from and when I said Palestine, he freaked out and made me sit down. I talked to HR and they made him apologize. He said he didn’t want to offend the Jews or Israelis in the class. I guess he was ok offending me".

Others described physical and verbal assaults rooted in post-9/11 Islamophobia: "I had someone rip off my hijab (circa 2006). Post 9/11 I was called a terrorist and told to go back to my country. More recently, the comments are rooted in racism but more micro-aggressions disguised as compliments. 'Your English is so good.' Another is the assumption that as a fellow academic my assessments are automatically biased, as opposed to the 'blank slate' of a white colleague" .

The emotional impact of being falsely accused or stereotyped was described as intense and long-lasting: "When I was arguing with this Zionist girl... she was justifying what was happening in Gaza and implying that I am a terrorist or terrorist sympathizer, it made me so, so, so mad that I could not sleep that entire night. I was afraid of coming to campus in October 2023...

Several participants reported feeling isolated and anxious in public or workplace environments. One described the anxiety of speaking out about Palestine: "I proposed to give a talk about Palestine at my workplace. While I received positive feedback, I was very anxious and stressed because everyone was ignoring the genocide... I lost friends after the 1991 Gulf War and 9/11, so I expected bad experiences again, but I had over 100 people at my talks and everyone was curious and respectful. Still, the genocide continues, and I do feel isolated as an Arab American".

Other responses emphasized the cumulative psychological effects of constant microaggressions and war-related trauma: "Mostly by micro aggressions, being triggered and people not understanding the PTSD that comes from growing up in a war zone. And just constant exposure to everything going on, and feeling like the world intentionally continues to ignore and go on".

Many respondents connected their stress and anxiety to recent political events, especially the Gaza genocide: "Getting harassed after October 7 made me start to feel like I wasn't totally human. I felt stressed out and defensive... It was a combination of the genocide and people saying it was okay for us to die or making excuses for it. It made me feel crazy".

The difficulty of discussing Palestine openly without being marginalized was also a common theme: "Calling the genocide in Palestine 'a complicated issue' by people I regularly interact with at work and otherwise admire and respect".Several participants highlighted harassment and exclusion even within their families or communities: "Part of my husband's family cut us off because of our stance against the Gaza Genocide, and accusations that we were supporting terrorism. We were banned from family holidays, which took a toll on our mental health".

Others spoke of the ongoing stress caused by dehumanization and fear for visibly Arab family members: "The months following the start of the genocide in Gaza have been extremely distressing to witness and feel how easy it is for the media and Americans to dehumanize Arabs. I feel worried for my dad and sister who look more visibly Arab than I do, causing a lot of anxiety".

The pervasive nature of this stress was reflected by one participant who expressed the difficulty of isolating a single event: "It's overwhelming. It feels everywhere. I wish I could speak specifically about one instance but it's so layered and multifaceted. It's pervasive. And the feeling can be acute or low grade but always there".

Incidents of discrimination in professional or institutional contexts were also reported: "After October 7 and Israel's most recent assault on Gaza, a high ranking manager at my workplace sent an email about watching the Hamas attacks, no mention of decades of oppression or Israel's disproportionate response. I spoke up and received support but it caused me stress and anxiety".

Finally, some noted the impact on travel and daily life: "Being told I was on a no-fly list when I am not on any such list (in 2024) by a flight crew member because they wanted to give my seat away kind of dampened my vacation".

Overall, these experiences reveal the profound and multifaceted ways anti-Arab racism undermines mental health well-being. The narratives highlight the ongoing stress, anxiety, social isolation, and fear that many Arab Americans endure, often exacerbated by political events and societal marginalization.

5.3 Coping Strategies for Stress Caused by Anti-Arab Racism

When asked about how they generally cope with stress and whether their strategies have been effective, the 29 respondents who answered this question shared a range of approaches that combine physical, social, emotional, and spiritual methods.

Many participants emphasized physical activity as a key coping mechanism. One respondent stated, "I usually go running. That is the most effective. I also cope with stress [by] eating, which has been harmful for my physical health". Another highlighted outdoor exercise and music as helpful distractions: "Physical activity outdoors is helpful. I am also heavily invested in my work which is a distraction sometimes. Music is also very helpful". Others mentioned walking, gardening, or staying busy with tasks as ways to manage stress: "I focus on tasks I can accomplish and I try to not think about things I cannot control. I also read a lot, and I volunteer for Palestinian and Arab academic or charity projects. I try to sleep well, and I do walk or work in my garden a few times a week".

Social support featured prominently in many responses. Several participants described talking to friends or family as crucial: "Talking to friends somehow", and "I talk to a therapist monthly and with friends weekly. I also exercise a few times a week". Two respondents emphasized the importance of a "like-minded" community: "I just like to be in community with like minded people and try to educate others". Another said, "Seek support from like minded people and supporters of the Palestinian cause".

Spirituality and prayer were also common themes. Respondents reported using religious practices as a source of comfort: "Pray, ask Allah for everything I want", "Prayer and

supplications", and "Reading the Quran". Meditation and mindfulness were mentioned alongside faith practices: "Somewhat. I exercise, eat healthy, go to therapy, practice mindfulness and meditation", and "Prayers, meditation and exercise".

Creative outlets and hobbies also helped several participants cope. One shared, "I try to dive into my hobbies, creating and painting. I have also been making an effort to be more active in my local community", while another said, "I avoid, zone out with TV, maybe go on a walk".

Some participants used a more cognitive approach, focusing on what they can control and employing distraction when necessary: "It's a mixed approach. If I can, I try to alleviate the source of stress. I remind myself that there's only so much I can control. I use distraction if needed. I try to talk to like-minded people if possible". Others noted the variability of their coping: "Depends on the day", and "I just feel it and wait for it to pass I guess".

Overall, therapy was identified as helpful by three respondents: "I talk to a therapist, which does help sometimes. I also do somatic centering practices to feel connected to my dignity and ancestral resilience. They are effective tools when I am able to remember to use them", and "I talk to a therapist monthly and with friend weekly".

These diverse coping strategies illustrate the multifaceted ways Arab Americans manage the psychological stress related to anti-Arab racism, blending physical activity, social connection, spirituality, creative expression, and professional mental health support to sustain their well-being.

As highlighted earlier, studies such as Abou-Ziab (2016), Aldwin (2014), and Kleinman (1987) emphasize the critical role of culture in shaping how Arab Americans perceive stress, interpret mental health challenges, and choose coping strategies, particularly in the context of family expectations, acculturation pressures, and balancing Arab and American values. Similarly, Wolfers and Utz (2022) demonstrate that social media can serve not only as a source of stress but also as a valuable tool for seeking support, expressing emotions, and connecting with like-minded communities. The experiences shared by my Arab American interviewees and survey participants align with these findings, revealing that cultural values guide their coping approaches and that social media often provides both opportunities for solidarity and challenges, depending on the nature of interactions and content encountered.

5.4 Access to and Utilization of Mental Health Services Among Arab Americans

The survey results reveal important insights about Arab Americans' access to mental health services in the United States and their patterns of utilization. Among respondents, most reported having full mental health insurance coverage, while others indicated limited, partial, or uncertain coverage, as illustrated in Figure 5.5

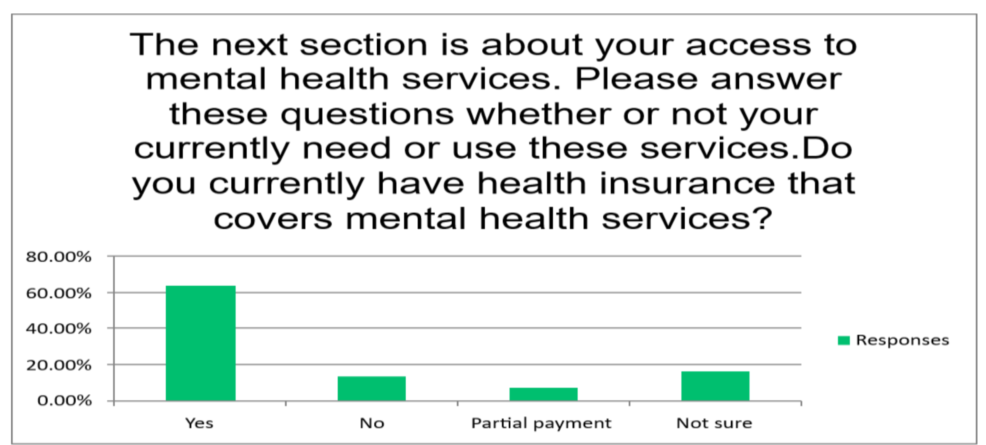

Figure 5.5Mental Health Insurance Coverage Among Arab American Respondents

Despite this relatively high rate of reported insurance coverage, actual utilization of mental health services remains low among these respondents. Only a minority of respondents sought appropriate mental health services for issues related to anti-Arab racism, highlighting barriers beyond insurance coverage, as illustrated in Figure 5.6

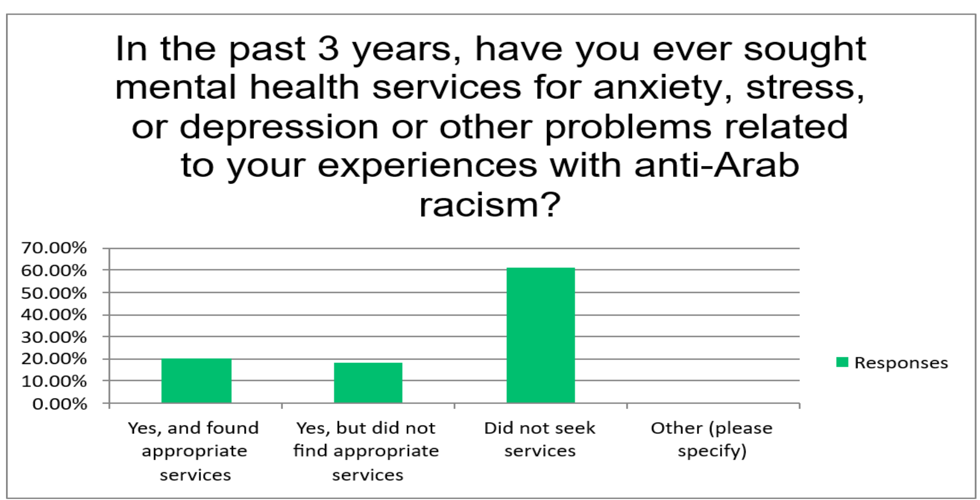

Figure 5.6 Mental Health Service Use Among Arab Americans

Further exploring these barriers, the survey asked if respondents ever felt the need for mental health support but did not seek professional services. Among the 27 participants answering this question, 26% reported times when they needed support but did not pursue professional help, while 74% did not face such a situation.

Those who did not seek mental health services were asked to identify their reasons. The most common barrier, reported by 71% of these respondents, was the concern that culturally sensitive providers would not be available. Additionally, 43% preferred to seek help from friends and family instead of professionals, and an equal percentage cited being too busy or lacking time as a reason for not seeking services. Financial barriers also existed but were less frequently cited, with 14% indicating a lack of insurance or inability to afford care. Social stigma played a role as well, as 43% expressed concern that friends or family would disapprove of mental health treatment.

These findings indicate that while many Arab Americans may have insurance coverage for mental health services, multiple social, cultural, and practical barriers hinder their ability or willingness or perceived need to access these services. The preference for informal support networks, concerns about cultural sensitivity, and stigma within their communities suggest a complex interplay of factors affecting mental health care utilization among Arab Americans facing racism-related stress. Addressing these barriers through culturally competent care and community education could improve access and outcomes for this population.

5.5 Access and Barriers to Mental Health Services

When asked what might encourage or make it easier for participants to access mental health services in the future, responses varied but highlighted some clear themes. Several respondents emphasized the importance of cultural understanding and representation, such as finding “an Arab-American provider” or “someone who would understand the cultural and political” context. Practical barriers like insurance and availability were also mentioned: “Have access to mental health service via my insurance”, “Availability, advice & referral”, and “Universal healthcare”. Others noted that encouragement from close ones would be significant: “A family member’s or close friend’s encouragement”. Cost remained an obstacle, with one respondent simply stating, “If it was free”.

Among those who did not find the mental health services they needed, the primary issue was a lack of culturally sensitive providers, with 100% of this subgroup citing this as a reason (Q39). Several shared experiences illustrate this problem starkly: “I was assumed to be Israeli by 2 therapists I saw... that made me never go back”, and “My therapist was absolutely ignorant about the Palestinians struggle and couldn’t understand how someone who has a history of such memory can even function”. Another described discomfort when a therapist asked, “do you think me being Jewish/Israeli is going to be a problem for you?”, highlighting tensions around provider identity and trust.

5.6 Satisfaction and Experience with Mental Health Services

Among respondents who provided feedback, most were somewhat satisfied with mental health services, with smaller numbers reporting little or high satisfaction, as illustrated in Figure 5.7. Descriptions of experiences varied: some found therapy helpful—“I speak to my therapist and counselor once a week. We do talk therapy, CBT and EMDR”—while others encountered systemic issues: “I like my current therapists, but the system is generally quite corrupt, and still built on money making and insurance”. Cultural competence was uneven, as one shared, “I did not feel that the therapist I met with was culturally competent or even able to identify with what I was experiencing”. However, others felt supported despite cultural differences: “My therapist is not Muslim or Arab but is very sympathetic to what I’m going through. I feel comfortable sharing everything I’m feeling with her...”

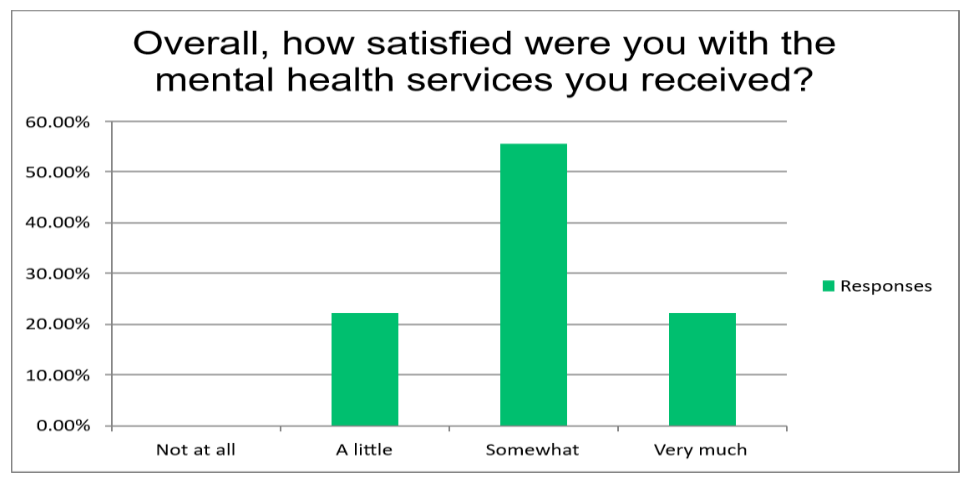

Figure 5.7 Satisfaction with Mental Health Services Among Arab American Respondents

5.7 Cultural Sensitivity and Relevance to Arab American Experiences

Responses on cultural sensitivity of care varied, with a minority feeling it was very or somewhat sensitive and the majority perceiving little or no cultural sensitivity, as illustrated in Figure 5.8. Participants explained these perspectives in detail. One respondent noted, “No. It comes up every now and then and is not the main reason why I seek therapy but I’m sure it plays a role on my subconscious mind”. Another raised concerns about stereotyping: “Sometimes my therapist used to want to bring gender analysis into how I examine my life... it felt a little racist when it came to discussing my family and marriage dynamics”. Others pointed out the lack of understanding around the Palestinian experience: “I felt the doctors and treatment I faced was insensitive to me being Palestinian in general...”, and “mental health professionals have been influenced heavily by the notion that Arabs are radicalized if they express opposition to US policy...”. Some acknowledged that non-Arab therapists can meet client needs if sensitive: “Yes. Though I think it’s wonderful to have Arab therapists, I also think that it is possible for non-Arabs to meet client needs...”

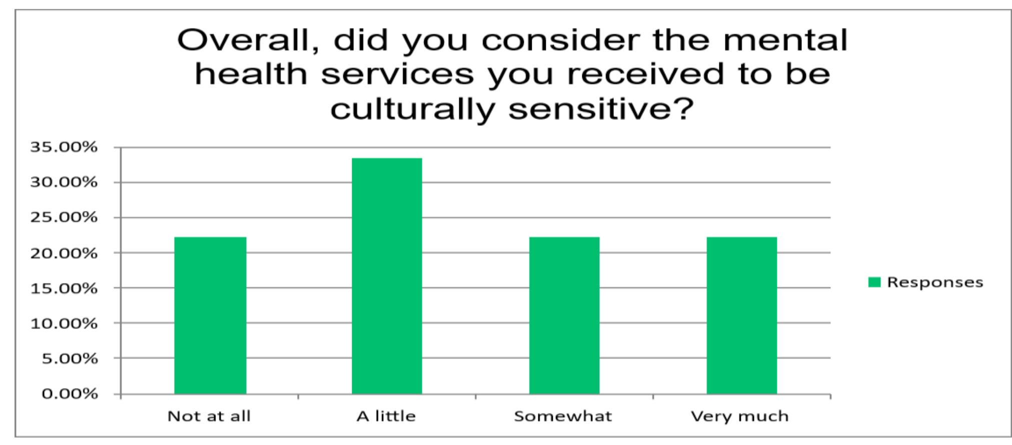

Figure 5.8 Perceived Cultural Sensitivity of Mental Health Care Among Arab Americans

5.8 Impact of Racism on Identity and Sense of Safety

Regarding the broader impact of racism on participants' identity and feelings of safety, most respondents experienced negative effects. Responses indicate that anti-Arab racism has a substantial negative impact on identity and sense of safety for many Arab Americans, as illustrated in Figure 5.9

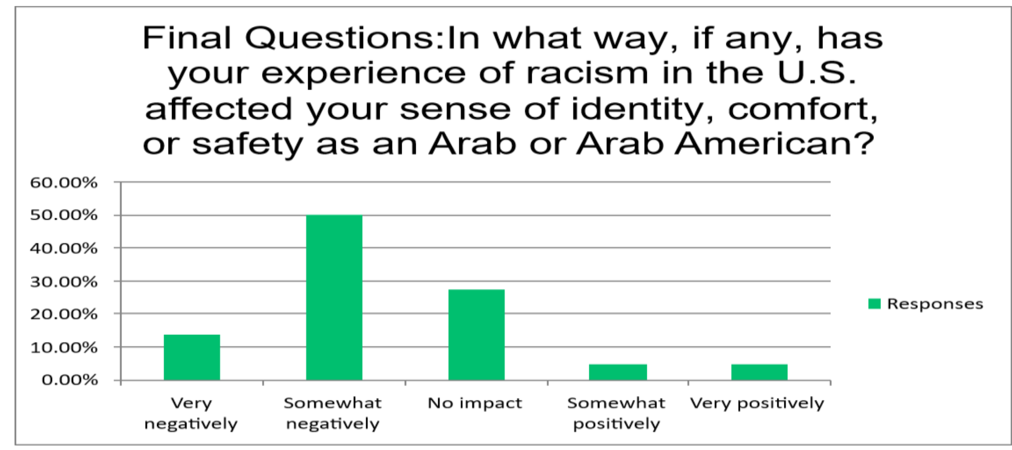

Figure 5.9 : Impact of Anti-Arab Racism on Identity and Sense of Safety Among Arab Americans

5.9 Additional Reflections on Identity, Racism, and Mental Health

Several respondents used the space to elaborate on the complex relationship between their Arab identity, experiences of racism, and mental health. A strong sense of cultural pride and activism emerged from some, as one participant stated, "I have a strong sense of identity in my culture and heritage as an Arab and Muslim American. I am very vocal about the nuances and try to get people to understand racism, colonialism, and anti-Arab / Islamophobia policies". However, this pride often coexists with feelings of vulnerability and exclusion. Another shared, "I feel proud and happy to be Palestinian, but constantly feel under attack, aware that most people do not agree or support that my people should live safely. I often feel othered even in NYC".

The impact of appearance and perceived identity was noted by some respondents, affecting how they navigate racism and community belonging. One person reflected on their experience growing up post-9/11, explaining, "As I've gotten older, I've accepted that I can't really fit in with a fully Arab crowd, so I accept that I am Arab American... One major caveat to all these answers in this survey is that I do not look 'Arab.' I am blond, so most people think I'm white". Another participant spoke to the intersectionality of identity: "I am a gay Arab man. While anti Arab racism is decreasing in LGBT spaces in the US, I've found being both gay and Arab as being a big barrier to finding appropriate mental health care".

Some respondents described the broader societal context as shaped by misinformation and systemic injustice, with one explaining, “Our typical professional associations... are distorting reality by attacking Arab Americans for objecting to our repeated targeting by governments for genocide, war, sanctions, incarceration and collective punishment”. Others expressed hope about generational shifts, stating, “I feel like people now are more aware of what racism is and try not to be racist to anyone. This generation respects differences and is able to accept others”.

The significance of community support was emphasized by a few respondents who felt their networks helped buffer the impact of racism: “I have a strong sense of identity and a strong supportive network/community... I don’t interact much with non-Arabs/Muslims”. The concern for younger generations was also raised: “I think as parents the experience is more centered around our children who don’t know how to position themselves vis a vis the global political landscape and stereotypes of Arabs and Muslims generally and Palestinians specifically”. Lastly, the direct experience of racial profiling was noted, “I am almost always singled out for extra screening and I know it’s because of my hijab”.

These reflections reveal the layered, multifaceted nature of Arab American identity shaped by external racism, internal community dynamics, and intersectional challenges, all of which impact mental health and well-being in nuanced ways.

5.10 Gender, Religion, and Hijab: A Comparative Analysis of Coping Strategies Among Arab Americans

Regarding experiences of racism, Muslim women wearing hijab (n=6) reported feeling targeted more frequently over the past three years compared to other groups, with about 60% experiencing racism “sometimes” or more often. Muslim women without hijab reported slightly less frequent experiences, with a more balanced spread between “sometimes” and “rarely.” Christian respondents generally reported experiencing racism less often, though many still noted incidents in workplace and community settings. In terms of context, Christian respondents most commonly experienced racism at work and in personal relationships, while Muslim women, especially those with hijab, identified social media and community organizations as significant settings for discrimination.

Male participants also reported frequent encounters with racism, though the distribution differed. Among the 15 Arab American men surveyed, 13 responded to the question about frequency of racist experiences. None of the male respondents reported “always” or “usually” experiencing racism, yet all of them acknowledged at least occasional exposure—five participants (38%) stated “sometimes,” and eight (62%) said “rarely.” The absence of “never” underscores that all male respondents had been affected by racism to some degree. By contrast, female respondents were more likely to report consistent exposure, with 21% (7 out of 34) stating that they “always” or “usually” experienced racism, demonstrating a gendered difference in frequency and intensity.

When asked about the specific settings in which racism occurred, responses again revealed notable distinctions. For men, social media emerged as the most common site of racial encounters, with 54% reporting incidents online, followed closely by workplaces (46%). Other reported settings included schools, neighborhoods, personal relationships, and community organizations. For women, racism was more widespread across multiple domains: nearly 80% identified social media as a source of hostility, 75% reported workplace discrimination, and 63% cited experiences in educational settings. This suggests that women—particularly those visibly identifiable as Muslim—face broader and more frequent exposure to racism in both public and private contexts.

The written testimonies provided deeper insight into these numbers. Nine male participants described their experiences, often revolving around stereotyping, marginalization, and being judged through a racialized or politicized lens. Many noted profiling based on their names, accents, or presumed ties to Islam, regardless of their actual background. Several emphasized subtle but persistent microaggressions in the workplace or difficulties in personal relationships due to their Arab identity. In contrast, the 18 female respondents who provided testimonies highlighted how racism was often compounded by sexism. Many described misogynistic comments linking hijab-wearing to weakness and submission, while others faced criticism for parenting practices rooted in cultural or religious traditions. Palestinian identity in particular surfaced as a trigger for exclusion, with women reporting professional discrimination, stereotyping, and accusations of terrorism. These accounts revealed how gender, religion, and national identity intersected to create distinct burdens for women compared to men.

Beyond offline experiences, social media played a significant role in shaping perceptions of discrimination across groups. While all participants reported daily use, Muslim women with hijab were most likely to encounter anti-Arab or Islamophobic content "always" or "usually" (75%), followed by Muslim women without hijab (50%), and Christians (40%). Male respondents also reflected this trend: out of 12 who answered, none had "never" seen such content, with most encountering it at least "sometimes." Political events were widely understood to fuel these trends. In fact, nearly all male respondents (11 out of 12) agreed that events such as 9/11, the 2017 "Muslim Ban," the October 7th, 2023 war, and the 2025 ICE deportation policies had heightened the presence of anti-Arab racism online, underscoring the close link between politics and digital hostility.

The psychological toll of these experiences was substantial, though it varied across groups. Muslim women with hijab reported the highest rates of stress, anxiety, and depression, with 60% identifying these effects frequently or occasionally. Muslim women without hijab reported somewhat less impact, while Christian respondents displayed a more even split between frequent and rare experiences of stress or anxiety. Among men, two out of twelve reported frequent stress or depression, three experienced it occasionally, six rarely, and one never. However, when asked about specific challenges, the majority reported stress (7), anger (7), anxiety (4), and sleep problems

(3), with only two reporting none—illustrating that racism left psychological effects on nearly every respondent, even if not always recognized as severe.

Coping strategies provided further insight into how Arab Americans respond to these challenges. Male respondents leaned toward informal, self-guided approaches: most talked with family or friends, engaged in physical activity, or used hobbies and work as distractions. Only a small number sought therapy or community support, and time constraints were identified as the primary barrier for those who felt they needed professional help but did not seek it. Female respondents, on the other hand, demonstrated a wider range of coping methods. Among the 29 who answered, the majority turned to physical activity (72%) and family/friend support (66%), while others relied on hobbies, social media avoidance, mindfulness, or counseling. Importantly, many women described faith-based coping—praying, reading the Quran, or drawing strength from religious beliefs—as central to their resilience.

Access to mental health services further highlighted disparities across groups. Christian respondents reported the highest rates of insurance coverage and usage of mental health services, with most finding them culturally sensitive. Muslim women, particularly those without hijab, reported greater difficulty in accessing culturally responsive care and lower rates of satisfaction. Males, despite largely having insurance coverage, rarely sought mental health services—only two did so, with one reporting a positive and culturally sensitive experience. For most, the combination of time constraints, reliance on informal coping, and perhaps a lack of perceived need contributed to the low rates of formal help-seeking.

Taken together, these findings show that while Arab Americans consistently encounter racism—especially in the context of social media—the frequency, severity, and coping responses differ significantly across gender, religion, and visibility (e.g., wearing the hijab). Women, particularly Muslim women with hijab, reported more frequent and intense discrimination, often compounded by sexism and cultural stereotyping. Men, while less likely to report frequent encounters, still experienced pervasive stress and microaggressions. Across groups, informal and faith-based coping strategies were more common than professional mental health services, reflecting both cultural attitudes and structural barriers to care.

Chapter Six

In-Depth Interviews

6.1 Introduction

As a follow-up to the survey on anti-Arab racism and its impact on the mental health and daily lives of Arab Americans, participants were invited to take part in a more detailed, one-on-one interview. Those who were interested had the option to leave their email addresses for further contact. More than ten respondents expressed willingness to be interviewed, and email communication was initiated with all of them. However, due to scheduling constraints and time limitations, I was able to conduct eight interviews initially, but ultimately, only five full interviews were completed and included in this study. These interviews provided in-depth, personal insights that helped contextualize and deepen the findings from the survey.

Each interview was customized based on the participant's original responses to the survey to ensure a more personalized and relevant discussion. These semi-structured interviews allowed for a deeper exploration of their lived experiences, coping strategies, and reflections on identity, racism, and mental health. To protect the privacy of all participants, pseudonyms are used throughout the following section.

6.2 Interview with Sophy - Palestinian American Activist

Sophy, an 18-year-old Arab American woman, shared her deeply personal experiences with racism, identity, and mental health as part of this study. Born in the United States, she moved to Jerusalem at the age of 12 and lived in Ramallah before relocating to New York due to the impact of the Israeli occupation on her family. Her narrative reflects the

complexities of navigating a bicultural identity in the U.S. while holding strong ties to Palestine. Adding to her multifaceted identity, Sophy's father is an Arab Muslim and her mother is Jewish, which has further shaped her experiences of belonging, cultural tension, and how she is perceived in both Arab and American contexts.

Growing up Arab in the U.S. presented unique challenges for Sophy. "I always felt multicultural, cross-cultural—a little too foreign for Palestine, a little too foreign for the U.S.," she explained. After moving to New York in 2016, her identity was often met with ignorance. "The kids at school didn't know where Palestine was. They thought it was Pakistan. They asked if I came from huts. Ignorant questions were the hardest," she recounted. Despite these experiences, Sophy expressed pride in her cultural background: "I am very proud to be Palestinian and that my family took the time and energy to teach us about our culture."

Sophy has encountered racism in both social and institutional settings. She recounted an incident in Massachusetts where she was told not to speak about being Palestinian. "When I talked about my life, they told me, 'We don't want to hear about that,'" she said. Similarly, her pro-Palestinian social media activity has led to threats: "They sent me long messages like 'you are a Jew hater,' 'you're gonna die,' 'why are you so racist?'" She noted the inaction of school authorities in response to these threats, resulting in a loss of safety and friendships.

These experiences triggered deep emotional responses. "Mostly a lot of loneliness… I don't think people understand that it is racism. It's a specific kind of racism because of an actively occupied place," she said. Sophy described the alienation she felt: "Even in America, I am nervous to tell people [I'm Palestinian]." Institutional racism was particularly apparent in her interactions with mental health services. At 13, she participated in a mental health program during which her mother was told that Sophy had said something "inappropriate"—the word being "Palestine." She later quit a job after hearing customers at a jazz event make violent remarks: "'Let's kill them all,' Let's make this count.'"

Sophy spoke about the emotional toll of events like the October 7th war. "All of it was hate," she said. "When I tell them I'm Palestinian, they don't say, 'Tell me about it.' They turn around or shy away." She also referenced the shooting of her close friend Hisham Awartani in Vermont, noting, "The world doesn't care. There is no safety."

On social media, she feels both constrained and empowered. While she posts about Palestine, she confessed, "I cannot post everything and that is upsetting." Palestinians, she said, are portrayed as "ruthless, violent, irrational, and uncooperative." Although she sometimes censors herself online, she acknowledged, "I think I have the privilege to be in America and posting."

Mental health remains a critical area of concern for Sophy. She frequently experiences stress and anxiety related to racism and war. "I don't think people know what it feels like—another 100 people die," she said tearfully. At work, she feels the need to hide her

identity: “If they knew who I was, they would not talk to me again.” Sophy has PTSD and is hypervigilant, particularly due to childhood trauma in Ramallah. “I used to hear gunshots every night… I stopped listening to music because the beat would trigger me.”

Despite ongoing therapy, the journey has been difficult. “I had a lot of doctors I stopped seeing because they are racist or insensitive,” she said. Sophy emphasized the challenge of finding a therapist who could understand her unique blend of war-related PTSD, OCD, and depression. “I cannot be the one educating my doctor,” she added. While she is grateful for her insurance, which is provided through her father’s work in education, she noted that many of her friends lack such access.

Cultural misunderstandings further complicate her healing process. Her father, for example, was skeptical about therapy, asking, “Why not just buy a book or talk to us?” Sophy acknowledged the tension: “He thinks my mom is too easy on me and that’s why I’m so sensitive.”

Racism has affected her sense of belonging, leaving her feeling excluded from both white and broader people-of-color communities. “They made me feel that Palestinians are a third category—white people, people of color, and Palestinians.” Nonetheless, she finds strength in her cultural heritage: “Palestinians are so resilient and hold on to their values. I’m proud of the food, the music, embroidery—everything is gorgeous.”

Sophy finds support in activism and community. She attends Palestinian youth conferences, protests, and cultural events. “Those spaces really help,” she said. A moment of pride for her is seeing her father regularly advocate for peace and equal rights: “Fire against fire doesn’t cancel out. I’m very proud of how he preaches it the right way.”

In closing, Sophy expressed a powerful wish: “I want people to know we can’t share who we are. We can’t speak Arabic, we can’t hold our flag, we can’t express who we are—then you’ll be shot and paralyzed.” Reflecting on her life story, she recounted a moment from an OCD treatment program where a Jewish friend panicked upon learning her father was Muslim. “I had to sit beside her and say, ‘It’s okay, my dad won’t come to harm you.’” These experiences—both in Palestine and the U.S.—have shaped a complex and painful journey through identity, belonging, and survival.

6.3 Interview with Leen – Palestinian American Mother & NGO Founder

Leen, a practicing Muslim of Palestinian descent, 56 years old, shared her multifaceted experiences of identity, racism, and resilience as part of this follow-up interview. Although she was born in Bangladesh, Leen clarified that she only lived there for a year and has no memory of the country. “Then we moved to Yemen, and at 10 years old, I moved to Houston, Texas, basically for education. I lived in Houston for 20 years, then I moved to Massachusetts 20 years ago,” she explained. Her familial roots are deeply

Palestinian: “My family is originally from a village called Salameh in the lands of 1948. My mother’s family was displaced to Nablus, and my father’s to a refugee camp near Al-Lydd. Eventually, both ended up in Jordan.”

Despite growing up in the U.S., Leen’s Arab and American identities have been profoundly shaped by geopolitical developments. “What’s happening in Gaza has ruined my life—and everybody’s life. It changed my definition of who I am right now,” she said, describing how political conflict influences her sense of self. She emphasized that “it’s never been easy to be a Muslim Arab in America,” adding, “Since I was 10 years old, the racism has always been there.” She recalled how any time a political conflict involving Muslims arose, Arabs were generalized, stigmatized, and referred to as “jihadis or terrorists.”

Leen finds strength and connection through her work in nonprofit organizations. “We formed this NGO in Massachusetts to highlight who we are. There was conflict around how we present ourselves—we want to show that we’re part of the fabric of the United States.” She reflected on historical erasure: “Muslims landed on American shores with the Spaniards, and many caretakers of their animals were from North Africa… we’ve been here for a while, maybe invisible or afraid to talk.” Her mission has been to normalize Arab American presence and celebrate Arabic culture publicly.

Her son’s experience with racism underscored how persistent these prejudices are. “My son was called a terrorist because he had a Palestinian sticker on his water bottle,” Leen recounted. “It was very disappointing… all the work we’ve done over the years, and people still think this way.” The incident provoked anger and memories of similar experiences she endured, particularly during times of Middle Eastern conflict. “When kids at school say, ‘Let’s bomb them all,’ it’s deeply hurtful.”

Even within the broader Arab community, Leen noted instances of internalized bias. She recalled a visit from Arab Christian friends from Lebanon who were shocked by her home. “They said, ‘Muslims live like this?’ It just shows you racism can come from surprising places.” She emphasized the need for introspection within Arab communities: “We have racism among ourselves too.”

Microaggressions have been a constant throughout her life. “We always have to explain ourselves,” Leen noted, especially after events like the rise of ISIS. “People ask me, ‘Why is this happening?’ as if I speak for all Muslims. My kids experience this too.” She finds the question “Where are you really from?” especially exhausting. “I say I’m from Houston, and they go, ‘No, really.’ I don’t have time for that.” Leen feels foreign to both the Arab world and American society. “They tell us, ‘Don’t hyphenate,’ but they’re the ones who do it. It’s offensive.”

Recent events, particularly the Gaza war, have had a profound emotional impact. “It has changed me quite a bit. I feel like my life is on hold. I wake up and go to sleep watching the news. If I eat or rest, I feel guilt—we left our people behind,” she said tearfully. Leen feels disillusioned with American politics. “We try to talk to elected officials, but

they do what they want. Most people in the U.S. don't want this war, but nothing changes."

Social media has intensified these feelings. "When Obama ran for president, people said, 'He's a Muslim, but he's good.' That 'but' says it all," she explained. She referenced the online abuse faced by public figures like Zohran Mamdani, pointing out the use of racial and Islamophobic tropes. "They question our loyalty. Their loyalty is never questioned. We're all supposed to be Americans here, right?" Leen has become more active online since October 7th. "I became an Instagram addict just to follow news from Gaza. I stopped watching CNN and BBC. They ignore our story."

While Leen is vocal online, she acknowledges the risks. "They try to ruin your reputation, people lose jobs… for younger people, it's dangerous. But I'm near retirement, so I can do a little more." She finds solace in connecting with like-minded individuals. "We all have depression and anxiety. There's reverse migration happening too—our mental health is gone."

Despite frequent stress, Leen has not sought therapy. "It's not fear. I just feel they won't understand me." She explained that cultural differences, not stigma, are the main barrier. "I've heard of Arab therapists in Massachusetts, but I haven't looked them up. I'm very Americanized in some ways, but I don't think therapy will help. I'll feel better when this [Gaza war] ends."

Coping strategies include physical activity and community. "Long walks, yoga, exercising—those help. I don't know how to take care of my mind, but I can take care of my body." Talking with supportive friends has also been crucial. "I avoid people I have to explain things to. It's stressful. I stick with peace activists and likeminded friends."

Leen emphasized that age has brought clarity and resilience. "When I was younger, things affected me more. But after losing my mom and surviving cancer, I just don't care what people think. I am who I am." She finds grounding in cultural connections and spiritual spaces. "Being in Jordan helps, people are so nice here. Also, when I go to the mosque and the imam prays for Palestine—that means a lot."

In her work with nonprofit organizations, Leen has found purpose. "It's empowering to build the infrastructure for our kids through art and culture. We started late, but it's powerful." Moments of cultural pride sustain her: "I'm proud every day—of our artists, musicians, people like Nai Barghouti. Despite everything, we're doing incredible work in the U.S."

Leen closed with a reflection on the media's role in perpetuating racism. "The media is a mouthpiece for political agendas. They dehumanize us, show only violence, never our music or art." She remains committed to long-term change. "Progress is slow but sure. It hasn't been easy, but we've built a good community."

When asked to sum up her journey, Leen cited a pivotal experience: “Getting sick when I was 29 changed everything. I realized I could die anytime, and I wanted to create something meaningful for my kids in this country. That’s what led me to nonprofit work.”

6.4 Interview with Professor Muna – Palestinian American Mother & Activist

Muna, a Palestinian Arab American, was born and raised in the United States, specifically in Texas, but maintains strong familial ties to Jerusalem. Reflecting on her identity, she stated, “Today I identify as Palestinian Arab American,” a self-conception shaped by complex family dynamics and cross-cultural influences.

Raised between two religious traditions—her mother being a Baptist from Texas and her father a Muslim from Jerusalem—Muna described her early spiritual experience as one marked by inconsistency and inner conflict. “I have a sense of higher power… but since I was a kid, I felt inconsistency because I was living between two religions.” Her father, she noted, had encountered her mother in the Baptist church during a period of religious exploration. These experiences left her questioning traditional frameworks: “Religion has always been on top of my mind, but I also feel that there are many inconsistencies.”

Cultural divergence within her household extended beyond religion. She explained, “Culture is a mental framework, and if it’s not aligned, it’s uncomfortable.” Her mother’s small-town upbringing instilled strict American Baptist values, while her father, a Palestinian displaced after the Nakba, brought a distinct Arab worldview shaped by life in Kuwait and the diaspora. “Being between these two frameworks was difficult,” she added.

Muna recounted a particularly distressing incident in 2024 when she helped organize an academic panel on Palestine. “It wasn’t an official college panel, but the college allowed us to hold it as an outside event for both students and the community,” she explained. After the event was advertised on social media, she received hate calls accusing her and the panelists of antisemitism. The DEI director supported her, telling her, “We believe in free speech and I’m on your side. We will not cancel this panel.” Nevertheless, the event drew police attention, and one individual was arrested in the parking lot, presumably in response to safety concerns.

Muna expressed frustration over the apathy she encountered in her social circles regarding ongoing violence in Palestine. “Almost all my social circle, people I see every day—even my book club—ignore the genocide, and this is a kind of racism,” she said. This silence, she argued, reflects “internal racism—you know so much already, but you try not to be aware of how others view what is happening.”

She described the racism she encounters as subtle and systemic rather than overt: “It’s not about face-to-face racism. It’s more a lack of awareness, a lack of empathy.” This disconnect was even evident within her own family, particularly during the Gulf War in 1991. Her mother, despite earlier sympathies with the Palestinian cause, once said in anger, “Your father is as stupid as Saddam Hussein.” These family dynamics deepened her inner conflict, especially when her sister joined a Zionist church after suffering personal tragedy. “She lost her baby, and she was searching for support,” Muna noted. “My father once said, ‘I tried with the first one, then gave up with the rest,’” referring to efforts to pass down Palestinian heritage.

Muna frequently encounters anti-Arab and Islamophobic content online. Early on, she attempted to challenge such narratives: “In 2016 or before, I tried to provide information and change their minds, until I realized that’s a waste of time.” She now redirects her energy to educational writing and community work, finding platforms like X and Facebook particularly toxic.

She suspects some of the vitriol is generated by bots or organized campaigns. “If you have certain words in your post, the hate comes quickly,” she explained. Despite the toxicity, she finds solace in following Palestine-focused accounts and organizing efforts. “There are many voices out there giving help,” she said, adding that she also runs a web magazine that publishes Arab and Palestinian poets.

Organizing events about Palestine has taken a mental toll on Muna. “Behind the scenes, people are scared. This is what I’ve learned. People lost their jobs. A Chicago boy was killed. I was anxious all the time that I will have nobody to talk to,” she shared. While she finds strength in meaningful work and supportive networks, the isolation remains palpable. “I stay silent a lot, but use my voice where it is more effective.”

She identifies anxiety, depression, and anger as frequent emotional responses to her experiences with racism and online hate. “If I look at too much online hate… I don’t know if it’s a real person or a bot, so I learned to stay away.” She also described feeling anxiety in unfamiliar settings until she can “get a sense of what’s happening.”

When seeking mental health support, Muna found it difficult to locate culturally and politically aware providers. “In 2017, I was laid off, and the college paid for counseling, but I realized the first counselor was wrong for me. The second one listened to my perspective.” She emphasized the importance of political context in mental health: “This is a society that has been propagandized.”

Muna uses a range of strategies to manage stress: reading, gardening, walking, and volunteering. But when overwhelmed, “Taking a nap first—go to bed, let your mind be clear—because we can’t function if we are tired.” She participates in book clubs that explore political themes, and she finds healing in helping Gaza-focused organizations. “Coping is when I find meaningful work to help Gaza,” she reflected.

Her life experiences, particularly after 9/11 and the Gulf War, have made her both "more guarded about who I let into my life" and more outspoken. "At this point, it's the people who should know better and refuse to open their minds," she explained.

Despite having health insurance, Muna has struggled to find culturally competent care. She believes mental health services should start with the patient's voice: "It has to start with a written statement from the patient about what they feel the exact issue is. It should be patient-centered, not counselor-centered." She highlighted the work of a Palestinian professor who developed a counseling booklet for humanitarian workers, rooted in indigenous Palestinian values. "It started with: what does the patient care about? Not: I have a framework and I'm going to impose it on you."

She criticized Western psychological models as part of an imperial framework: "We need you to fit into this imperialist society… instead of saying your feelings and questions are normal."

Muna shared that racism has affected her sense of identity and safety. "My ex-husband and I used to receive hate messages," she recounted. Yet, there are moments of affirmation: "When many people came to my presentation, I realized I had given people a safe place to ask questions. That was affirming."

She believes that true understanding requires empathy rooted in shared humanity: "Every human got the way they are because of different experiences. If they grew up in the same circumstances, they would say and do the same things."

In her final reflections, Muna shared hope for a more honest global discourse. "Because of globalization and communication, this is such a challenging time. We're finding the truth about a lot—about how humanity can be. There were many lies. I hope it will evolve into something more balanced."

6.5 Interview with Prof. Haya - Egyptian American Activist

Haya ,36-year-old Egyptian Arab American woman, was born in Saudi Arabia and currently resides in Omaha, Nebraska. She has been living in the United States for 10 years. Haya holds a doctoral or professional degree and is married to a partner of Western/European ethnicity who is also Muslim. Haya herself identifies as Muslim and observes various religious practices, including daily prayers (Salah), fasting during Ramadan, attending the mosque, and reading or reciting the Qur'an. She does not wear any religious symbols regularly, nor does she wear the hijab. Haya's parents and grandparents were all born in Egypt, indicating a strong Arab heritage rooted in North Africa.

As part of the follow-up interviews for the study on anti-Arab racism in America, Haya offered an in-depth and reflective account of her life and identity in the United States. Though born in Saudi, she clarified, "I was just born in Saudi for a few finishes but grew up completely in Egypt." Her transition to the U.S. began a decade ago, spending

five years in Illinois before moving to Omaha, Nebraska, where she has resided for the past five years.

When asked about her adjustment to life in the Midwest, Haya expressed mixed feelings. While she feels “comfortable enough to call the U.S. [her] second home,” she remains ambivalent about full assimilation. She emphasized that assimilation is often hindered by racial and cultural barriers: “In the U.S., you are not allowed to fully assimilate… They keep dehumanizing my people… We are always the bad Arabs, the bad Muslims, the bad Middle Easterners, and the bad Africans.” For Haya, assimilation requires self-erasure, an impossible cost that she refuses to pay.

Haya's identity is shaped dynamically by context. “In Egypt, I never thought about my identity… But in the U.S., I am the Arab. I am the Muslim.” While she traditionally identified herself as Arab, Muslim, and African, she observed that her Muslim and Arab identities became more salient in the United States. Her religiosity, too, deepened after migration. Haya described her religious practices—daily prayers, fasting during Ramadan, Qur’anic recitation, and mosque attendance—as “a grounding practice in a very terrifying and changing world… the only thing I have control over.” She linked this spiritual discipline to preserving her identity under pressure.

Racism, both overt and subtle, has profoundly shaped Haya’s sense of safety and belonging in the U.S. She shared a harrowing incident from Illinois where a man nearly ran her over with his car while yelling, “F*** you, go back home.” Though she does not wear the hijab, Haya was shaken by the violence and racial profiling. “That was the first time in my life I felt unsafe in a place,” she recalled. She described the lingering psychological toll: “Since then, when someone does something mean or aggressive, I ask myself: are you doing this because of how I look?”

More recently, her support for Palestine triggered a familial rupture. A longstanding photo she had posted with the caption “The land is ours” became a flashpoint after October 7th. Her white American brother-in-law demanded she delete it, accusing her of supporting terrorism and disinviting her family from holiday gatherings. Haya reflected, “If people who know me very well are capable of seeing me this way, what expectations can I have of colleagues or strangers?” She described this moment as “a hit in the back in my journey of assimilation,” reinforcing her sense of isolation.

Among the settings where she encounters racism, personal relationships have been the most painful: “People who know you very well and still do not see you as a human.” This betrayal led to a loss of trust and emotional withdrawal. “If you don’t see me as a human,” she said, “why do I bother to build a relationship?”

Social media has become another hostile space. Haya recounted that after posting pro-Palestinian content, she was repeatedly harassed online: “Someone would comment to my post and tag my university and ask them to fire that Muslim terrorist.” While these attacks are often anonymous, the fear is real. “If they think this way about Gazan children,” she noted, “imagine how they think about the rest of us.” Nevertheless, she

has refused to censor herself: “I told my husband’s family, you can unfollow me, but don’t even try [to silence me].”

Haya’s experience of targeted online harassment after posting pro-Palestinian content illustrates the dynamics highlighted in The Social Dilemma (2020). The documentary shows how social media algorithms promote content that aligns with users’ prior behaviors, reinforcing existing beliefs while filtering out alternative perspectives. In Haya’s case, the algorithm likely amplified hostile and Islamophobic content, exposing her repeatedly to aggressive comments and threats. This cycle of algorithm-driven exposure not only intensified her sense of vulnerability but also demonstrates how platform design can exacerbate polarization and discrimination, confirming the documentary’s argument that social media environments can actively magnify harmful social behaviors and biases.

When dealing with the emotional consequences of racism, Haya turns to activism and community, reflects Meaning-making coping strategies, as described by Ching, S. S., Martinson, I. M., & Wong, T. K. (2012). “Go running, go protest,” she said, describing her approach to stress. She is part of a diverse protest group addressing issues from Gaza to Black Lives Matter. “That’s been my family… it’s part of coping and surviving.” Although she has sought therapy in Egypt, she has avoided U.S.-based mental health services due to concerns about cultural insensitivity. “I can’t take it that somebody who was trained in the U.S. tells me to stop watching the news… we have very different cultures.” For her, culturally sensitive care would include therapists who understand systemic racism, who acknowledge the emotional toll of global injustice, and who can communicate with her in Arabic: “I don’t want to complain in English… I want to express my deepest insecurities to someone in Arabic.”

Despite the challenges, Haya has found moments of belonging and pride. She formed connections with Indigenous communities in Omaha and was moved when Arab students at her university sought her mentorship. “That was a moment of pride… they are proud to be from a region with diversity and celebrate it.”

Reflecting on her experience as an Arab Muslim woman in the U.S., Haya wished more people understood that “we are not all oppressed, we don’t need saving.” She challenged Western stereotypes: “Do we have sexism in the Arab world? Of course. But to be singled out—that we have it and others don’t—is false.” She urged for greater education about the diversity and complexity of Arab identities, stating, “I wish people were more educated about how diverse our Arab world is.”

Through her words, Haya offered a powerful testimony of resilience, resistance, and the enduring complexities of identity in the face of systemic racism.

6.6 Interview with Dr. Maryam – Palestinian American Mother & Activist

Maryam, a 62-year-old Arab American woman originally from Jericho, Palestine, has lived in the United States for over two decades. Currently residing in Fresno, California, she describes herself as “born Muslim but [I] believe in all faiths,” embracing a spiritually inclusive worldview shaped by decades of experience. “I’ve worked almost 50 years,” she recalls. “I remember working the next day I stepped into the U.S.” Through this long journey, her understanding of religion has evolved: “People forget the main reason why we have religions—it’s a way of life. Some are using it in politics or as ideology and forget its real purpose.”

Although culturally Muslim, Maryam doesn’t wear the hijab and sometimes faces judgment for that both from within and outside her community. “Some Muslims don’t even say salaam to me,” she says. “When I ask why, they reply, ‘Sorry, we thought you’re not Muslim.’” She recalls being questioned about her identity: “People always ask, ‘Are you Christian?’ just because of how I dress.” Still, she proudly wears symbols that express both her faith and heritage. “I have a necklace with the word ‘Allah,’ a dress made of keffiyeh—it shapes my identity and where I come from. I even wear a scarf to show modesty,” she explains, before adding, “I’ve never seen any book that says cover your hair—but which is more important, wearing hijab or wearing tight clothes?”

Maryam also speaks openly about the pain of internalized judgment from her own family. “Every time I meet with my brothers and family, there’s love—but also dysfunction,” she says. “They criticize my clothes. I ask, why wear so many layers in this heat?” She’s learned to trust her instincts: “They do what they think is right. I do what I think is right.”

Racism from the broader society has also been a recurring wound. She recounts protestors yelling “go back to where you came from.” Her response is powerful: “I would gladly do that. But first, get the hell out of my country.” Born in Jericho and displaced in 1967 from the village of Deir Dibwan, she carries the scars of war and displacement. “When you grow up in war situations, you never recover.”

Maryam critiques the American narrative of “acceptable” Arab and Muslim behavior. “Are you familiar with the words assimilation, acculturation, and isolation?” she asks pointedly. “I’m not an isolationist like many in my family. I acculturate, and the more you acculturate, the more you fit. But some people fake it to fit in—and I criticize that hypocrisy.”

Much of Maryam’s pain is rooted in what she sees as U.S. complicity in global violence, particularly in Palestine. “My greatest stress doesn’t come from racism directly, but from what U.S. policies enable,” she says. “Knowing my taxes fund weapons used in Gaza—that’s devastating.” After October 7, she sought therapy in the U.S., but the experience left her feeling unheard and accused. “The therapist started

asking me so many questions about Hamas, like I'm one of them," she says. "I wrote to the hospital chief and said, 'How dare he ask me things like that? I came here to talk about my personal problems.'"

The hospital eventually referred her to another provider. "She had a mental health degree, but not much awareness. She didn't follow the news. She didn't understand my context. These people go to school, earn thousands, and know nothing about where their patients come from," Maryam laments. "That's why I think it's useless to go to therapy here—they don't have any knowledge of the history behind certain behaviors."

Maryam believes therapy could be helpful if therapists took time to understand cultural and political trauma. "They need to read books, visit websites, learn both for and against the backgrounds of their patients. Don't just treat symptoms—dig deeper. Let the patient explore and choose."

She also points to the failure of language and cultural nuance in therapy. "Some Arabic phrases mean something totally different in English. The therapist misunderstood and then labeled me. It was frustrating."

Despite these experiences, Maryam finds purpose and resilience through work and giving. "I stay focused on helping children of war—like me. I'm not a senator. I can't change foreign policy. But this is the least I can do," she says. These acts of giving offer real healing. "Knowing I did the best I can—that brings peace."

Maryam also feels pride in moments where she can educate others and share knowledge. "There aren't many of those moments, but when they come, they matter," she notes.

When asked what she'd want Americans to better understand, she replies with heartfelt conviction: "I don't want them to build tolerance. I want them to build understanding. We are all God's creation—we all have the same bones, the same fingers, and feet. We may have different blood types, but in the end, we're made of dust, and to dust we return."

With a note of humor and sincerity, she adds: "So when you see me in my thoob, don't ask if it's Halloween. Learn to ask the right questions. Understand that I don't have to be like you to be your friend."

In parting, Maryam offers her philosophy: "Our differences are what make us unique. That's what I strive for—every single day."

Chapter Seven

Conclusions and Recommendations

This study applied an intersectional approach as its conceptual framework to examine how systemic biases and overlapping forms of oppression shape the lived experiences of Arab Americans. This framework helped highlight how multiple identities - such as ethnicity, religion, and gender—interact to intensify racism and discrimination, particularly during or after major political events worldwide. Political crises, such as wars in the Middle East or acts of violence involving Arabs or Muslims, often trigger surges in hate speech, stereotyping, and xenophobia both online and offline. By applying this framework, the study captured how intersecting factors such as racialization, Islamophobia, and gendered stereotypes can compound the psychological burden faced by Arab American communities.

The study hypothesized that anti-Arab racism on social media significantly contributes to increased stress, anxiety, and depression among Arab Americans, and the findings strongly support this claim. In-depth interviews with participants revealed a consistent pattern of psychological harm linked to their exposure to anti-Arab racism - particularly in digital spaces where hateful comments, stereotypes, and threats are often normalized or ignored. Participants described emotional exhaustion, social withdrawal, low self-esteem, and fear of expressing their identity in public or online, especially during politically sensitive periods.

The findings from both the interviews and surveys- where participants reported experiences such as workplace discrimination, hate speech on social media, and other forms of prejudice-align closely with national data. A particularly striking trend was the rise in discrimination focused on anti-Palestinian racism and targeting supporters of the Palestinian cause, which became especially evident after the October 7th 2025 conflict between Israel and Hamas. Participants revealed that, beyond broader anti-Arab prejudice, hostility directed specifically at Palestinians and those expressing solidarity with Palestine intensified both online—through hate speech, harassment, and misinformation-and offline, in daily interactions that reinforced feelings of exclusion and vulnerability. This evidence supports the report by the Council on American-Islamic Relations (CAIR), which I have illustrated earlier, documenting a sharp rise in

anti-Muslim and anti-Palestinian hate incidents in the U.S. In the last three months of 2023 alone, CAIR received 3,578 complaints, reflecting a 178% increase compared to the same period in 2022. These included 662 cases of workplace discrimination, 472 reports of hate crimes, and 448 incidents of discrimination in education. The accounts from this study illustrate how political events not only amplify existing racist attitudes but also create an environment where supporting Palestine is stigmatized and targeted. As recent scholarship has noted, such stigmatization often works by framing Palestinian perspectives as illegitimate or antisemitic, thereby marginalizing Palestinian voices in public and academic discourse. (Ayyash, 2023, p.953) Similarly, in Europe, scholars have highlighted how a moral panic around displays of solidarity with Palestine has been fomented, leading to the suppression of artists, academics, and public figures who question official narratives. (Fekete, 2024, p. 99) Importantly, scholars have recently conceptualized anti-Palestinian racism as a distinct form of racism expressed through mechanisms such as racial gaslighting, denial of the Nakba, and the framing of Palestinians as "terrorist" or "anti-democratic" (Bakan & Abu-Laban, 2022, p. 508).
Taken together, these dynamics underscore that anti-Palestinian racism is not only a social and political phenomenon but also a structural one. These findings underscore the deep mental health toll of racism on Arab Americans, particularly Palestinians, as they navigate heightened stress, anxiety, and alienation during times of political crisis. By bringing these experiences to light, this research emphasizes the urgent need for greater awareness, culturally competent mental health support, and strategies to counter anti-Arab and anti-Palestinian racism in both digital and social spheres.

The interviewees employed a variety of coping strategies, echoing Abou-Ziab's (2016) findings that Arab American immigrants often rely on both active and other forms of coping to manage the stress and emotional toll of racism, sometimes as substitutes for formal therapy. However, my study revealed that Arab Americans not only use active coping strategies but also employ emotion-focused, problem-focused, social support, religious, and meaning-making approaches. For example, Sophy engages in problem-focused coping by finding resilience through activism, youth conferences, and cultural events, while also practicing emotion-focused coping by distracting herself with drawing as a way to regulate her emotions. Leen relies on active coping through physical and mindful activities such as walking, yoga, and exercising, and additionally employs emotion-focused coping by avoiding news to protect her mental well-being. Muna integrates active and meaning-making coping strategies, including reading, gardening, walking, volunteering, and participating in politically themed book clubs, while also prioritizing rest when overwhelmed. Haya applies problem-focused coping by engaging in activism and community participation, particularly through groups addressing social and political issues, and also makes use of social support coping by seeking strength and comfort from her community. Maryam combines meaning-making coping, by focusing on helping children affected by war and educating others as a source of fulfillment and healing, with religious coping through prayer, which not only provides spiritual comfort and resilience but also serves as a central strategy of emotional regulation. These examples demonstrate the diverse range of coping

mechanisms Arab Americans adopt to navigate stress and acculturative challenges, highlighting how such strategies may reduce reliance on formal mental health services. Despite the mental health challenges participants reported, many noted limited or no use of mental health services. As I have mentioned earlier in my literature review, Aloud and Rathur (2009) emphasized that what may be considered a mental health problem requiring professional treatment in one society may be viewed simply as a routine hassle of daily living in another. This reinforces the idea that cultural perceptions play a significant role in shaping whether individuals seek professional help or rely on alternative coping strategies. In line with this, the findings from my surveys and interviews highlight the importance of culturally sensitive mental health services that acknowledge these cultural differences. Additionally, as mentioned earlier, a study by Nassar-McMillan and Hakim-Larson (2003) examines the importance of culturally competent counseling for Arab Americans by exploring how cultural identity, acculturation stress, stigma, and sociopolitical factors shape their mental health experiences and perceptions of therapy. Together, these findings underscore the need for further research, particularly through interviews with Arab American mental health professionals who can provide valuable insight into how therapy can be made culturally and contextually responsive, as well as the importance of incorporating anti-racism training for mental health professionals.

Future studies should explore how to better train therapists and psychiatrists to understand the cultural backgrounds, intergenerational trauma, and displacement - related experiences of Arab communities. Interviewing more Arab American professionals in the mental health field will help identify best practices for culturally sensitive care and outreach. Additionally, it is essential to explore how therapeutic approaches can be adapted to account for language preferences, religious values, family dynamics, and the unique challenges faced by visibly identifiable Arabs, such as women in hijab. As Muna, one of the interviewees, suggested, effective care must begin with the patient's voice: "It has to start with a written statement from the patient about what they feel the exact issue is. It should be patient-centered, not counselor-centered." She highlighted the work of a Palestinian professor who developed a counseling booklet for humanitarian workers, rooted in indigenous Palestinian values, where care begins not with rigid frameworks but with what the patient actually cares about.

Emotional barriers, particularly mistrust in mental health institutions in the U.S., alongside the shortage of Arabic-speaking or culturally competent therapists, emerged as the most significant obstacles for participants. While stigma and concerns about confidentiality within close-knit communities were mentioned, they did not appear to be the primary barriers in this study. Similarly, lack of insurance coverage was not identified as a major challenge. Instead, participants emphasized that systemic shortcomings - especially the unavailability of culturally responsive care—combined with feelings of mistrust, often prevented them from accessing the mental health support they needed.

Community-centered solutions are crucial. Mental health education campaigns should be designed and delivered in collaboration with trusted Arab American organizations, religious leaders, and local advocates. Increasing visibility of Arab American therapists, creating safe spaces for dialogue, and normalizing therapy as a form of strength rather than shame can help transform community attitudes over time. As reflected in my interviews, people are becoming more aware of the importance of mental health; however, more work is still needed to challenge deep-rooted stigma. For example, one interviewee shared that although she chose to go to therapy, her father did not fully accept it when he found out, highlighting the generational and cultural barriers that continue to shape attitudes toward mental health.

Notably, some participants reported not experiencing racism, which suggests variability in experiences within the Arab American community. These responses highlight the need for further research to explore why certain individuals perceive or encounter less discrimination, and whether factors such as geographic location, socioeconomic status, generational background, appearance, or social networks play a protective role. Investigating these differences could provide a more nuanced understanding of resilience and variation in exposure to racism, and inform the development of targeted interventions that address the diverse experiences of Arab Americans.

Finally, there is an urgent need to examine how the psychological toll of anti-Arab racism manifests in physical health outcomes. Conditions such as high blood pressure, cardiovascular disease, chronic fatigue, gastrointestinal problems, and sleep disturbances may be intricately tied to the stress and trauma associated with racism. Future interdisciplinary research should link physical and mental health to produce a more complete understanding of how discrimination affects the whole person and to support the development of more holistic, accessible, and equitable healthcare systems for Arab Americans and other marginalized communities.

One limitation of this study is the relatively small sample size, which constrains the ability to generalize the findings to the broader Arab American population. While the survey and interviews provided valuable insights into participants' experiences, the number of respondents was not sufficient to capture the full diversity of perspectives across different age groups, socioeconomic backgrounds, and geographic regions. Time constraints further limited the scope of the research, particularly in recruiting a wider pool of participants and conducting follow-up interviews that might have allowed for a deeper exploration of emerging themes. These constraints also reduced opportunities to triangulate findings using additional methods such as focus groups or longitudinal data collection.

In addition to these sampling limitations, as mentioned earlier, participant concerns about personal and professional consequences posed another challenge to data collection. Several individuals who were approached to complete the survey expressed fear that their responses could negatively affect their employment or immigration status

in the United States. This apprehension likely reduced participation from certain segments of the Arab American community, particularly those in vulnerable job positions or with uncertain residency status. Consequently, the sample may underrepresent individuals who experience heightened anxiety or stress due to discrimination but were unwilling to disclose these experiences, potentially limiting insight into the most acute mental health impacts of anti-Arab racism. Although the online and anonymous nature of the survey sought to mitigate these concerns, the fear of potential repercussions remained a notable factor affecting response rates and the overall generalizability of the findings.

Despite these limitations, the study provides an important contribution by highlighting patterns of discrimination, mental health challenges, and coping strategies that are often underrepresented in existing literature, offering a foundation for future research with larger and more diverse samples.

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تأثير العنصرية ضد العرب في وسائل التواصل الاجتماعي على الصحة النفسية والحياة اليومية للأمريكيين العرب (2016–2025)

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الملخص

تتناول هذه الدراسة التأثيرات النفسية للعنصرية الموجهة ضد العرب على الأمريكيين من أصول عربية، مع التركيز على المجتمعات الفلسطينية بعد أحداث 7 أكتوبر، ودور وسائل التواصل الاجتماعي في تضخيم التمييزالعنصري. باستخدام منهج تقاطعي، تفحص الدراسة كيفية تقاطع العرق والدين والجنس مع الانحيازات النظامية لتزيد من مستويات التوتر والقلق والانطواء الاجتماعي، لا سيما خلال الأحداث السياسية الحساسة. تكشف البيانات المستخلصة من الاستبيانات والمقابلات المعمقة عن محدودية اللجوء إلى خدمات الصحة النفسية الرسمية، ويرجع ذلك بشكل رئيسي إلى انعدام الثقة الثقافية، وحواجز اللغة، ونقص الرعاية المتوافقة ثقافيًا. غالبًا ما اعتمد المشاركون على استراتيجيات مواجهة نشطة—مثل ممارسة الرياضة، بالإضافة الي المشاركة المجتمعية، والنشاط التطوعي، والعمل ذي المعنى—كبدائل للعلاج النفسي، بما يتوافق مع ما أوردته أبو ذياب (2016). وتسلط النتائج الضوء على الحاجة إلى خدمات صحية نفسية متجاوبة ثقافيًا ومتمركزة حول المريض، تراعي اللغة والقيم الدينية وديناميات الأسرة والصدمات عبر الأجيال. كما تؤكد الدراسة على أهمية التدخلات المجتمعية، وزيادة ظهور المعالجين النفسيين من الأمريكيين العرب، وتوفير برامج تدريبية لمكافحة العنصرية لمهنيي الصحة النفسية. ورغم صغر حجم العينة، تقدم الدراسة رؤى قيمة حول التحديات النفسية واستراتيجيات المواجهة والعوائق الهيكلية التي يواجهها الأمريكيون العرب، مما يشكل أساسًا للبحوث المستقبلية والتدخلات المستندة إلى الحساسية الثقافية.

الكلمات المفتاحية :العنصرية ضد العرب، العنصرية ضد الفلسطينيين، العرب الأمريكيون، العنصرية عبر وسائل التواصل الاجتماعي، التقاطعية، الفوارق في الصحة النفسية، استراتيجيات التكيف.