

Fear None Frighten None: Sikhs in the U.S. and Gender Based Violence

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This article locates itself in the broader, even existential, questions facing the anti-violence movement in the U.S.: how can community-based alternatives be supported to interrupt cycles of family violence, and how can mainstream service providers operate from a place of cultural humility without replicating the dynamics of control survivors of family violence seek to escape? We focus on the experience of the Sikh community in the U.S. as an instructive example. This community is too often lost under larger identity umbrellas and very seldom studied on its own. We draw from the experience of Sikh Family Center, which was created 15 years ago and remains the only U.S. organization focused on gender justice in the U.S. Sikh community. We explore the evidence-based grassroots methodology, the community data, and the barriers and programming successes of the Center. We note that there are structural and systemic reasons for why the scope and context of pernicious violence faced by Sikhs is often overlooked, which then results in discussions

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of violent incidents in the Sikh community being stripped of context, nuance, and completeness. While violence exists, there is also resistance and strength in the collectivist Sikh culture. Only with this complete picture could attempts at “culturally-informed” services sufficiently reach the most vulnerable survivors and engage the broader community in change.

I. INTRODUCTION

‘I’m that girl who everyone is talking about.’

This statement, followed by the caller’s first name and phone number, was the entirety of the very first voicemail left on Sikh Family Center’s Helpline in early 2011.

We called her back to learn more and provide support, but what was clear from the beginning was that a young Sikh woman’s trauma had somehow become everyone’s business in her community. In the days and weeks that followed the first voicemail, we learned that the young woman had been sexually assaulted by an older acquaintance. We learned about her parents’ staunch support for her and their refusal to ‘compromise’ with the harm-doer and his powerful allies (the young woman’s struggling immigrant family was offered better jobs as well as money in exchange for their silence). We learned that one of the harm-doer’s powerful allies was an older woman, respected in the local community for her spirituality, who took the caller—without informing the caller where they were going—to a health clinic and scheduled her an appointment for an abortion. We learned that detectives of the local police department had pled ‘confusion’ because they claimed they could not understand the caller or her parents’ spoken English. One detective had even revealed details the survivor had shared with them in confidence with other ‘Seek’ (mispronouncing Sikh¹) community leaders who had called the precinct asking for information, unbeknownst to the survivor.

At the same time, we learned that another older woman in the caller’s community had advised her instead to consider all her options and encouraged her to call Sikh Family Center’s Helpline. This woman had saved a flyer about our brand new Helpline after interacting with us at an earlier community health event; we had explained the Helpline model, including how we never disclose to others whether someone calls the Helpline—we are committed to breaking cycles of toxic gossip through full privacy.² And as the caller shared all of these details and more, we began marshalling resources and support for her, including the assistance of a male volunteer who spoke with her father in privacy, giving him room to process; a Sikh psychiatrist who met with the caller; and our Sikh Family Center crisis counselor who talked with her about

¹ ‘Sikh’ is pronounced *Si-kh* (less emphasis on i), with aspiration at the end.

² The Sikh Family Center Helpline ever since provides private, free, peer-counseling and non-emergency support for community members in Punjabi and English.

how to navigate law enforcement, which the survivor and her family had first trusted but later did not want to engage after the erosion of their trust.

'We may have been attacked, but my Sikhi prohibits me from bowing to oppressors. . . . I just want to stand by my daughter.'

The survivor's father shared the above with a Sikh Family Center volunteer. Although the person who caused the young girl grave harm and the people who colluded with him were of the Sikh community, those who stood with the survivor and offered her staunch support were also of the Sikh community. While the survivor felt 'shame' and her parents spoke about 'dishonor,' they were all also very clear that the perpetrator was solely responsible for committing the dishonorable actions. While 'spirituality' was used as a cloak to try to coerce the survivor into having a non-consensual medical procedure and inflict further trauma, faith was also a guiding star for the survivor and her family.

Every survivor of gender-based violence Sikh Family Center has worked alongside is uniquely distinct in their experience of violence, family dynamics, sources of support, ideas of justice, concepts of closure, and trauma and healing. But despite these differences and diversities, our model responds to broad themes, which we highlight in this paper.

For an immigrant community that has had to make and remake itself many times over, often at great personal cost, there are deep reserves of resilience and creativity in the Sikh community. This strength is often tested, to its breaking point, due to various structural barriers and community misconceptions. Survivors often face misconceptions that cultural or communal 'stigma' and 'shame' and 'honor' is the leading reason for lack of support for survivors. This is an incomplete telling of the story. Survivors must navigate language barriers, cultural barriers, and system biases, contributing to their diverse levels of comfort interfacing with non-Sikh service providers and varying levels of success in accessing services. Fewer reliable resources are available to Sikh survivors that do not stereotype survivors, flatten their experience, or caricature their community. Those resources that do exist are often led by organizers within the Sikh community, many who identify as survivors themselves.

Part II of the paper introduces the Sikh faith tradition, often problematically conflated with entirely different religions or traditions. This misses the unique context of the Sikh way of life as well as the faith's stance on gender and justice; this context is critical, because it can be channeled both to reflect cultural familiarity with Sikh survivors as well as to mobilize positive community response, as we will detail in the sections that follow. The Sikh diaspora community first settled on the West Coast of the U.S. during World War I. Yet the community has either been treated as an obscurity—as it was by the detectives in the above situation—or as a target of xenophobia and racism, particularly after 9/11.

Part III explains the formation of the Sikh Family Center, the national community-based organization focused on gender justice for Sikhs in the U.S. This section highlights some of the ways in which Sikh Family Center has centered survivor experiences and cultural wisdom in our programming,

which refuses to romanticize any one approach or any one system, but does prioritize self-determination and safety for all involved. We challenge cultural defenses of violence and, at the same time, actively challenge stereotypical tropes about the culture of our peoples.

Part IV explains how our work has been evidence-based. Our data captures how many traumas that affect Sikhs in the U.S. are too often sidelined, silenced, and allowed to proliferate unchecked. The problem is pronounced for women facing various violences, within and outside their homes. The intergenerational cycles of interpersonal violence are further complicated by intergenerational traumas related to migration, racism, poverty, and State violence. Just as importantly, this section describes community strengths which promote survivor resilience despite the odds. There is much diversity within our own community and its myriad responses: there is violence but also resistance; there is complicity and bystanders but also a steadfast Sikh communal spirit of action; faith and culture have been weaponized against victim-survivors, but it has also been a source of limitless strength for survivors and their allies.

We always continue learning from the community in designing and driving our programmatic development, which, as Part V lays out, has necessarily been out-of-step with the life cycles of some of the larger anti-gender-based violence (GBV) movements in the U.S. We continue rejecting the hard binary other programs have come to promote between ‘survivor’ and ‘provider’—this is informed by Sikh philosophy and reaffirmed by noting the arc of professionalized anti-GBV services in the U.S. Keeping a global feminist approach, beyond U.S.-centrism, allows us to remember that tools of freedom for one person may well be weaponized to oppress another—for example, abortion, in the above scenario. We stand for the free choice of victim-survivors and believe that only by expanding the menu of available options and supporting informed decision-making can we achieve healthy transformative justice. Given the unique timeline of our community’s foray into formally organizing within the larger U.S. movement, we see our tactics as relevant to the larger movement, and also not bogged down by it. We engage with our siblings in the larger movement with humility, while insisting on cultural humility in return.

Sikh Family Center is proudly culturally-grounded and also enthusiastically engages in culture-change work. This poses no tension to us, as we carry the wisdom of our ancestors and Gurus: *Fear None, Frighten None* (as revealed by Guru Tegh Bahadur and enshrined at 1427 of Guru Granth Sahib). There are no exceptions for any person, any system, or any State.

II. SIKHS IN THE UNITED STATES: A COMMUNITY OF SURVIVORS

To better understand the complex and interlocking dynamics of gender-based violence, culture, and resilience in the Sikh community in the U.S. requires a foundational understanding of the theology, culture, traditions, and immigration

history of the Sikh people. Our description and explanation herein are by no means a complete map of the diverse community; it is a brief background primer into the underlying factors that contribute to Sikh survivorship.

a. Sikh faith praxis

The Sikh faith is considered the world's fifth largest faith tradition with 25 million people (Sikh Coalition, 2019). Most Sikhs live in Punjab, South Asia, on the Indian side since decolonization in 1947, from where the majority of U.S. Sikhs have migrated over the generations (Sikh Coalition, 2018). The Sikh faith originated in Punjab in 1469, when Guru Nanak established a community of followers that coalesced around key egalitarian principles, including the rejection of the centuries-old Hindu caste system and the instruction that all people earn an honest living, share their earnings with others, and remember Ik Ong-Kaar (One Almighty) in everything they do.

Enshrined in Sikh scripture is the underlying principle of equality, regardless of caste, gender, socioeconomic status, or other discriminating qualities: *O Nanak, no one is high or low. (Guru Granth Sahib, Ang 7)*

The Sikh faith preached a new way of life that was distinct from the prevailing faith traditions of the time and location, Hinduism and Islam. The revolutionary teachings of ten living Gurus were collected in the form of a sacred scripture, the eternal Guru, Guru Granth Sahib.

Importantly, the Sikh faith does not comport with Judeo-Christian distinctions between the religious and the secular. The Sikh Gurus emphasized a balanced lifestyle of 'miri and piri' that incorporated both spiritual and political connection. Further, while 'Sikhism' refers to a faith-community, its membership applies broadly to people who may identify culturally, if not spiritually, as Sikh and reflects a diverse community tied by shared traditions. Because of these unique dynamics, labeling Sikhi³ as a 'religion' alone, as understood in western culture, often falls short of capturing the nuance of the faith and the ways in which people identify with it. Sikhi is a way of life and Sikhs are a people and a culture with unique spiritual mandates, praxis, and community history.

Since 1469, the Sikh Gurus praised and amplified women's contributions to life and community, and spoke out against their degradation.

'Why speak ill of her? Kings are born from her. From a woman, a woman is born; without women, there would be none at all.' (Guru Granth Sahib, Ang 473)

However, despite this clear stance against gender inequality—including forbidding dowry, sati (a practice by which widowed women committed suicide on their husband's pyre), female infanticide, and exclusion of women from

³ Sikhi connotes the Sikh way of life; the people and their path. When called 'Sikhism' under Western influence, its definition is often limited to a spiritual faith system.

communal ceremonies—certain segments of the Sikh community continue to propagate traditional South Asian and Indian gender norms, while adhering to other Sikh teachings including the unique external Sikh identity, contributing to ongoing violence against women within the community (Singh, M., & Singh, A., 2022; Kaur M. (n.d.)). The indigenous gender dynamics in our Sikh community in fact worsened with subjugation, colonialism, industrialization, global capitalism, genocide, and migration.

Since 1699, Sikh tradition mandates maintaining external articles of faith intended to continuously remind Sikhs of their moral and spiritual commitments. The articles of faith, known as the Panj Kakkars (or ‘5 Ks’), form a distinctive Sikh uniform and include kesh (unshorn hair), kanga (a small comb), kara (a steel bangle), kirpan (a traditional sword), and kachera (under-shorts). Sikhs, both men and women, who cover their long hair with turbans, have adopted different turban styles reflecting their personal preferences. Like with any faith-based mandate, there are varying levels of adherence in maintaining the 5Ks and turbans in the Sikh community. But for Sikhs who carry them, these are not simply clothing or symbolic motifs that can be removed on demand: they are articles of love and commitment.

b. Immigration patterns of Sikhs in the U.S.

There are approximately 500,000 Sikhs in the U.S., though the census vastly undercounts the population for a variety of reasons, including the fact that in census reporting, selecting ‘Sikh’ is only available as a write-in option in the racial category (Sikh Coalition, 2023). The Asian Pacific Islander (API) community in the U.S. is the largest group of foreign-born immigrants (*Census Data & API Identities*, 2022), and Sikhs contribute to this rich tapestry through new migrations. At the same time, historic immigration trends mean that the U.S. is home to second, third, and fourth-generation Sikh Americans as well.

The late 1800s and early 1900s saw the first big wave of Sikh migrations to the U.S. during a time when Punjab bristled under British colonial rule. Many Sikhs first settled in California and Washington where they worked as laborers in farms, lumber mills, and other jobs that were available to them. Not too long after, in 1912, Sikhs built the first Sikh Gurudwara—a place of congregation for prayer, social gathering and community organizing—in Stockton, California. Another immigration wave in the 1960s brought professionally-trained Sikhs to the U.S. after the Immigration and Nationality Act of 1965 stipulated occupational preferences, per growing demands of the U.S. economy. Sikh engineers, doctors and other professionals entered the U.S. as well-trained but more economical white-collar labor.

While some Sikhs immigrated to the U.S. to expand their economic opportunities, others fled here as asylum-seekers, under threats of persecution. Sikhs are a minority in India and in the past four decades have experienced human rights abuses at the hands of the government, beginning in 1984 when then-prime minister Indra Gandhi ordered a military attack on

Sikh gurdwaras across Punjab, centered on the most revered place of worship for Sikhs, Darbar Sahib (known to foreigners as ‘Golden Temple’) (Kaur M., 2019). After PM Gandhi was assassinated by her Sikh bodyguards, widespread anti-Sikh pogroms erupted in several parts of India, sanctioned and in some cases carried out by state authorities (Mitta, M., & Phoolka, H. S., 2007). An armed conflict in Punjab in the subsequent decade left thousands more dead or unaccounted for, including through enforced disappearances and the ubiquitous secret cremations of the 1980s and ’90s. Today, repression in other guises—including transnational assassinations plots and killings (Human Rights Watch, 2023)—highlights continuing tensions between Punjabi and Sikh populations and the Indian State.

c. Racial targeting of Sikhs in the U.S.

Sikhs have long been targets of discrimination and hate in the U.S. because of their unique identity and distinctive appearance. Since 9/11, reported hate crimes against Sikhs in the U.S. increased during a surge of anti-turban sentiments, as did harassment, employment discrimination, and school bullying. In response to this uptick, Sikhs have organized to create powerful and important civil rights organizations across North America, such as Sikh Coalition and Sikh American Legal Deference and Education Fund. But xenophobia and racism against Sikhs have continued, at times leading to fatalities (Center for American Progress, 2015)⁴, and refueled most recently by racist discourse around migration policies and global crises. Continued misidentification and stereotyping of all turbaned Sikh bodies as ‘dangerous’—or at the least ‘conservative’ or ‘orthodox’—leaves many, especially Sikh males, in a hypervigilant state. According to the FBI’s data, Sikhs were among the top two most targeted faith groups for hate crimes across the country in 2021 (Sikh Coalition, 2022). That same year, a white gunman with extremist ties entered a FedEx facility in Indianapolis known for employing a high number of Punjabi Sikhs and killed eight people, including four Sikhs (Zhou, L., 2021).

Thus, even the concept of claiming survivorship is complicated for a community that finds its roots in the U.S. through waves of flight from colonialism, economic hardship, and state-sanctioned genocidal violence, while also facing escalating racism, xenophobia, and violence in the U.S.

“Everyone is a survivor, so why do these women suddenly want to bring more shame to their already vulnerable community?” is often the sentiment held by a community in which much emphasis is placed on the survival of the next generation.

⁴ In response to this violent mass murder, Sikh Family Center worked with community mental health experts and advocates to distribute resources in the local gurdwaras on mental health first aid, survivor guilt, and trauma-responses.

III. SIKH FAMILY CENTER: A COMMUNITY STRENGTHS-BASED RESPONSE

This section explores the formation, strategic approach, and impact of Sikh Family Center, the only U.S. organization focused on gender justice in the Sikh community.

Sikh Family Center is a national nonprofit organization in the U.S. that promotes community well-being with a particular focus on gender justice. We provide trauma-centered resources for victim-survivors of violence while organizing to change the social and cultural conditions that allow gendered violence to occur in the first place. Our training, outreach, and advocacy are grounded in cultural tradition, grassroots power, and intergenerational healing.

The mission statement of the Sikh Family Center has been word-smithed over the years, but as this part of the paper highlights, the driving motivations of the Sikh Family Center have remained consistent since we first gathered in 2009. We aim to strengthen the Sikh community from inside-out, while not neglecting the stereotypes that affect Sikhs from the outside-in. We are driven by the need to solidify a community-based response to gendered violence and trauma, in contrast to the more institutionalized gender justice movement in the U.S. today—and where, in a twist, we have found ourselves now modeling exactly what that the ‘mainstream’ movement has in its most recent iteration identified as most-necessary. Sikh Family Center continues to insist, for Sikhs and all communities, that not only must various victimizations be recognized and responded to with direct support and services, but in doing so, our individuality, creativity, and humanity must be respected and protected on its own terms, so as to truly advance a wider community without pervasive gender violence.

a. The ‘culture’ dog whistle: stereotypes & gender violence

‘What is the Sikh Position on Murder-Suicide?’

The journalist calling us expressed that the article she was writing would be an opportunity to get ‘your name out there’ and to highlight ‘what you are up against in your community, all those cultural reasons.’ She seemed proud of the ‘solidarity’ she was extending. But it became clear that this reporter was primarily seeking sound bites on how Sikh ‘culture’ and ‘religion’ could be implicated in a particularly heinous crime she was reporting, one perpetrated by a turbaned Sikh man. She had also immediately assumed that the obstacles we faced, as a gender justice organization, were primarily from our own community. And she would not be the last ally confounded by us not jumping at freely offered media coverage about our ‘cultural problem.’

All gendered violence is cultural, in that it exists across cultures. However, violence is not experienced similarly by all groups. Historically, it has

often been very difficult to fully explain ‘culture’ in work related to GBV; care is required to ensure that the role of ‘culture’ is neither overstated nor ignored.

There are various perils as well as possibilities of bringing ‘culture’ into the discussion. The biggest danger of ‘culture’ is that it becomes an excuse to usher in all biases against a group (Ahluwalia et al., 2015). Yet culture is context, and without this context the services, narratives, laws, and policies intended to support or protect survivors may have too many unintended negative consequences on marginalized cultures. Further, culture can be a source of strength, intertwining a person’s agency and identity. Assuming it is only an impediment and invoking it narrowly only in times of crisis is thus an error.

For example, on average, conservatively, 11 murder-suicides occur every single week in the United States. When these deaths take place in non-minoritized groups, the underlying factors are not coded as ‘cultural.’ This is a mistake.

In a discussion about culture and domestic violence that has aged remarkably—perhaps tellingly—well since it was first written, scholar Leti Volpp (Volpp, L., 2002) describes:

‘Usually when cultural explanations are given, a static and insular culture is blamed, detracting attention away from one’s limited access to services, or from the policies of the state. Thus, part of what I am arguing for here is an understanding of culture that does not strip away the economic and the political from its content.’

Understanding culture as shared norms within which people and institutions operate means that culture is not simply something carried by people of color. Culture influences what we assume to be ‘normal,’ and one culture’s norm or baseline may vary greatly from the next. Every police department has a culture, as does every academic institution; every feminist organization has its unique culture, as does every church.

Yet the word ‘culture’ gets used often as a dog whistle to connote something very specific to particular intended audiences. For example, service providers may be trained to look for ‘cultural considerations’ through the usual ‘cultural competency’ trainings. Seldom does this mean teaching White cultural considerations. The word is a stand-in for that which is marginalized: Brown communities, immigrant communities, sexual minorities, etc. It is similarly assumed that ‘accent’ does not include a mainstream U.S. accent, or that ‘American’ refers only to the United States. These shared assumptions are in fact mainstream U.S. culture.

Toward other cultures, especially those of people of color, the assumption is often that their norms are unchangeable and unquestionably applicable. In her advocacy and training, co-author Mallika Kaur often describes culture as a verb, an active state of being. Like ‘love,’ it is reflected by what we do, our praxis, and not only our words. It is not static.

To be sure, just as there are cultural assumptions about Brown people in visible and vocal U.S. mainstream, there are several cultural assumptions about White/Western people within a community such as Sikhs. 'This is not our culture,' is often used as a dog whistle by fellow Sikhs to attribute certain behaviors to entire swaths of White/Western 'Americans.' Examples of this include premarital sex and promiscuity, lack of interest in parenting children, lack of love and care for elderly. References to 'Western culture' may also specifically be used to police women, their choices, bodies, and voices, insisting on a monolithic culture of 'us,' that is different from a false monolith 'them' (Minow, M., 2000).

Is there a way to usefully talk about culture then?

Treating culture as a context that is changeable, complex, and not generalizable is a necessary first step. Viewing it as a dynamic changing set of patterns that intersect with other dynamic patterns is essential. For example, culture of the survivor's linguistic community may meet culture of the family court system may meet the culture of the police precinct the survivor is forced to engage, etc. We must stop using 'culture' as a cloak for all that we do not understand, cannot understand, or are biased against.

In our work, biases about who Sikhs are and what Sikhs believe come up aplenty: for example, the wrong but prevalent thinking that someone with a turban must be conservative, unaccepting, and unapproachable. On the other hand, other considerations are woefully underplayed: for example, not coming from a '911 culture,' where the State has an emergency response system. More generally, large umbrella references such as 'immigrant culture' are oversimplistic and often misleading and unhelpful. Generalizations render invisible the problematic power dynamics and biases within groups and thus too may reinforce harmful hierarchies for victims.

If culture is always coded as 'foreign' and somehow 'backward,' it is then no wonder that cultural minorities seem 'insular' to the mainstream. Sikh Family Center actively works to challenge these stereotypes, both through the services we provide and our approach.

b. Organization history and overview

All three words in Sikh Family Center's name are significant. 'Sikh' defines an under-served community for which we seek to fill a gap. It does not limit who we serve: it is antithetical to the basic tenants of Sikhi to turn away anyone who is vulnerable. 'Family' refers to all conceptions of family by birth, marriage, choice, feeling, as well as the metaphorical family, much beyond the biological, the large community, the 'kaum,' as per Sikh collectivist teachings. And 'center' refers both to our desire to be one central place that seeds more community organizing towards gender justice and wellness for all, as well as our commitment to place ourselves and our community at the center, instead of on the margins. This remains as essential today as when we first began organizing.

As the Sikh community remained focused on post-9/11 crises, inter-community issues such as gender-based violence continued to proliferate in shadows, putting the health and wellbeing of women and sexual minorities on hold again. The community's focus on educating others about 'who we are' often centered around Sikh men's turbans and the ability to practice faith safely. Left out of these conversations was how we can address safety within the home.

We first began organizing around addressing gendered violence within the Sikh community in 2009 through health clinics at gurdwaras, serving especially uninsured and underinsured people. Then, as community comfort, volunteer base, trust, and name recognition grew, Sikh Family Center started targeting its focus on GBV, which was highlighted as a persistent issue in our in-person conversations and needs assessment surveys (detailed in Part IV). Sikh Family Center became and remains the only agency focused on GBV in the Sikh community across North America.

Our organizational approach centered around three guiding principles as we began making the case that our community, too, needed specific, linguistically accessible and culturally aware resources and services. First, 'Resisting Essentialism—Gender & Cultural.' That is, refuting the assumption that all women, or all members of a cultural group, or even all women of a shared cultural group are alike and bound by an essential experience, 'independently of race, class, sexual orientation, and other realities of experience' (Harris, A. P., 1990). Second, 'Learning from Our Community.' As the next section details, we have done this continuously, recognizing the unique challenges and diversity, refusing to over-state challenges as unique only to (the often misunderstood) Sikh community. Third, 'Community-wide Services and Empowerment.' We have never limited our services, excluded any demographic, or thought of our work as 'charity' that focuses on only people experiencing poverty, new immigrants, or women: intra-community empowerment is sorely required for us all.

Up until 2017, Sikh Family Center was entirely volunteer-run. 'Over the years, I learned what it is like to truly be in *sangat* [community],' writes Harmit Kaur (Kaur, H., 2021), who became our first part-time staff person in 2017 and now serves as our Director of Operations. We believe in the power of community organizing and we do not wish to 'professionalize' services to the detriment of our grassroots base. But we also recognized the need for organizational growth and sustainability.

We are the only Sikh nonprofit organization that is entirely led by women. While we are supported by many community members who identify as male—including advisors, donors, and front-line volunteers—our current staff members, our fellows, and all but one of our board members are women of color, of the Sikh community, and most are bilingual (Punjabi-English; if not also in Hindi and Urdu). Survivor leadership is central to our mission, and in line with this ethos, our organization is made of women serving in various capacities who also identify as survivors of violence.

c. Sikh Family Center services and community supports

Sikh Family Center supports survivors and promotes community well-being using a three-prong approach: (1) violence intervention, (2) prevention education, and (3) training and technical assistance. In all our programs, we center survivor-expertise, intergenerational trauma and healing, and community-based solutions.

Intervention program

Our Helpline, the cornerstone of our Intervention Program, provides trauma-centered culturally-specific peer counseling for callers in Punjabi and English (and at times, in Hindi and Urdu). In addition to managing calls related to gender-based violence that involve various intersecting needs, the Helpline regularly receives calls discretely focused on matters related to mental health, substance abuse, intergenerational dialogue, housing crises, and more. We provide callers with ongoing emotional support, safety planning, triage, connection, and appropriate warm referrals to organizations with whom we have created a collaborative network—ensuring more non-Sikh ‘mainstream’ resource organizations are more responsive to Sikhs in need. Additionally, we assist callers with self-advocacy, supporting them in channeling their individual power, and recognizing they may choose various alternatives to police, courts, and even traditional shelters.

Our Helpline model is unique in the population it serves and the national model it employs. ‘Peer Counselors’ who respond to Helpline calls are volunteers with professional experience consisting of crisis response work in various capacities. Peer Counselors also undergo over 30 hours of additional training with Sikh Family Center, after which they make a time commitment to join the cohort for our Helpline. Peer counselors do not identify themselves as such anywhere publicly, maintaining anonymity with callers for the sake of caller comfort as well as peer counselor safety in a community that can often feel small due to its interconnectivity. Peer Counselors adhere to set (written and annually updated) protocols, participate in recurring group check-ins, and gather caller feedback through ‘empowerment surveys’ to track how well we are living up to our vision in every call.

Each call that comes through the Helpline is assigned both a lead Peer Counselor and a ‘Saheli’ (translates to friend) Peer Counselor. This peer support Saheli-system aims to lessen the risk of vicarious trauma involved in such work. Additionally, our network of peer counselors are located across the U.S., allowing us to tap into their vast networks and resources to respond to callers nationwide seeking support services. We cannot be state-specific, unlike other survivor support services in the U.S., as we provide a critical and unique resource for the Sikh community across the U.S. where none previously existed.

The epidemic of gendered and family violence, the curtailment of reproductive options, along with intersecting unmet mental health needs—exacerbated by the COVID pandemic—have worsened an imperfect storm in

the U.S., which is reflected in our Helpline traffic as well. In 2020, call volume to Sikh Family Center's Helpline was higher than any year prior and then doubled in 2021 and continued to increase in 2022 and 2023. What emerges clearly is that it matters for most survivors to know that the community closest to them cares about their well-being and empowerment, despite it often being someone from their community who harmed them. We help to restore, repair, and begin to heal that broken but desired trust with the Sikh community. When someone calls our Helpline seeking support for themselves or a family member, it is often their first step towards creating a plan of self-empowerment, safety, and autonomy. This is a part of healing.

Prevention education

Our violence prevention education work focuses on changing the social and cultural conditions that allow violence to occur in the first place. Our prevention work seeks to safely call for reflection on 'taboo' and 'sensitive' topics. For example, every October, to mark Domestic Violence Awareness Month in the U.S., Sikh Family Center holds a virtual ardaas, a standing prayer in Sikh tradition, inviting the community to join in collective remembrance of those killed by family violence. The success of our prophylactic campaigns, such as a series on Child Sexual Abuse and young people's body autonomy, with videos in Punjabi and English, signals community readiness for interrupting deadly cycles.

Our staff and seasoned volunteers have extensive experience creating, promoting, and inculcating leadership in younger community members. We create and facilitate prevention workshops across the country, using the 'Train the Trainer' model, focusing on generating discussions around healthy relationships for Sikh college students (Sikh Family Center, n.d.). From our evaluations we know that for many students, this is the first time an adult—or even a peer—from their own community has spoken with them openly about topics such as dating violence, consent, and respecting personal boundaries.

Using various creative outlets has also allowed deeper community engagement on issues related to GBV—for example, using participatory community theater models like 'Theater of the Oppressed' (Boal A., 1979). This theater experience blurs the lines between performer and audience, allowing audience members to engage with the subject matter by considering, even performing and practicing, how they would react or respond to complicated situations. We find this form of non-written, non-English-only, engagement also aligned with our organizational philosophy of respecting the multivalency of our community and not drawing hard lines between 'victims'/'survivors' and 'educators'/'providers'/'helpers.'

Our Suniyae ('listening') Circles provide safe, guided discussion spaces for community members to connect, share experiences, and express their visions for change. These sessions often include community members who self-identify as survivors, directly experience abuse, have caused harm, or witnessed abuse

as children. Further listening to the needs of the community, in late 2023, we began Project Khesi (which translates from Punjabi to a warm blanket or wrap, especially worn by men), to specifically call in men and boys, historically not included in discussions around preventing gendered violence.

Training and technical assistance

Finally, our training and technical assistance work for other Sikh organizations and non-Sikh service providers underscores not only the unique needs of the Sikh community, but also the diverse perspectives, abilities and possibilities of working with the Sikh community.⁵ We insist that service providers recognize our community as multifaceted rather than restricted by our brownness, foreignness, or uniqueness, and our advocacy unapologetically reflects this ethos. We have trained crisis lines, prosecutors, defense attorneys, children and family services staff, and death review committees towards systemic changes that recognize the sensitivities as well as strengths of the Sikh people.

Internally, we create resources and support programs which build the capacity of Sikh community organizations and individuals to better respond to survivor needs. One such resource is our bilingual Family Violence Resource Guide for faith leaders working in Gurdwaras (Sikh places of worship). This specialized Guide urges faith leaders to ‘do no harm’ and to respond to victim-survivors who seek their support in a non-judgmental, deliberate, and pre-planned manner without turning anyone away—including people who may cause harm. Another resource is the training we provide to Sikh collectives to write and execute better anti-harassment policies and protocols internally: we must create wellness, inside-out.

As a community-based organization deeply entrenched in the dynamics of our own peoples, we also repeatedly reiterate that our organization is not always the answer. For some Sikhs, hearing their own language, accent, pronunciations, and cultural references matters most while managing personal crises. But for others, receiving services from organizations cloaked with more perceived anonymity—organizations that serve the wider population, and not just South Asians much less only Sikhs—feels safer. We openly acknowledge this fact in our conversations with survivors and providers. Our objective has always been to expand options for individuals, rather than to restrict them further.

IV. COMMUNITY STATISTICS AND COMMUNITY STRENGTHS

a. Survey of Sikhs in the U.S. conducted by Sikh Family Center

Although there is a growing recognition that South Asian communities in the U.S. are not a monolithic group, there still remains a dearth of information and data related to the Sikh demographic. To address this gap, Sikh Family

⁵ In 2023 for example we engaged and reached 41 organizations, trained 901 individuals, and engaged 108 gurdwaras on gender violence and/or mental wellness.

Center has regularly conducted needs assessments with the goal of expanding our collective understanding of the Sikh community's needs, values, and possibilities.⁶ Our anonymous online survey of Sikhs in the U.S. conducted between 2017 and 2019 was offered in both English and Punjabi and 500 anonymous surveys were collected.

While the data collected is not representative of the entire Sikh population due to its sample size, the quantitative data nonetheless is one of the few attempts at surveying the Sikh community on topics such as gender-based violence and mental health, and offers emerging themes for further exploration. The insights gained from this needs assessment has also informed and reinforced our understanding that ethical use of statistics mandates going well beyond publicizing numbers. We have also leveraged the information we gathered from the survey results to inform ourselves and the wider community; debunk common myths about GBV; strengthen and tailor the services we provide; and advocate for prevention and intervention strategies at the individual, family, and community levels.

Of the 500 respondents 63% identified as female, 36% as male, and <1% identified as 'other.' 80% of the respondents selected the 18-44 age bracket. 25 total respondents self-identified as LGBTQIA.

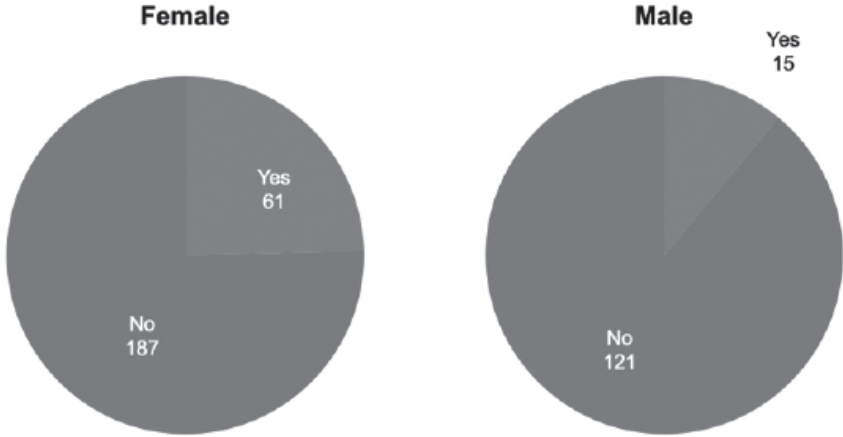
79% of the respondents indicated that their household spoke fluent English, and although the immigration status of the respondents varied, 84.8% reported they were U.S. citizens. The education levels of respondents also varied, with three-in-four reported to have at least a college education, and one-in-four respondents reported their household income as \$200,000 or above. The demographic pool that chose to take our most recent community survey represented more privileged sections of the community, in terms of language, immigration status, formal education, and income. This itself refutes some of the usual biases that only those who are most marginalized need services for trauma-recovery and encounter individual and structural barriers when doing so.

One-in-four of the Sikh women who completed the survey reported having been the target of family violence or domestic violence in their lifetime, while one-in-ten men reported the same (see Figure 1). One-in-four female respondents and one-in-ten male respondents reported having experienced sexual violence (see Figure 2), and sexual violence survivors reported being harmed by someone they know in 90% of the cases (see Figure 3). One-in-five respondents also reported experiencing being 'harmed as a child' and an almost identical number reported knowing 'a child who is/was abused' signaling that family violence also remains a direct threat to children's health in the community. Respondents who reported being close to a family violence victim largely also reported feeling they did not know how to respond (see Figure 4).

⁶ Our first anonymous needs assessment was a paper survey conducted in 2009, which informed the inception and creation of the Sikh Family Center.

Figure 1: 1 in 4 females and 1 in 10 males report having ever been the target of family violence.

Have you ever directly been the target of family/domestic violence?



Note: Charts represent violence experienced as both children and adults

Figure 2: 1 in 4 females and 1 in 10 males report having experienced sexual violence

Have you ever been the victim of sexual abuse/assault/attack?

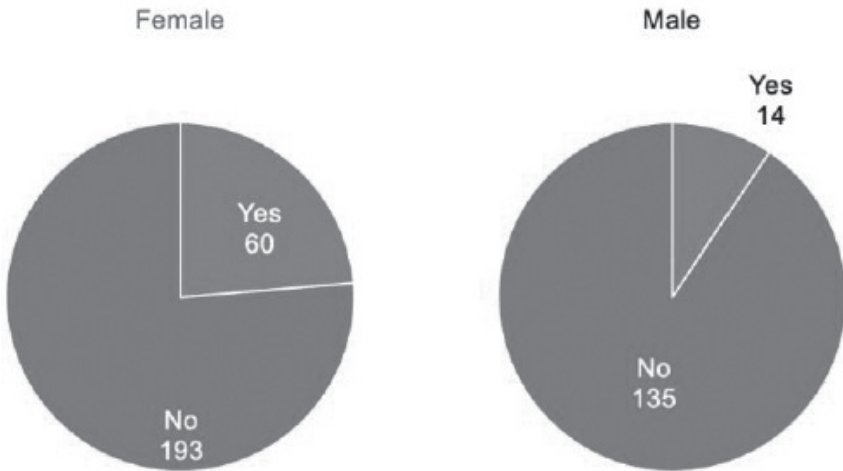


Figure 3: Majority of Sexual Violence Survivors Report Being Harmed by Someone They Know

If you have been the victim of sexual violence, who committed this act against you? Select all that apply

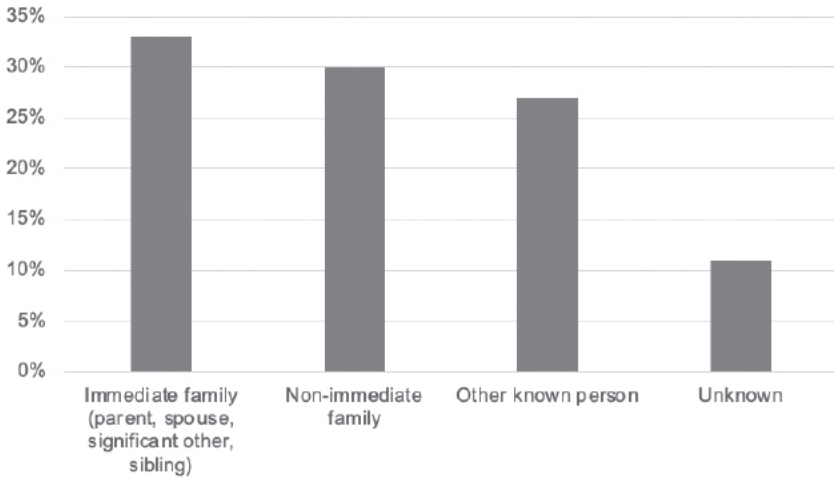
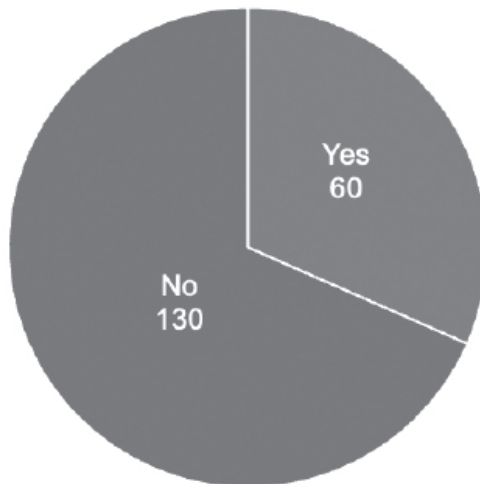


Figure 4: Majority of Those Close to Family Violence Victims Felt They Did Not Know How to Respond

If anyone close to you has ever experienced domestic/intimate partner violence, did you feel like you knew how to respond to them appropriately?



Studies have long demonstrated very clear links between GBV and mental health risks (Thiara and Harrison, 2021; Chandan et al, 2020) and our results demonstrated the same. Survivors of family violence reported more than double the number of poor mental health days in the month before completing the survey, as compared to respondents who did not identify as survivors (see Figure 5). 25% family violence survivors also reported having previously had thoughts of harming themselves. Similarly, a majority of sexual violence survivors reported feeling nervous, anxious, or unable to control their worry in the last month (see Figure 6).

The survey results suggest that the Sikh community may struggle with at least as high rates of violence as other API communities (Yoshihama M, Dabby C, & Luo S., 2020). One-in-five respondents also reported having faced barriers to accessing health or social services, including financial, immigration, language, and cultural barriers. This is consistent with our experience that Sikh survivors of gender-based violence are often less likely to access mainstream social services agencies for a variety of reasons, including the tendency to seek solutions from within existing social structures and the fact that mainstream social services agencies often lack the language or cultural capacity. Some of these limitations are related to the trajectory of the mainstream anti-GBV movement in the U.S., as discussed further in Section V.

b. Community strengths: acting together with faith

The community strengths we have observed and seek to amplify, without ignoring their attendant downsides, include the (non-exhaustive) list below. We have also included strategies that non-Sikh providers should consider when working with Sikh community members.

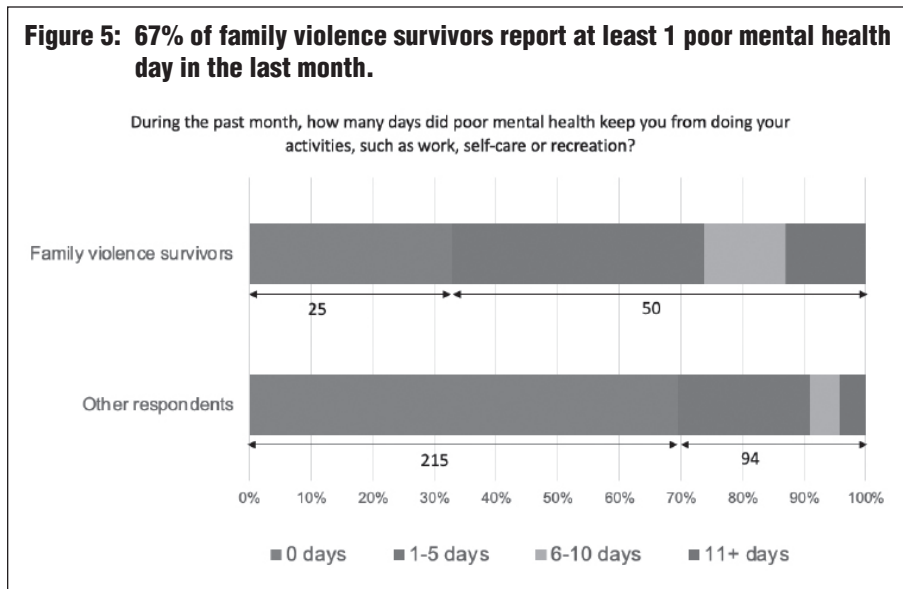
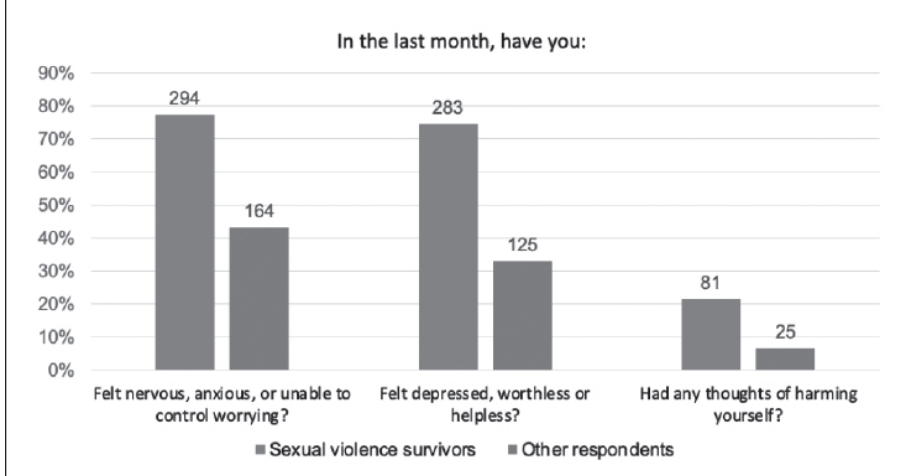


Figure 6: 78% of sexual violence survivors report having felt nervous, anxious, or unable to control worrying in the last month.



Faith as validating authority

We are unapologetic in our mandate to demand freedom from fear for all, and encourage survivors and their allies to be the same. We found it not just strategic but also inspiring to incorporate the egalitarian Sikh teachings (starting with the trailblazing compositions in the 15th century). All Sikh Gurus recognized and emphasized the importance of empowering women in all facets of life, from leading services in the congregation to pursuing education, and even joining the battlefield. For generations, Sikh women have found strength in this history and in prayer (spoken as paath and sung as kirtan).

Instead of faith-based patriarchy, we too are empowered to employ faith-based or faith-inspired feminism. The socio-cultural patriarchy is no small challenge, but having the faith tradition on the side of those fighting oppression is no small strength. We feel truly inspired that the egalitarian Sikh teachings leave no excuse for violence, in any form, in the life choices of a Sikh. By embracing these teachings and encouraging respectful interactions, individuals within the Sikh community can build on a faith-based foundation for healthy relationships. This is in stark contrast to misconceptions and biases non-Sikhs often show towards Sikhs in the U.S., including stereotypes of scary Sikh men and subjugated Sikh women.

We have also embraced and amplified the concept of men as humble nurturers rooted in Sikh teachings and praxis. Sikh men have always held diverse public roles, including through cooking, arts, teaching, healing, and community-building. In addition to historical warrior roles, Sikh men were encouraged to connect with their highest spiritual selves: the concept of ‘Saint-Soldier’ (sant-sipahee) in fact counters toxic masculinity by insisting on the harmony between temporal and spiritual wellness and power.

Tip for non-Sikh providers: Labeling Sikhs based on western notions of orthodoxy can be especially problematic. Thinking of a man with a beard as ‘conservative’ and a woman with cut hair as ‘modern’ lends to more stereotyping that can miss both opportunities for engagement as well as danger signal (e.g., the ‘modern’ looking person might be more at-risk and/or more dangerous).

Tip for non-Sikh providers: Learning nomenclature signals investment in understanding the Sikh culture and respecting its unique traditions. For example, a Sikh faith center is a gurdwara (not a ‘temple’ or a ‘church’), and is pronounced *gur-du-wara*.

Interconnectivity

The Sikh community in the U.S. is often described as ‘small,’ or that everyone knows everyone else, which while traditionally thought of as only dangerous for survivors, can also be reassuring and even life-saving. There is a strong self-help ethic of standing by one’s own community and not waiting for the State to assist—the community’s experience has for long been at odds with power-brokers’ priorities.

As a result, we have found it very useful to train local Community Advocates to respond in a trauma-centered way to people in their immediate community who may be hurting. However, we have also learned that when dangerous issues are too close to home, the Community Advocate’s reserve of resilience can be tested. We have thus committed ourselves to offering cocoons of support for our local helpers. They are able to do a ‘warm hand-off’ within the Sikh community by referring people to our Helpline, creating some distance for their personal safety, and promoting sustainability in doing this work.

Helpline peer counselors remain anonymous. This gives a two-way sense of safety to callers. They are now able to invoke communal connections and awareness of different dynamics in the interconnected community, but without worrying that the person supporting them will also be sitting next to them at the next community event. In this way, we are able to sustain the strength of interconnectivity.

Tip for non-Sikh providers: Brainstorm with survivors how different people in their immediate circle can provide different kinds of support. Not everyone needs to know their entire personal story to be useful to their immediate needs. Many people are committed to not being bystanders and driven again by their cultural, faith-based, duty to help another facing ‘problems.’

Dasvandh ethic: quick to feed and nourish

The Sikh teaching of sharing what one honestly earns with others, and the recommendation to share at least one-tenth (*dasvandh*) of one’s earnings and

time, is ethically followed by many Sikhs (and represented in the successful community crowdfunding platform, Dasvandh Network). In the same tradition of langar, or communal kitchens started in the 15th century, Sikhs are very quick to feed the hungry, help respond to tragedies, and provide immediate sustenance when needed. While this looks like disaster relief globally (for example, in the work of the aid agency, KhalsaAid International), in our GBV work it often takes the form of a community member driving the survivor to gurdwara; someone bringing a diaper bag with patkaas (head coverings usually for young boys) or gutkaas (prayer books); someone from the survivor's hometown willing to meet them for a meal; someone buying them Punjabi groceries. On some occasions, a recipient might take this kind of assistance for granted. But more often than not, people are appreciative of the small but emotionally impactful acts, and in fact many are eager to pay it forward whenever they are able.

Tip for non-Sikh providers: If your assistance sounds like 'charity,' you may receive pushback. Use collective empowerment and care language that speaks to the Sikh ethos.

Family: biological and beyond

Many Sikhs recognize that too many families—biological, chosen, or faith (sangati) family—are affected by gender-based violence. We have also found many families make healthy commitments to combating and altering this reality at personal levels—such as by standing with the victimized party regardless of relationship, acknowledging mistakes, or resolving to end generational trauma cycles—and we amplify these commitments and strategies, reminding people that GBV threatens the community's welfare through generations. In other cases, we actively challenge patriarchic preconceptions that lead to GBV by creating facilitative spaces for conversations that do not accelerate conflict but seek its resolution, through a broad, historic lens rather than an episodic lens. An approach that seeks to invite in the whole family—beyond biological parents, for example—is familiar and facilitates more long-term attention to reducing risk factors and eventually addressing root causes.

Tip for non-Sikh providers: Ask, do not assume, who someone considers family. If they have no one nearby, consider reaching out to Sikh Family Center's Helpline.

Tip for non-Sikh providers: Ask about their resources, do not assume they have none.

The above themes are as aspirational as they are inspirational. They fuel the work at Sikh Family Center every day. We decry lazy shortcuts and believe in slow, but long-term change. We welcome allies to work with us towards the same.

V. SITUATING SIKH FAMILY CENTER IN U.S.'S ANTI-GBV MOVEMENT; DISTINGUISHING OUR PATH

Historically, violence against women, especially in the ‘private’ or domestic sphere, has been widely ignored, if not actively condoned in the U.S. Early Christian settlers on Native American land based their law on old English common law that explicitly permitted wife-beating. Change would come, but dangerously slow. Even in 1824, a Michigan court observed the husband is allowed only ‘moderate chastisement in cases of emergency’ (Martin, D., 1981). The settler-colonists actively destroyed more egalitarian indigenous practices and spread the contagion of misogyny and violence against women.

While seeded in many earlier movements, from Temperance to Civil Rights, the ‘Battered Women’s Movement’ of the 1970s became a force of its own when it insisted that violence in the home was not a ‘private matter’ but rather rooted in systemic gender hierarchy. The movement insisted on moving away from individual factors as the supposed cause of violence—anger, relationship dysfunction, dissatisfaction with a ‘bad wife’—to instead examining societal conditions, particularly patriarchy. Through the next few decades, as domestic violence became a public matter, it also became a ‘law and order’ issue, with funding committed to criminal law responses (Gruber, A., 2020).

As the pendulum swung towards recognizing GBV victims within the legal system it fueled criminal prosecutions against individual victim-survivors’ wishes, in the name of the ‘public good’—this again undermined survivors’ most intimate desires, realities, and agency. Many survivors, particularly women of color, yet again had their voices stifled in the system intended to remedy their victimization. While critiques based on these consequences have reached more of a crescendo in recent times, bolstered by the racial justice movements in the United States, they are neither new nor surprising (Dasgupta, S.D. & Eng, P., 2003). The fact that laws to ‘protect women’ might in fact be used to further disempower marginalized communities has never been lost on the communities most impacted.

The history of Sikhs, Sikhs in the U.S., and Sikhs formally organizing against GBV, departs from the above timeline in some marked ways. On the one hand, the unique spiritual mandate and feminist teachings of the Sikh Gurus since 1469 are diametrically opposed to the interpretations of other major religious traditions that deemed husbands to have disciplinary power over their wives (Snyder, R. L., 2019). And yet, culturally, the Sikh community has often slipped into violent practices that shield violators and shame those who expose the violations (Sikh Women’s Aid, 2021). Consciousness-raising⁷ about the harm caused by behaviors dismissed as ‘private matters’ is still necessary, à la the U.S. feminist movement of the 1970s.

⁷ To bust myths such as considering GBV a ‘bad habit’ or thinking ‘it takes two’ or about what a ‘true victim looks like,’ we have launched myths/facts series, see: Sikh Family Center. (n.d.). *Myths & Facts about family violence (punjabi)*. YouTube. https://www.youtube.com/playlist?list=PLxMpg6gGC_1Viv2DLEJOtBdrTg8StQgT7

While the funded women's shelters in the U.S. had slowly opened doors by the early 1970s and the first Asian women's shelter in the U.S. is recorded in 1985, the Sikh community was mired in the 1984 pogroms and survival in India and in migrations and relocations in the U.S. When the historic Violence Against Women Act (VAWA) was passed in 1994, Sikh activists in the U.S. were negotiating fractured organizing attempts to highlight grave human rights violations in Punjab. By the 2000s, as more U.S. protections for immigrant victims of GBV were being legalized, the aftershocks of 9/11 caught the Sikh community in a new preservation struggle, further pushing internal issues to the shadows.

Just as GBV from within the community persisted, community-based responses were never non-existent: they were simply informal, unsupported by mainstream institutions and funders, and even unknown to the non-Sikh community. It was not until 2009, when Sikh Family Center organized, that the Sikh community's own responses were illuminated and put on the front-stage, sharing space with other civil and human rights issues. We have always centered community, seeking necessary alternatives or at least accompaniments to carceral solutions, bolstering the community's restorative powers (through gurdwaras, direct action, and prayer and spiritual power), à la the community-based solutions recognized in, say, the most recent Violence Against Women Act (2022) and new private funding initiatives.

Importantly, the fact that the Sikh community's organizing against GBV is out-of-step with the mainstream timeline of the DV movement does not mean that it trails behind it. The Sikh community-specific trajectory has not involved all the same iterations of the DV movement in the U.S., but we do draw from it both inspiration and many (painfully learned) lessons.

First, maintaining an inter-connected, intersectional approach helps avoid oversimplifying through binaries, a tendency we believe has been a problem in the past and continues to appear in the proposed solutions of the present. For example, we have staunchly resisted the 'survivor' versus 'provider' binary. Applauding the return of focus on survivor-led, survivor-driven work, we also recognize that this movement—in the world, U.S., and Sikh community—has *always* been powered by survivors. The delicate balance of organizing and not over-professionalizing the work is essential: it must not be reduced from a community-based movement to a funded program.

Second, we do not believe in the dichotomy of 'silence' versus 'speaking out.' Silence can be an essential strategy for survival, as any historically marginalized people know. We never insist on survivors speaking out, just as we never insist on them silencing their experiences. With multiple vulnerable identities, the cost of speaking out about one kind of violence may in fact risk other violences—including by the State, majoritarian communities, or their own community. For some survivors, not 'outing' men to the State systems is essential: for a community that has survived mass attacks, where the male body was a specific target, some Sikh women see themselves as protectors of men/their families, not out of subjugation but identity and faith imperative.

Others seek to speak out, but within the community, where they also wish to remain connected, safely.

Third, while we reject criminal law as a panacea for all, recognizing the lopsided and racist foundation of police and laws in the U.S., we also support survivors who wish to utilize the police and the law, insisting it be applicable to all (indeed our volunteer advisors do include some DAs and police officers, though we diverge on several basic principles). We also recognize that for many immigrant survivors, the view of U.S. police can greatly vary: from very capable of causing permanent harm, including deportation and death, to uniquely able under U.S. laws to intervene when others are terrorizing their own families. For some survivors, the failure of those who are meant to be closest to them, their own ‘community,’ is so severe that restoration through the community is a mere cruel mirage. We thus support people in navigating systems when they so desire, while also helping them navigate away from systems when they so desire.

Fourth, a community strengths-based approach follows the ethic of our faith, appeals to the Sikh self-identity as ‘not victims,’ and is at the core of our work to heal intergenerational trauma (as represented in our newest survivor storytelling project, *Beyond ‘Bichaari’* [‘O Poor Thing’]). Faith as a source of survivorship has, until recently, itself been sidelined in many movement spaces and thus it is no surprise that faith communities can be weary of gender justice organizations. Further, service providers that insist on victims presenting a certain way or prioritizing certain solutions (e.g. prosecution), run the risk of turning away survivors. Thus, as we build our intervention program, including our Helpline, we also work on building other programs that call people in to be part of community, without attaching labels or requiring them to access ‘crisis services’ or go through ‘intakes’; we fold in providing information and solidarity for those dealing with violence and unsafe dynamics.

Fifth, our policy remains to turn no one way: we neither screen-out ‘abusers’ on our Helpline or men from our volunteer pool. For one, family violence may be perpetrated by individuals of all genders, when in positions of patriarchal power. Also, we believe we can offer people who cause harm important information and referrals to services while also maintaining safety for survivors; in fact many people who have been harmed count on us to not ‘write off’ the other party.

In sum, we always aim to raise awareness and prompt action for a comprehensive, coordinated response. As we support victim-survivors’ quest for safety and sovereignty, we challenge any cultural excuses or defenses of gendered violence and, at the same time, oppose lazy stereotypes about the culture of our peoples. Every person must be able to talk about, or remain silent about their life experiences, and pursue a life free from fear.

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DISCLOSURE OF INTEREST

The authors report there are no competing interests to declare.



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