doi.org/10.65826/JSAI.1.3.2026.119
Vol. 01, Issue 03, pp. 367-383, 2026 *Journal of South Asian Issues (JSAI)*

RESEARCH ARTICLE **Open Access**

Islamophobia in Muslim-Majority Bangladesh: Interpersonal Experiences and Institutional Responses among Visibly Practicing Youth

Mohammad Sorowar Hossain[1*] Farhin Islam[2] SM Yasir Arafat[3]

*Corresponding Author

Received: 09.06.2026
Accepted: 11.09.2026

Publication Date: **29.09.2026**

© The Author(s) 2026
(CC BY 4.0)

ISSN: 3108-6144

Corresponding Author Mail: sorowar.hossain@brfbd.org

1 2 3 Department of Social Issues Through Public Health Lens, Biomedical Research Foundation, Bangladesh

1 School of Environment and Life Sciences, Independent University, Bangladesh

2 Bangladesh Institute of Development Studies (BIDS), Dhaka, Bangladesh

Abstract

Islamophobia has been extensively documented in Western societies, yet empirical evidence from Muslim-majority contexts remains scarce. This cross-sectional survey examines the extents, forms, and consequences of Islamophobia among visibly practicing Muslims; university students, recent graduates, and young professionals in Bangladesh, the world's third-largest Muslim-majority country. Drawing on the framework of epistemic racism, we recruited 1,655 participants through purposive sampling across all 64 administrative districts. Within this purposively sampled group of visibly practicing Muslim university students, recent graduates, and young professionals, 97.1% reported witnessing or experiencing Islamophobia, while 55.7% reported direct victimisation in educational or professional settings. The most common forms were dress-code discrimination (69.9%), verbal harassment (59.2%), and cultural mockery (51.7%), with teachers identified as the principal perpetrators (63.4%). Direct victimisation was significantly associated with female sex (AOR = 2.43; 95% CI: 1.93, 3.07), older age, and certain academic disciplines. Impacts included mental health deterioration, social withdrawal, and professional disengagement. Institutional responses were largely absent; only 4.4% of participants were aware of formal anti-discrimination policies. These findings indicate that reported experiences of Islamophobia can occur even in Muslim-majority contexts and may involve both interpersonal discrimination and perceived shortcomings in institutional responses. Future studies are warranted for in-depth analyses using more representative population-based studies. The study calls for urgent policy reform and stronger institutional accountability in Bangladesh and comparable settings.

Keywords: *Islamophobia, Bangladesh, Epistemic Racism, Muslim-Majority Society, Religious Discrimination, Visible Muslim Identity*

Cite this article: Hossain, M. S., Islam, F., & Arafat , S. Y. (2026). Islamophobia in Muslim-Majority Bangladesh: Interpersonal Experiences and Institutional Responses among Visibly Practicing Youth. *Journal of South Asian Issues (JSAI), 1*(3), 367–383. https://doi.org/10.65826/JSAI.1.3.2026.119

© 2026 The Author(s). This article is licensed under a Creative Commons Attribution 4.0 International License (CC BY 4.0). To view a copy of this license visit https://creativecommons.org/licenses/by/4.0.

1. BACKGROUND

Islamophobia has deep historical roots (Esposito, 2019) but has intensified globally since the 9/11 attacks, particularly in the United States, Australia, Europe, and parts of Asia (Dauda, 2021). In 2024, 8,658 anti-Muslim and anti-Arab complaints were recorded in the United States, which was a 7.4% increase and the highest figure since 1996 with employment discrimination (15.4%), immigration (14.8%), and education (9.8%) among the most common categories (Al Jazeera, 2025). Beyond the West, Islamophobia has also surged in India, where 1,165 hate speech incidents targeting religious minorities were documented in 2024, representing a 74.4% year-on-year increase (IHL, 2025).

The consequences of Islamophobia are well-established. At the individual level, it is associated with anxiety, depression, unhealthy behaviours, and reduced healthcare-seeking (Samari et al., 2018). At the structural level, it erodes social cohesion, perpetuates inequality in employment and education, and fuels hate crime and violence (Heritage, 2025). Visibly practicing Muslims, particularly women wearing the hijab, face disadvantages in hiring and promotion, resulting in underemployment and economic exclusion (Asthana, 2017; Islamic Relief Canada, 2023).

The term "Islamophobia" entered academic discourse in 1997 through the Runnymede Trust, which defined it as "unfounded hostility towards Islam and a fear or dislike of all or most Muslims" (Conway & Runnymede Trust, 1997). The United Nations defines it as "a fear, prejudice and hatred of Muslims that leads to provocation, hostility and intolerance," explicitly linking institutional Islamophobia to the visibility of the victim's perceived Muslim identity (United Nations, 2022). Islamophobia operates at three principal levels: systemic (biased laws, policies, and institutional practices), community (organised hostility toward Muslim institutions), and individual (discrimination or harassment based on faith or visible religious markers) (Beydoun, 2016). Sayyid (2014) identifies four geopolitical theatres in which Islamophobia is enacted, ranging from Muslim-majority societies to regions with negligible Muslim populations.

1.1 Islamophobia in Muslim-Majority Countries: The Epistemic Racism Framework

Although Islamophobia is traditionally associated with non-Muslim majority societies, it has also been documented in Muslim-majority contexts (Bayraklı & Hafez, 2018). One theoretical explanation is epistemic racism, which refers to intellectual hierarchies that privilege Western knowledge systems while marginalizing non-Western epistemologies, including those rooted in Islamic traditions (Bayraklı & Hafez, 2018; Grosfoguel, 2012). This framework draws on Quijano's (2000) concept of the "coloniality of power" and Said's (1978) analysis of Orientalism, both of which trace how colonial legacies delegitimise non-Western ways of knowing by framing them as irrational or regressive.

In Muslim-majority societies, these perspectives suggest that Islamic frameworks may be marginalized in areas such as education, law, and governance. Differences between mainstream and madrasah education, for example, may reflect broader tensions over knowledge, modernity, and institutional recognition. Such processes have also been discussed in relation to self-orientalisation, whereby Western or Eurocentric standards may be internalized within Muslim societies (Grosfoguel, 2012). These perspectives provide a possible theoretical context for understanding reported experiences of discrimination against visible Muslim identity, but the present study does not directly assess epistemic racism, coloniality, or self-orientalisation.

1.2 Islamophobia in Bangladesh

Bangladesh is the world's third-largest Muslim-majority country, with a population of approximately 170 million of whom 92% identify as Muslim (BBS, 2022). Following independence in 1971, secularism was enshrined as one of four founding constitutional principles, partly under the influence of leftist intellectual and political leadership (Islam, 2018; Mostofa, 2024). In 1979, constitutional amendments re-established Islamic identity within the formal state framework. However, secular cultural narratives

continued to be promoted through education, media, and public institutions, generating persistent tension between state frameworks and the lived religious identities of citizens (Islam, 2018; Mostofa, 2024).

Prior research documents specific disadvantages facing visibly practicing Muslims in Bangladesh. University graduates from madrasah backgrounds face significant labour market exclusion: male graduates with Islamic markers like beards, prayer caps, or madrasah affiliation must apply 171% more often than equivalently qualified peers from mainstream schools to secure the same number of interviews (Şafak, 2023). Students from madrasah curricula have also been denied entry into certain university departments, institutionalising barriers rooted in educational background (Rahman, 2015). A review of national news and social media between 2019 and 2024 documented over 50 incidents of dress-based harassment, workplace discrimination, and blocking of Islamic events in educational and public institutions, though such incidents are likely underreported in mainstream media (Mullobodh, 2025).

Despite this contextual evidence, no large-scale quantitative study has examined the occurrences and consequences of Islamophobia among visibly practicing Muslims in Bangladesh. This study addresses that gap with three objectives: (i) to investigate the extent and forms of Islamophobia encountered by visibly practicing university students, recent graduates, and young professionals; (ii) to explore its psychological, social, personal, and academic or professional impacts; and (iii) to evaluate institutional responses and their effectiveness.

Given the absence of a sampling frame for visibly practicing Muslims and the exploratory nature of this research, the study focuses on a purposively recruited sample of university students, recent graduates, and young professionals and does not seek to generate nationally representative prevalence estimates.

2. METHODS

2.1 Operational Definition of Islamophobia

In this study, Islamophobia refers to prejudice, hostility, exclusion, or discriminatory treatment directed toward Muslims, or toward individuals perceived to be Muslim, because of their religious identity or visible expression of that identity. In the present study, this includes discriminatory treatment associated with visible markers such as hijab, niqab, beard, prayer cap, or Islamic dress, as well as verbal harassment, cultural mockery, social exclusion, and academic or professional discrimination. This conceptualisation is consistent with the individual, community, and systemic dimensions of Islamophobia described in the literature and with the epistemic racism framework outlined above. In our operational definition, criticism of Islam, disagreement over secularism, political debate concerning religion, or disagreement with particular Islamic political positions was not classified as Islamophobia.

2.2 Study Design and Sampling

This was a cross-sectional survey study conducted in Bangladesh. Given the absence of a sampling frame for visibly practicing Muslims, a purposive sampling strategy was used to recruit participants from a network-based cohort of self-selected individuals. The sample included university students, recent graduates (up to three years post-graduation), and young professionals (aged 18–35) who displayed visible markers of Islamic practice like hijab, niqab, beard, prayer cap, or panjabi-payjama or who were actively involved in Islamic programmes or organisations, making them significantly more sensitised to or observant of religious discrimination. Findings should be interpreted as characterising the experiences of this purposively recruited group of Muslim youth and not as population-representative prevalence estimates.

The 21-item questionnaire was developed through a multi-stage process informed by existing literature on Islamophobia, discrimination, and religiously motivated harassment. An initial pool of items was generated based on previously published studies examining experiences of Islamophobia, its

manifestations, and its psychological and social consequences. The draft instrument was then reviewed by a multidisciplinary team comprising public health researchers, a psychiatrist, and a statistician, all with expertise in Bangladeshi social and cultural contexts. To enhance content relevance and ecological validity, the team also consulted individuals with lived experience of Islamophobia regarding the wording, comprehensiveness, and contextual appropriateness of the items to ensure ecological validity.

The instrument covered: (i) sociodemographic characteristics; (ii) experiences of witnessing or directly experiencing Islamophobia; (iii) the type, frequency, and perpetrators of incidents; (iv) psychological, social, personal, and professional or academic impacts; and (v) institutional responses and their perceived effectiveness. The questionnaire was piloted with 20 university students and revised for clarity, comprehension, and acceptability. Based on participant feedback, minor modifications were made to wording and response options before finalisation. It was administered in Bengali.

As no existing validated instrument was available that comprehensively captured the manifestations of Islamophobia within the Bangladeshi Muslim-majority context, a context-specific questionnaire was developed for this study. Nevertheless, the lack of formal psychometric validation should be considered when interpreting the findings.

Participants were recruited through WhatsApp groups affiliated with Islamic educational programmes and community organisations, a widely used channel for reaching visibly practicing Muslims across Bangladesh. A standardised presentation explaining the study purpose, the definition of Islamophobia, confidentiality assurances, and completion instructions was shared in each group. Data were collected via Google Forms from 29 September to 5 October 2024. Participation was entirely voluntary and all respondents provided informed electronic consent prior to participation. This study received ethical approval from the Ethical Review Board of the Biomedical Research Foundation, Bangladesh (Memo no: BRF/ERB/2024/04). The recruitment strategy may have introduced selection bias; individuals engaged in Islamic networks are likely more sensitised to discriminatory incidents, and this is acknowledged as a key limitation.

2.3 Data Management and Statistical Analysis

Survey responses were exported from Google Sheets to Microsoft Excel. Data were translated from Bengali to English by a bilingual team member; translation anomalies were manually corrected. Multi-select responses were separated using the text-to-column function, and each respondent was assigned a unique numerical identifier before transfer to Stata S/E version 14. All variables and values were labelled.

Descriptive statistics (frequencies and proportions) characterised the sample and summarised the occurrences, types, frequency, and perpetrators of Islamophobia, as well as its impacts and institutional responses. Chi-square tests assessed bivariate associations between demographic variables and (i) witnessing or experiencing Islamophobia and (ii) direct victimisation. Multivariate logistic regression identified independent predictors of victimisation, reported as adjusted odds ratios (AOR) with 95% confidence intervals. The Hosmer–Lemeshow test confirmed acceptable model fit ($p = 0.286$), and the mean variance inflation factor (VIF = 1.60) indicated no multicollinearity. The low pseudo-R^2 (0.055) is acknowledged and discussed. Statistical significance was set at $p < 0.05$.

3. RESULTS

3.1 Sample Characteristics

A total of 1,655 participants completed the survey. The majority were aged 21–25 years (59.3%) and male (65.9%). Most were current university students (65.1%), with the remainder comprising recent graduates (15.6%) and young professionals (19.3%). The largest field of study or work was Science and Technology (42.8%), followed by Arts and Social Sciences (19.1%), Business and Economics (15.2%),

and Medical Science (10.9%). Participants were distributed across all 64 administrative districts; 77.2% resided outside Dhaka. Full demographic data is presented in **Table 1.**

Table 1: Demographic Characteristics of the Participants

Variable	Category	n	Percentage (%)
Age	18–20	225	13.60
	21–25	982	59.34
	26–30	328	19.82
	Above 30	120	7.25
Sex	Male	1,091	65.92
	Female	564	34.08
Current status	University student	1,078	65.14
	Fresh graduate	258	15.59
	Young professional	319	19.27
Field of education or sector of work	Science and Technology	709	42.84
	Business and Economics	251	15.17
	Arts and Social Sciences	316	19.09
	Law and Policy	31	1.87
	Medical science	180	10.88
	Islamic sector	82	4.95
	Agriculture	22	1.33
	Other	64	3.87
District	Dhaka	378	22.84
	Outside Dhaka	1,277	77.16
Division	Barisal	66	3.99
	Chittagong	387	23.38
	Dhaka	620	37.46
	Mymensingh	87	5.26
	Khulna	114	6.89
	Rajshahi	158	9.55
	Rangpur	133	8.04
	Sylhet	90	5.44
Total		**1,655**	**100.00**

Source: Data Compiled by the Authors

3.2 Occurrences of Islamophobia

Among the 1,655 participants, 97.1% (n = 1,607) reported having witnessed or directly experienced at least one incident of Islamophobia. A total of 55.7% (n = 922) reported being directly victimised in their educational institution or workplace (**Table 2**). Given the purposive sampling strategy, these figures characterise the experiences of visibly practicing Muslims within Islamic programme networks and should not be generalised as population-level prevalence estimates.

Table 2: Occurrences of Islamophobia

Variable		n	Percentage (%)
Have you experienced or witnessed an incident of Islamophobia?	Yes	1,607	97.10
	No	48	2.90
Have you been a victim of Islamophobia at your institution or workplace?	Yes	922	55.71
	No	733	44.29
Total		**1,655**	**100.00**

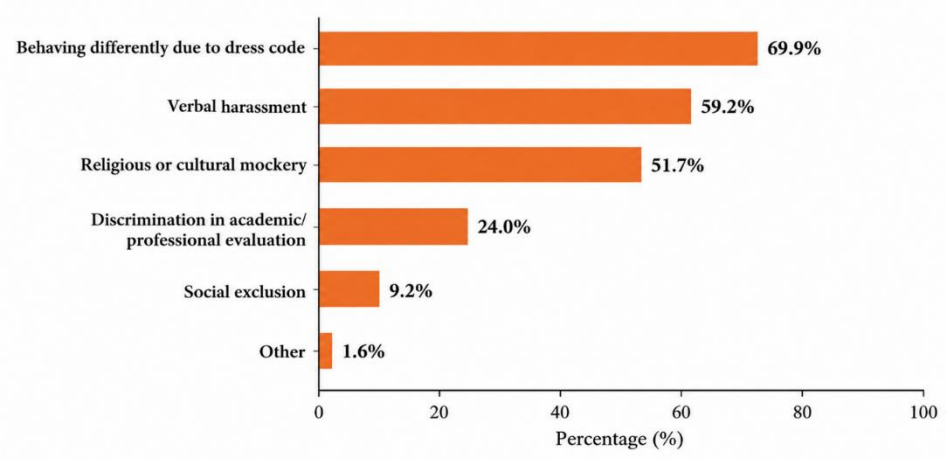
Source: Data Compiled by the Authors

3.3 Types, Frequency, and Perpetrators of Islamophobic Incidents

Among the 1,607 participants who had witnessed or experienced Islamophobia, the most frequently reported form was discrimination based on dress code (69.9%), followed by verbal harassment (59.2%), cultural mockery (51.7%), academic or professional discrimination (24.0%), and social exclusion (9.2%) (Figure 1). Teachers were the most frequently identified perpetrators (63.4%), followed by relatives (39.5%) and neighbours (26.9%) (Figure 2). Most incidents were described as occurring occasionally (44.0%) (Figure 3).

Figure 1 represents types of Islamophobias encountered in Bangladesh among those who have ever experienced or witnessed Islamophobia (n = 1,607). Percentages may exceed 100% because respondents could select multiple responses.

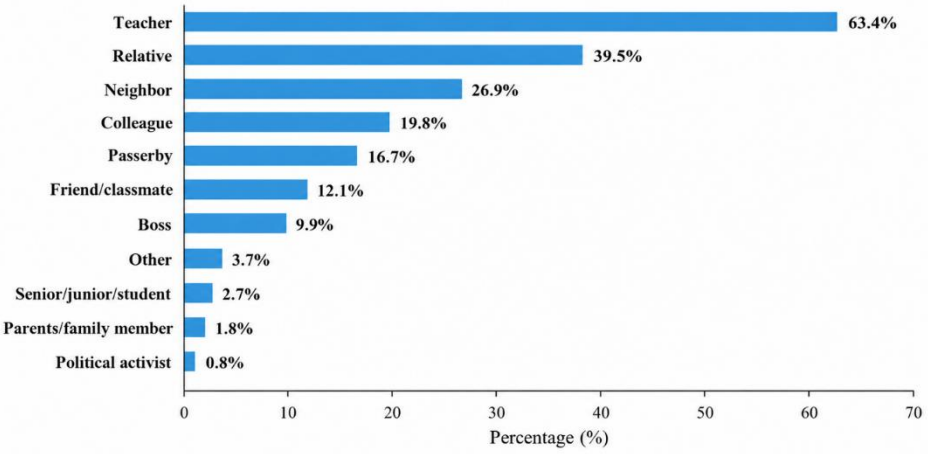
Figure 1: Types of Islamophobia encountered in Bangladesh



Source: Data Compiled by the Authors

Figure 2 represents the professional backgrounds of perpetrators of Islamophobic incidents among those who have ever experienced or witnessed Islamophobia (n = 1,607). Percentages may exceed 100% because respondents could select multiple responses.

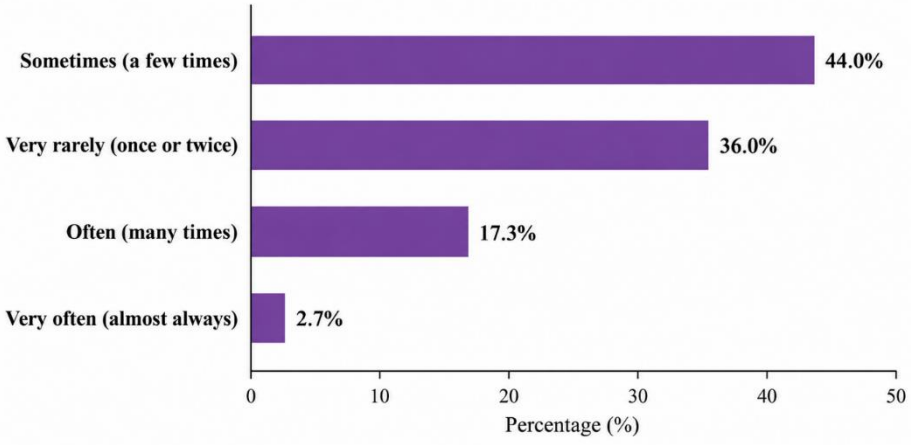
Figure 2: Perpetrators of Islamophobic Incidents



Source: Data Compiled by the Authors

Figure 3 represents the frequency of Islamophobic incidents among those who have ever experienced or witnessed Islamophobia (n = 1,607). Percentages sum to 100% because this was a single-response item.

Figure 3: Frequency of Islamophobic Incidents



Source: Data Compiled by the Authors

3.4 Impact on Direct Victims

Among the 922 direct victims, 92.3% reported that Islamophobia had affected their mental health and academic performance, and approximately 90% reported impact on their personal or social life (**Table 3**). Three quarters (76.0%) had avoided educational, professional, or social activities as a result, and 21.4% had considered changing their dress code or religious practices. The most commonly reported problems were increased stress or anxiety (65.4%), feelings of isolation (54.8%), and low self-esteem (44.6%). Approximately 36% reported decreased job satisfaction, 35.6% had considered leaving their educational institution, and 12.6% had considered leaving their job.

Table 3: Impacts of Islamophobia on Direct Victims (N = 922)

Variable	Category	n	Percentage (%)
Impact on mental health and academic performance	Not affected at all	71	7.70
	Slightly affected	284	30.80
	Moderately affected	180	19.52
	Significantly affected	297	32.21
	Extremely affected	90	9.76
Impact on personal or social life	Not affected at all	93	10.09
	Slightly affected	278	30.15
	Moderately affected	201	21.80
	Significantly affected	269	29.18
	Extremely affected	81	8.79
Avoided any educational, professional, or social activities because of Islamophobia	Yes	701	76.03
	No	221	23.97
Considered changing dress code or religious practice	Yes	197	21.37
	No	725	78.63
Problems faced because of Islamophobia	Increased stress or anxiety	603	65.40
	Feelings of isolation	505	54.77
	Low self-esteem	411	44.58
	Decreased job satisfaction	332	36.01
	Thought of leaving educational institution	328	35.57
	Consideration of leaving the job	116	12.58
	Other	14	1.52
Total		**922**	

Note: Percentages for "Problems faced because of Islamophobia" exceed 100% because respondents could select multiple responses; the remaining variables are single-response items summing to 100%.

3.5 Institutional Responses

Table 4 presents institutional responses to Islamophobia. While 40.8% described Islamophobia as moderately prevalent at their institution or workplace, 55.4% reported that no action was taken when incidents occurred, and only 2.0% described the institutional response as proactive and effective. Only 4.4% of participants (n = 73) were aware of formal anti-discrimination policies, and of those, 42.5% rated them as only slightly effective.

Table 4: Actions against Islamophobia in educational institutions or workplaces (N = 1,655)

Variable	Category	n	Percentage (%)
Perceived prevalence at institution or workplace	Not at all	120	7.25
	Slightly prevalent	409	24.71
	Moderately prevalent	675	40.79
	Significantly prevalent	355	21.45
	Extremely prevalent	96	5.80
Action taken by institution or workplace	No action taken	917	55.41
	Minimal action taken	240	14.50
	Neutral response	391	23.63
	Adequate action taken	74	4.47
	Proactive and effective response	33	1.99
Existence of official anti-discrimination policies	Yes	73	4.41
	No	860	51.96
	Do not know	722	43.63
Effectiveness of policies (n = 73)	Not effective at all	9	12.33
	Slightly effective	31	42.47
	Neutral	12	16.44
	Effective	19	26.03
	Very effective	2	2.74

Source: Data Compiled by the Authors

3.6 Demographic Associations

Table 5 shows that females were significantly more likely than males to have witnessed or experienced Islamophobia ($\chi^2(1) = 3.86$, $p = 0.049$). Table 6 shows that females were also significantly more likely to be direct victims (69.9% vs 48.4%; $\chi^2(1) = 69.41$, $p < 0.001$). Age was significantly associated with direct victimisation ($\chi^2(3) = 13.20$, $p = 0.004$), with higher rates among older participants. Field of study or work was significantly associated with victimisation ($\chi^2(7) = 50.91$, $p < 0.001$), with the highest rates among participants in the residual "Other" category (75.0%), Medical Science (67.8%), and Arts and Social Sciences (64.6%).

Table 5: Association of Demographic Factors with Experiencing or Witnessing Islamophobia

Variable	Category	Yes n (%)	No n (%)	Total n	χ^2 (df), p-value
Age	18–20	217 (96.44)	8 (3.56)	225	$\chi^2(3) = 0.67$, p = 0.880
	21–25	956 (97.35)	26 (2.65)	982	
	26–30	318 (96.95)	10 (3.05)	328	
	Above 30	116 (96.67)	4 (3.33)	120	
Sex	Male	1,053 (96.52)	38 (3.48)	1,091	$\chi^2(1) = 3.86$, p = 0.049*
	Female	554 (98.23)	10 (1.77)	564	
Current status	University student	1,047 (97.12)	31 (2.88)	1,078	$\chi^2(2) = 5.28$, p = 0.072
	Fresh graduate	255 (98.84)	3 (1.16)	258	
	Young professional	305 (95.61)	14 (4.39)	319	
Field of education / sector of work	Science and Technology	683 (96.33)	26 (3.67)	709	$\chi^2(7) = 5.81$, p = 0.562
	Business and Economics	243 (96.81)	8 (3.19)	251	
	Arts and Social Sciences	312 (98.73)	4 (1.27)	316	
	Law and Policy	30 (96.77)	1 (3.23)	31	
	Medical science	174 (96.67)	6 (3.33)	180	
	Islamic sector	80 (97.56)	2 (2.44)	82	
	Agriculture	22 (100.00)	0 (0.00)	22	
	Other	63 (98.44)	1 (1.56)	64	
District	Dhaka	364 (96.30)	14 (3.70)	378	$\chi^2(1) = 1.12$, p = 0.289
	Outside Dhaka	1,243 (97.34)	34 (2.66)	1,277	
Total		**1,607 (97.10)**	**48 (2.90)**	**1,655**	

** $p < 0.05$.*

Table 6: Association of Demographic Factors with Being a Direct Victim of Islamophobia

Variable	Category	Yes n (%)	No n (%)	Total n	χ^2 (df), p-value
Age	18–20	101 (44.89)	124 (55.11)	225	$\chi^2(3) = 13.20$, p = 0.004**
	21–25	556 (56.62)	426 (43.38)	982	
	26–30	195 (59.45)	133 (40.55)	328	
	Above 30	70 (58.33)	50 (41.67)	120	
Sex	Male	528 (48.40)	563 (51.60)	1,091	$\chi^2(1) = 69.41$, p < 0.001***
	Female	394 (69.86)	170 (30.14)	564	
Current status	University student	587 (54.45)	491 (45.55)	1,078	$\chi^2(2) = 1.98$, p = 0.371
	Fresh graduate	150 (58.14)	108 (41.86)	258	
	Young professional	185 (57.99)	134 (42.01)	319	
Field of education / sector of work	Science and Technology	344 (48.52)	365 (51.48)	709	$\chi^2(7) = 50.91$, p < 0.001***
	Business and Economics	140 (55.78)	111 (44.22)	251	
	Arts and Social Sciences	204 (64.56)	112 (35.44)	316	
	Law and Policy	18 (58.06)	13 (41.94)	31	
	Medical science	122 (67.78)	58 (32.22)	180	
	Islamic sector	37 (45.12)	45 (54.88)	82	
	Agriculture	9 (40.91)	13 (59.09)	22	
	Other	48 (75.00)	16 (25.00)	64	
District	Outside Dhaka	710 (55.60)	567 (44.40)	1,277	$\chi^2(1) = 0.03$, p = 0.867
	Dhaka	212 (56.08)	166 (43.92)	378	
Total		**922 (55.71)**	**733 (44.29)**	**1,655**	

*** p < 0.01; *** p < 0.001.*

3.7 Logistic Regression: Determinants of Victimisation

Table 7 presents the multivariate logistic regression results. Age, sex, and field of study or work were independently associated with being a direct victim. Compared to the 18–20 age group, participants aged 21–25 and 26–30 had significantly higher odds of reporting victimisation (AOR = 1.67 and 1.98, respectively); the estimate for those above 30 was of similar magnitude (AOR = 1.76) but did not reach statistical significance (p = 0.055; 95% CI: 0.988, 3.139). Females had 2.43 times the odds of victimisation compared with males (AOR = 2.43; 95% CI: 1.93, 3.07; p < 0.001). Relative to participants in Science and Technology, those in Arts and Social Sciences (AOR = 1.56; p = 0.003) and Medical Science (AOR = 1.73; p = 0.003) were significantly more likely to be direct victims. The residual category labelled "Other" yielded the highest AOR (3.07; 95% CI: 1.67, 5.62; p < 0.001). Given its statistical significance, a disaggregation or definition in greater detail would provide actionable insights

into which specific environments pose heightened risk. However, the data did not allow us to do so. Current status and district of residence were not independently significant.

Table 7: Logistic regression: determinants of being a direct victim of Islamophobia

Predictor variable	AOR	SE	t	p	95% CI
Age (ref: 18–20)					
21–25	1.668	0.261	3.27	0.001**	(1.227, 2.268)
26–30	1.979	0.427	3.17	0.002**	(1.297, 3.019)
Above 30	1.762	0.519	1.92	0.055	(0.988, 3.139)
Sex (ref: Male)					
Female	2.429	0.289	7.47	< 0.001***	(1.925, 3.066)
Current status (ref: University student)					
Fresh graduate	1.063	0.174	0.38	0.706	(0.772, 1.464)
Young professional	1.174	0.233	0.81	0.418	(0.796, 1.732)
Field of study / sector of work (ref: Science and Technology)					
Business and Economics	1.287	0.195	1.66	0.096	(0.956, 1.732)
Arts and Social Sciences	1.557	0.229	3.01	0.003**	(1.167, 2.076)
Law and Policy	1.545	0.583	1.15	0.249	(0.737, 3.237)
Medical science	1.727	0.315	2.99	0.003**	(1.208, 2.470)
Islamic sector	0.860	0.206	−0.63	0.528	(0.538, 1.375)
Agriculture	0.571	0.261	−1.23	0.220	(0.233, 1.397)
Other	3.067	0.949	3.62	< 0.001***	(1.672, 5.624)
District (ref: Outside Dhaka)					
Dhaka	0.909	0.113	−0.77	0.444	(0.712, 1.160)
Constant	0.464	0.074	−4.82	< 0.001***	(0.340, 0.634)

Note: N = 1,655. Pseudo-R^2 = 0.055 (a low Pseudo-R^2 indicates that the demographic predictors explain only a minimal fraction of the variance in victimisation);

$\chi^2(df = 14) = 123.95$, $p < 0.001$. Hosmer–Lemeshow test $p = 0.286$ (acceptable model fit). Mean VIF = 1.60 (no multicollinearity). These indicate that the model provides useful information regarding demographic correlates of victimisation despite its limited explanatory power.

*AOR = adjusted odds ratio; SE = standard error; CI = confidence interval. ** $p < 0.01$; *** $p < 0.001$.*

4. DISCUSSION

This study provides evidence of reported Islamophobic experiences within a Muslim-majority context. Among this purposively recruited sample of visibly practicing university students, recent graduates, and young professionals in Bangladesh, more than half of the participants reported direct victimisation in educational or professional settings. These findings have theoretical, comparative, and policy implications.

4.1 Islamophobia Beyond Minority Contexts

The key contribution of this study shows that reported discrimination related to visible Muslim identity can even occur in a society where Muslims constitute an overwhelming demographic majority. This challenges perspectives that primarily link Islamophobia to minority status or majority-group anxiety over demographic difference. In Bangladesh, reported discrimination seems to be related more to the visible expression of Islamic identity than Muslims' minority status. This interpretation is consistent with the epistemic racism framework, which suggests that colonial and post-colonial knowledge hierarchies may shape perceptions of visible Islamic symbols and practices as incompatible with dominant notions of modernity (Bayraklı & Hafez, 2018; Grosfoguel, 2012). However, these theoretical mechanisms were not directly measured in this study and should therefore be considered possible explanations rather than established causes.

The prominence of teachers as the most frequently identified perpetrators (63.4%) is notable in this context. Educators play an important role in shaping institutional norms and cultural attitudes; when discriminatory attitudes toward visible Islamic identity occur in educational settings, academic spaces may become sites of exclusion rather than protection. This pattern appears less prominent in Western Islamophobia research, where reported hostility more commonly involves employers, co-workers, or members of the general public (CAIR, 2025).

This finding of educators identified as perpetrators should be considered in the broader historical and institutional context of higher education in Bangladesh (Islam, 2018; Mostofa, 2024). Universities in Bangladesh have historically been shaped by political engagement, institutional hierarchies, and competing understandings of secularism, religion, and national identity. At the same time, differences between mainstream and madrasah education have raised questions about educational access, recognition, and opportunities for social and professional mobility (Şafak, 2023; Rahman, 2015). These dynamics may help explain why visible expressions of Islamic identity can sometimes become contested in educational settings. However, the present study did not directly measure political patronage, institutional culture, secularist policy preferences, or attitudes toward madrasah education. These factors should therefore be viewed as contextual hypotheses that may help explain the observed pattern, rather than as established causes of educator-perpetrated discrimination. Future institution-level and qualitative research should examine whether reported incidents reflect individual attitudes or broader organisational and historical dynamics within Bangladeshi higher education.

4.2 Parallels with Western Contexts

Despite the different demographic context, several features of Islamophobia in Bangladesh closely parallel patterns documented in Western minority-Muslim settings. The most common forms — dress-code discrimination, verbal harassment, and cultural mockery — mirror evidence from the United Kingdom, United States, and Australia (Shaw, 2025; CAIR, 2025). The disproportionate impact on women, who had 2.43 times the odds of reporting direct victimisation, also aligns with international evidence that hijab-wearing women are particularly exposed to Islamophobic hostility (Elsheikh & Sisemore, 2021). Similarly, reported psychological consequences including anxiety, isolation, low self-esteem, and avoidance of educational and professional environments, resemble outcomes documented among minority-Muslim populations (Samari, 2016; Uddin et al., 2022).

Employment and educational consequences were also notable. More than one in three direct victims had considered leaving their educational institution, and approximately one in eight had considered leaving their job, and more than one in five had contemplated altering their religious dress or practices to avoid discrimination. These parallels suggest that Muslim identity may be an important context for Islamophobic experiences beyond minority status, supporting the view of Islamophobia as a global rather than exclusively Western phenomenon.

4.3 Distinctive Features of the Bangladeshi Context

Three features distinguish the Bangladeshi findings from Western patterns. First, as noted, teachers rather than employers or the general public were the most common perpetrators, pointing to reported discrimination within institutional settings. Second, relatives were identified as the second most common source of Islamophobic treatment, which may reflect the normalisation of scepticism toward visible Islamic practice within family and community networks. This may be related to secular cultural narratives promoted since 1971 and the post-2001 association of visible Islamic identity with extremism in government messaging and mainstream media (Dhaka Tribune, 2019; Uddin, 2016). Such pressures may contribute to psychological distress and may constrain young people's ability to express their religious identity freely.

Third, the near-total absence of institutional safeguards is striking. Only 4.4% of participants were aware of formal anti-discrimination policies at their institution, and the majority reported no action when incidents occurred. In contrast, most Western countries have at least formal legislative frameworks providing some recourse against religious discrimination. The absence of comparable mechanisms in Bangladesh suggests that institutional Islamophobia may go largely uncontested, although the present study did not assess institutional policies directly.

4.4 Strengths and Limitations

This study makes an important empirical contribution by documenting, at scale, the experiences of a population that has received virtually no quantitative research attention. The sample spans all 64 administrative districts of Bangladesh, and the instrument was developed with appropriate cultural grounding, including input from individuals with lived experience.

Several limitations must be acknowledged. Most importantly, the purposive sampling strategy recruiting through WhatsApp groups associated with Islamic programmes is not representative of all visibly practicing Muslim youths in Bangladesh. Individuals engaged in Islamic networks are likely more sensitized to or observant of religious discriminatory incidents, which may account for the near-universal exposure rates; findings should not be interpreted as population-level prevalence estimates. Findings from this highly self-selected network-based cohort of Muslim youths may overestimate the extent of Islamophobia if not interpreted cautiously. Secondly, self-reported data are subject to recall bias, and the cross-sectional design precludes causal inference about the long-term consequences of Islamophobia. Thirdly, the survey instrument has not been validated against established Islamophobia scales. The low pseudo-R^2 (0.055) indicates that demographic predictors explain only a modest portion of variance in victimization, suggesting that victimization experiences are likely influenced by a range of unmeasured contextual factors that were not captured in the survey including institutional culture, workplace or educational environment, the nature and visibility of religious markers, measures of religious observance intensity, frequency of public exposure, social networks, and local attitudes toward visibly practicing Muslims. Future studies employing broader psychosocial and institutional variables may provide a more comprehensive understanding of the determinants of Islamophobia-related victimization. Future research should also employ probability-based sampling, validated instruments, longitudinal designs, and qualitative components. Fourthly, institutional and structural mechanisms were not directly measured. Although participants reported perceived perpetrators and institutional responses,

the study did not independently assess institutional policies, organizational practices, institutional culture, educator attitudes, historical influences, colonial/post-colonial processes, or epistemic hierarchies. Consequently, the study cannot determine whether reported experiences reflect systematic institutional or structural patterns. Future studies should combine individual-level surveys with institution-level policy audits, qualitative interviews, organizational assessments, and multilevel designs.

5. CONCLUSION

This study demonstrates that Islamophobia is not confined to contexts in which Muslims are a demographic minority. Among a purposively recruited sample of visibly practicing university students, graduates, and young professionals in Muslim-majority Bangladesh, reported discriminatory experiences were widespread, educators were frequently identified as perpetrators, and institutional responses were largely absent. Women were disproportionately affected, consistent with global evidence. These findings can be interpreted in light of theoretical perspectives concerning coloniality, post-colonial knowledge hierarchies, and epistemic racism, which provide possible explanations for how visible religiosity may be differentially perceived within contemporary institutions and society. However, these mechanisms were not directly measured in the present study. The study provides empirical evidence of reported interpersonal discrimination and perceived institutional shortcomings and identifies broader historical, institutional, and structural processes as hypotheses for future research. Policy responses should prioritise the establishment of formal anti-discrimination mechanisms in educational and professional institutions, training for educators and managers on religious discrimination, and accessible reporting pathways for victims.

Ethics Approval

This study received ethical approval from the Ethical Review Board of the Biomedical Research Foundation, Bangladesh (Memo no: BRF/ERB/2024/04).

All participants were over the age of 18 and provided informed electronic consent prior to participation.

Data Availability

Anonymised data are available from the corresponding author upon reasonable request.

Acknowledgements

No Acknowledgements to Declare.

Declaration of Competing Interest

The Authors Declare No Competing Interests.

Declaration of Generative AI and AI-Assisted Technologies in the Writing Process

All Data Collection, Conceptual Development, And Analytical Judgements, Analyses Were Performed Solely by Authors. AI Tools Were Used for Improving Language and Formatting.

Funding

No Funding Was Received for This Study.

REFERENCES

Al Jazeera. (2025). Anti-Muslim hate hits new high in US: Advocacy group. https://www.aljazeera.com/news/2025/3/11/anti-muslim-hate-hits-new-high-in-us-advocacy-group/

Asthana, A. (2017). Islamophobia holding back UK Muslims in workplace, study finds. The Guardian. https://www.theguardian.com/society/2017/sep/07/islamophobia-holding-back-uk-muslims-in-workplace-study-finds

Bayraklı, E., & Hafez, F. (Eds.). (2018). *Islamophobia in Muslim majority societies (1st ed.).* Routledge. https://doi.org/10.4324/9780429464850

BBS. (2022). Population and housing census 2022. Bangladesh Bureau of Statistics. https://bbs.gov.bd/site/page/47856ad0-7e1c-4aab-bd78-892733bc06eb/

Beydoun, K. A. (2016). Islamophobia: Toward a legal definition and framework. *Columbia Law Review Online, 116,* 108–125. https://columbialawreview.org/content/islamophobia-toward-a-legal-definition-and-framework/

CAIR. (2025). CAIR's civil rights report shows Islamophobia complaints at all-time high. https://www.cair.com/press_releases/cairs-civil-rights-report-shows-islamophobia-complaints-at-all-time-high-viewpoint-discrimination-key-factor/

Conway, G., & Runnymede Trust. (1997). Islamophobia: A challenge for us all. The Runnymede Trust.

Dauda, K. O. (2021). Islamophobia and religious intolerance: Threats to global peace and harmonious co-existence. *QIJIS (Qudus International Journal of Islamic Studies), 8*(2). https://doi.org/10.21043/qijis.v8i2.6811

Dhaka Tribune. (2019). Study: Militancy higher with general education than madrasa education. https://www.dhakatribune.com/bangladesh/dhaka/180161/study-militancy-higher-with-general-education

Elsheikh, E., & Sisemore, B. (2021). Islamophobia through the eyes of Muslims: Assessing perceptions, experiences, and impacts. https://escholarship.org/uc/item/68t6456f

Esposito, J. L. (2019). *Islamophobia and radicalization: Roots, impact and implications*. In J. L. Esposito & D. Iner (Eds.), Islamophobia and radicalization: Breeding intolerance and violence (pp. 15–33). Springer International Publishing. https://doi.org/10.1007/978-3-319-95237-6_2

Grosfoguel, R. (2012). The multiple faces of Islamophobia. *Islamophobia Studies Journal, 1*(1), 9–33. https://doi.org/10.13169/islastudj.1.1.0009

Heritage, C. (2025). The Canadian guide to understanding and combatting Islamophobia. https://www.canada.ca/en/canadian-heritage/campaigns/combatting-islamophobia-canada/resources/guide-combatting-islamophobia.html

IHL. (2025). Report 2024: Hate speech events in India. India Hate Lab. https://indiahatelab.com/2025/02/10/hate-speech-events-in-india-2024/

Islam, M. (2018). Islam, politics and secularism in Bangladesh: Contesting the dominant narratives. *Social Sciences, 7*(3), 37. https://doi.org/10.3390/socsci7030037

Islamic Relief Canada. (2023). *Muslims at the margins: Islamophobia and employment*. https://issuu.com/islamicreliefcanada/docs/islamophobia_report

Mostofa, S. (2024). The repression of Muslim identity and the rise of conservative Islam in Bangladesh. The Diplomat. https://thediplomat.com/2024/11/the-repression-of-muslim-identity-and-the-rise-of-conservative-islam-in-bangladesh/

Mullobodh. (2025). Islamophobia documentation, Bangladesh. https://mullobodh.com/islamophobia-documentation-bangladesh/

Quijano, A. (2000). Coloniality of power and Eurocentrism in Latin America. *International Sociology, 15*(2), 215–232. https://doi.org/10.1177/0268580900015002005

Rahman, M. M. (2015). The bias against madrasa students. The Daily Star. https://www.thedailystar.net/op-ed/the-bias-against-madrasa-students-191032

Said, E. W. (1978). *Orientalism*. Pantheon Books.

Samari, G. (2016). Islamophobia and public health in the United States. *American Journal of Public Health, 106*(11), 1920–1925. https://doi.org/10.2105/AJPH.2016.303374

Samari, G., Alcalá, H. E., & Sharif, M. Z. (2018). Islamophobia, health, and public health: A systematic literature review. *American Journal of Public Health, 108*(6), e1–e9. https://doi.org/10.2105/AJPH.2018.304402

Sayyid, S. (2014). A measure of Islamophobia. *Islamophobia Studies Journal, 2*(1), 10–25. https://doi.org/10.13169/islastudj.2.1.0010

Şafak, Y. (2023). Religious high school graduates face labor market discrimination in Bangladesh: Study. Yeni Şafak. https://www.yenisafak.com/en/world/religious-high-school-graduates-face-labor-market-discrimination-in-bangladesh-study-3667935

Shaw, S. (2025). Gendered Islamophobia: Evidence of disproportionate abuse against Muslim women and girls. UK Parliament. https://committees.parliament.uk/writtenevidence/138836/pdf/

Uddin, H. (2016, July 20). Your child isn't becoming a terrorist, is he? Prothomalo. https://tinyurl.com/nhfcv5ve

Uddin, M. F., Williams, A., & Alcock, K. (2022). Visibility as Muslim, perceived discrimination and psychological distress among Muslim students in the UK. *Journal of Muslim Mental Health, 16*(1). https://doi.org/10.3998/jmmh.135

United Nations. (2022). *International Day to Combat Islamophobia*. https://www.un.org/en/observances/anti-islamophobia-day