



# Life Satisfaction and Well-Being at the Intersections of Caste and Gender in India

Akshay Johri<sup>1</sup> · Pooja V. Anand<sup>2</sup>

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**Abstract** Psychological research has a paucity of studies on caste and well-being. Existing literature on caste has extensively focused on pathological conditions in rural areas. In contrast, individuals who experience vulnerabilities in urban areas at the intersections of caste and gender identities are still underrepresented in the research literature on the psychology of well-being. The present study recognises this gap in research and explores the interaction of caste and gender on life satisfaction and well-being in urban areas. On administering the Satisfaction with Life Scale and Mental Health Continuum-short form to a sample of 465 young adults, the results revealed significant caste differences in both life satisfaction and well-being. The findings highlight that general caste individuals have higher life satisfaction and well-being than scheduled caste individuals. The findings also indicate significant gender differences in life satisfaction, with women having higher life satisfaction than men across caste groups. Results revealed no interaction effect between caste and gender. Consistent with earlier studies, the results on caste suggest that despite its discourses of diminishing importance, especially in urban areas, caste does play a significant role in an individual's well-being and life satisfaction. Hence, the findings have implications for policy-making, education, and training to understand caste-based experiences better.

**Keywords** Caste · Gender · Well-being · Intersectionality · Life satisfaction · Mental health

## Abbreviations

EWB	Emotional Well-Being
MHC-SF	Mental Health Continuum- Short form
OBC	Other Backward Class
PWB	Psychological Well-Being
SC	Scheduled Caste
ST	Scheduled Tribe
SWB	Social Well-Being
WHO	World Health Organisation

## Introduction

The caste system is a centuries-old system of social stratification which classifies people into hierarchically ranked endogamous groups. These groups are based on hereditary social roles and occupations, determining access to wealth, power and privilege (Deshpande, 2010). Since these groups are ascribed at birth, they cannot be changed in one's lifetime (Simon & Thorat, 2020). As a result of which, the deeply entrenched nature of social stratification of the caste system has created massive social (Bros, 2014), educational (Parashari, 2019) and economic (Munshi, 2019) inequalities. Higher in the hierarchical structure, upper castes have more education, influence, and privileges than the lower castes. Lower castes at the bottom of the hierarchy have traditionally been ostracised and suffered from social stigma. Furthermore, existing at the bottom of caste, class and gender hierarchies, women from marginalised groups experience the worst forms of stigma,

✉ Akshay Johri  
ajohri139@gmail.com

<sup>1</sup> Department of Psychology, University of Delhi, New Delhi, India

<sup>2</sup> Department of Psychology, Daulat Ram College, University of Delhi, New Delhi, India

discrimination and deprivation (Pal, 2018). Hence, discrimination based on ethnicity permeates all aspects of life and leads to poorer well-being outcomes (Benner et al., 2018).

Most research on caste has been located in rural areas where caste is visible and is a dominant and pervasive aspect of an individual's life. Cities and urban areas, on the contrary, are often considered more progressive. Scholars have claimed that caste barriers are less rigid in urban spaces as the traditional social interactions and norms in villages and rural areas are challenged in urban areas (Ahuja & Ostermann, 2016). However, the recent accounts of incidents in urban areas related to caste discrimination in higher elite educational institutes leading to suicides (Mondal, 2016; Satheesh, 2019), the practice of untouchability (Coffey et al., 2018), and intra-caste marriage (Ahuja & Ostermann, 2016) reveal that caste still plays a significant role in urban areas.

Like lower castes, women in India have constantly faced and fought against discrimination. Moreover, the intersection of multiple identities such as caste, class and religion separates women across India and their experiences of oppression and marginalisation. Researchers have argued that women in India are torn apart between societal expectations and creating an identity for themselves apart from being mothers, wives, or daughters (Razvi & Roth, 2010). Despite research on women studies and gender studies, very few have examined the interconnectedness of gender with caste, class, race and sexual orientation, and most of the research on intersectionality has focused on the western contexts of gender with class or race (Mrudula et al., 2013). This research extends the literature on well-being and intersectionality, examining whether there are caste and gender differences in life satisfaction and well-being residing in urban areas; and whether there are differences in life satisfaction and well-being at the intersections of both caste and gender.

## The Caste System

Originally based on the Hindu Varna system, the centuries-old caste system classifies people into endogamous groups based on their occupations (Srinivas, 2003). These groups are ranked by hierarchy and social order in society. Broadly, these four groups are- Brahmins (scholars and priests), followed by Kshatriyas (warriors and kings), followed by Vaishyas (merchants and traders), and then Shudras (service class). A fifth category, called Atishudras, known today as *Dalits*, were historically excluded from the caste system (Pick & Dayaram, 2006; Sankaran et al., 2017). They were assigned the jobs of cleaning, scavenging and skinning carcasses and were seen as polluted and regarded as “untouchables” (Munshi, 2019). Amongst the

five groups, Shudras and Dalits were considered the lowest in the caste hierarchy and traditionally have been ostracised and suffered from social stigma. As these groups were hereditary and had their own rules and customs, they defined many aspects of an individual's lives, such as civic rights, access to education, food habits, privileges and marriage (Patel, 2017). Endogamy enforced the isolation of Shudras and Dalits and restricted social interactions with other groups (Simon & Thorat, 2020). Thus, centuries of social isolation accompanied by denial of basic fundamental rights integral for growth and development, unequal occupational opportunities, and lack of agency and fraternity resulted in a detrimental effect on their psyche (Simon & Thorat, 2020).

After India's independence in 1947, the Indian government took several policy measures and initiatives to dissolve the caste-based hierarchical system and emancipate the status of historically disadvantaged castes. One such provision was the affirmative action program which reserved positions in higher education institutions and certain government jobs for individuals from historically disadvantaged castes (Munshi, 2019). For this, the government of India renamed and reordered the previously existing caste groups into four larger groups. The previously higher ranked castes (i.e., Brahmins, Kshatriyas, and Vaishyas) were categorised as general castes, while Shudras and Dalits collectively constituted as scheduled castes (SC). Indigenous ethnic groups which have remained socially and economically marginalised due to their spatial and cultural livelihood were classified as scheduled tribes (ST); and more recently, another group of castes that primarily belonged to Shudras and a few Kshatriya castes as well are referred to as other backward castes (OBC) (Munshi, 2019; Tiwari et al., 2021). However, despite the increased awareness and government policies (Rajadesingan et al., 2019), caste is still prevalent in Indian society.

Not only in Indian society, but caste also shows its presence in other South Asian countries (Thapa et al., 2021), making the caste system a global issue. Researchers have also revealed the prominence of caste discrimination in the UK (Dhanda, 2017; Gorringer et al., 2017), Kuwait and the UAE (Leonard, 2005). Studies have revealed that caste discrimination is a major issue in the USA and the Dalit diaspora in the US faces severe workplace discrimination (Dutt, 2020; Zwick-Maitreyi et al., 2017). Research has also revealed that the Indian diaspora in the US is less open to inter-caste marriages (Adur & Narayan, 2017; Rajadesingan et al., 2019). An issue erupted regarding erasing the caste system from California school textbooks (Soundararajan, 2016), which reveals active efforts to negate the experiences of the caste system globally. Hence, not only is caste carried forward globally, and

discrimination done on an everyday basis, but at the same time, there is an active effort to deny its existence.

### Caste, Gender and Well-Being

Even after making laws and policy initiatives to emancipate the disadvantaged caste groups in India, caste-based social exclusion and resultant mental health issues are still prevalent in Indian society. Psychological research is beginning to link social identities such as caste and gender to mental health and well-being. Studies have shown that lower caste individuals have lower mental health than upper-caste individuals (Gupta & Coffey, 2020) and report social isolation, low self-esteem, low self-confidence, withdrawal, and anger (Pal, 2015). Higher levels of depression have been found in individuals from lower castes (Mathias et al., 2015) and have the highest odds of hypertension compared to privileged upper caste members (Uddin et al., 2020). In terms of life satisfaction, the castes at the top are more satisfied than the lower and middle castes (Fontaine & Yamada, 2014; Landeghem & Vandeplass, 2018; Spears, 2016). In Nepal, a country that follows a caste system similar to India, youth from low caste groups reported more anxiety, depression, and low self-esteem than their counterparts from other caste groups (French, 2020; Kiang et al., 2020).

Furthermore, a patriarchal and caste-ridden society makes life even more difficult for individuals who belong to both marginalised caste and gender groups. The hierarchy of caste and gender makes lower caste women face “double discrimination” (Paik, 2014) and suffer from double the effects of marginalisation. Dalit women are doubly disadvantaged due to their low-caste status and the lower status of women in Hindu society, also known as the “Dalit among Dalits” (Thapa et al., 2021). Research suggests that discrimination and violence continue based on women’s intersecting caste and gender identities (Pal, 2014, 2015). Women with marginalised identities such as low caste and low economic status are more vulnerable to accessing fundamental human rights, opportunities and resources, and experience various forms of discrimination. Researchers have mentioned that the mechanisms of oppression and the experiences of social suffering involved at the intersections of caste, class and gender are still unknown even after affecting millions of people (Jadhav et al., 2016). This highlights that caste and gender affect all parts of people’s lives, making it imperative to explore them in more detail.

### Intersectionality

Since both caste and gender identities have their underlying social processes of inequality and power dynamics, the

examination of their interaction requires an intersectional lens to understand the complex nature of the two social identities and their relationship to well-being. Crenshaw (1989, 1991) introduced the term intersectionality, rooted in Black feminist thought and argued that the interaction of both racism and sexism influences the experiences of oppression and discrimination and not racism or sexism alone (Halim et al., 2016). Since the introduction of intersectionality as an analytical framework, researchers have used it to study the disadvantages, oppression and discrimination arising from multiple intersections of identities like race, class, and gender (Anthias, 2012; Yuval-Davis, 2015). There have been three broad assumptions of intersectionality (Else-Quest & Hyde, 2016)- first; individuals have multiple social identities that overlap to create an “intersection” that determines their lived experiences. Secondly, in each social identity, an element of inequality is embedded. Thirdly, recognising those inequalities is essential as they are fostered by social contexts and experienced by individuals psychologically. In the South Asian context, it is essential to acknowledge caste and gender as two major axes of oppression. Researchers have mentioned that intersectionality as an analytical and theoretical framework has been used recently in India (Gupta, 2019; Haq, 2013; Mrudula et al., 2013; Rege et al., 2013). However, to the authors’ knowledge, its use has been limited to oppression dynamics and pathological conditions. The review of the existing literature suggests a dearth of research within psychological science that aims to explore gender and caste intersectionality and their impact on well-being.

### Well-Being and Life Satisfaction

World Health Organization defines mental health as a “state of well-being in which every individual realises his or her potential, can cope with the normal stresses of life, can work productively and fruitfully, and can contribute to her or his community” (World Health Organization [WHO], 2005). The three core components of this definition are well-being, effective functioning of the individual and effective functioning of the society. In line with this definition, Keyes (2002) proposed a model of complete mental health which encompasses three broad aspects of emotional well-being (EWB), psychological well-being (PWB) and social well-being (SWB). Emotional well-being, which follows the hedonic well-being tradition and is synonymous with subjective well-being (Kahneman et al., 1999), comprises an affective component (high positive affect, low negative affect) and a cognitive component of life satisfaction (Diener et al., 1999; Ryan & Deci, 2001). Both psychological and social well-being are components of the eudaimonic tradition, focusing on optimal

functioning in individual and social life (Deci & Ryan, 2008). Psychological well-being combines insights from personal growth models, lifespan development, and positive mental health (Ryff, 1989). It outlined six dimensions for well-being guided and shaped by socio-demographic factors such as age, gender, caste and even lived experiences. These six dimensions: a positive evaluation of oneself and one's past (self-acceptance), a sense of continued growth and development (environmental mastery), the belief that one's life is purposeful and meaningful (purpose in life), quality relations with others (positive relationships), a sense of capacity to manage one's life and the surrounding world effectively (personal growth), and a sense of self-determination (autonomy) tap into the individual's ability to function and fulfil their potential (Ryff & Keyes, 1995).

However, psychological well-being does not necessarily reflect the influence of different socio-cultural contexts or the role of social relationships in understanding well-being. Therefore, Keyes (1998) argued the importance of optimal social functioning of individuals and theorised about social well-being. It consists of five dimensions: the quality of one's relationship to society and community (social integration), a construal of society based on the qualities of the people (social acceptance), a belief that one is a vital member of the society (social contribution), a belief in the evolution of society realised through its institutions and citizens (social actualisation) and a belief that society is discernible, sensible and predictable (social coherence). These five components positively correlate with measures of happiness, life satisfaction, generativity, optimism, feelings of neighbourhood trust and safety, subjective perceptions of people's physical health and the degree of past community involvement (Keyes, 1998). Hence, these five factors, taken together, indicate how structural influences impact individual functioning and social well-being.

Thus, Keyes' model of complete mental health consists of both hedonic and eudaimonic components of well-being encompassing emotional, psychological and social well-being (Keyes, 2002). In India, the model has been used to examine the mediating role of gratitude on well-being (Sharma & Singh, 2019) and to study the mental health and well-being of adolescents (Singh et al., 2015), school-going children (Singh & Junnarkar, 2015), mental health professionals (Aggarwal & Sriram, 2018) and among the caregivers of orphan and separated children (Keyes et al., 2021). The authors have not come across any study that uses the complete model of mental health to examine well-being in the capacity of caste, gender and their interactions.

Another critical index of well-being and societal progress is the measure of life satisfaction. It is one of the components of subjective well-being, and researchers define it as a cognitive judgement of one's life according to

their chosen criteria (Shin & Johnson, 1978). In other words, a person with high life satisfaction evaluates that they meet their goals, desires, and standards according to the current conditions of their life (Diener et al., 1985). Although life satisfaction correlates with the affective components of subjective well-being (high positive affect, low negative affect), it forms a separate factor from the affective aspects of subjective well-being (Lucas et al., 1996). Moreover, compared with affective components, life satisfaction tends to be based more on stable sources of information, such as global assessments about one's life circumstances and domains of life, rather than specific events or activities (Luhmann et al., 2012). Therefore, from an assessment perspective, measures of both the affective and cognitive components of subjective well-being are essential to provide a complete measurement possible (Diener & Seligman, 2004). Traditionally, there are two theoretical approaches to assessing life satisfaction. The "top-down" approach suggests that life satisfaction results from stable personality traits (Steel et al., 2008). While the "bottom-up" approach suggests that life satisfaction attributes to multiple domains in life, such as relationships, work, leisure, health and the like (Pavot & Diener, 2008). This study considers life satisfaction from the bottom-up perspective and examines how caste and gender identities impact life satisfaction. Though life satisfaction has been studied in diverse fields, very few studies document the relation between caste identities and life satisfaction. In a one-off study, Spears (2016) found that SCs (scheduled castes), STs (scheduled tribes), and OBCs (other backward classes) report lower life satisfaction compared to general castes. It suggests that more research in this domain is necessary to account for something substantive.

## Theoretical Framework

As mentioned above, Keyes' model of mental health consists of both hedonic and eudaimonic components of well-being encompassing emotional, psychological and social well-being. It emerged as a broad construct of well-being and is currently perhaps the most inclusive of the well-being models, hence its relevance to this study. Looking at well-being from a lens that it is something worth striving for presents a significantly individualised perspective of well-being and, in the process, obscures the socio-political and structural aspects that impact well-being, over which individuals might not have any control. Moreover, an individual's well-being cannot exist in a vacuum. It is dependent on various social and structural processes larger than the individual. It is also important to note that structural factors are not the same across different social contexts, and researchers must recognise these contextual

differences in theorising well-being. In the context of this study, the authors recognise caste and gender as two dominant structural factors characterised by adversity and marginalisation that impact an individual's well-being. Moreover, the intersectionality of caste and gender produces inequalities that determine an individual's lived experiences, which positively or negatively impact their quality of life and, in turn, their overall well-being.

The study used intersectionality as it allowed the exploration of the impact of caste and gender identities on life satisfaction and well-being by better reflecting the real world's complexity. Intersectionality moves beyond understanding social identities either in isolation from one another (e.g., gender as separate from caste) or in an additive manner (e.g., gender plus caste equals a more significant disadvantage). Instead, it highlights the various social identities as mutually constituted and intersecting in dynamic and interactive ways (Bowleg, 2012; Hankivsky, 2012). For example, a Dalit man may experience both social privilege (by being a man) and oppression (due to their low caste). Moreover, caste is such a complex phenomenon that if the caste markers of a Dalit man are not visible or revealed to the society (for example, through their surname or by virtue of being in an urban area where caste identities are not inherently visible), the individual might not face caste oppression. Nonetheless, the individual would be constantly vigilant about their caste identity as being a Dalit is historically seen as a stigmatised identity. This continual vigilance might affect their well-being and mental health in the long run (Lewis et al., 2012). This would become even more complex when considering class, (dis)ability and sexual orientation. When we look at well-being from an individualistic perspective or as something that an individual should strive for, we ignore its structural aspects. Thus, intersectionality considers how individuals can simultaneously experience and embody privileges and disadvantages as different social identities combine in varied ways across time and diverse locations.

Keyes's model fits well with an intersectional framework as it explores both subjective happiness (emotional well-being) and optimal human functioning vis-à-vis the individual (psychological well-being) and society (social well-being). The assumptions of intersectionality are that individuals' multiple social identities overlap to create an intersection of graded inequalities that determine their lived experiences would directly impact their emotional well-being. Moreover, as the inequalities are fostered by social contexts and experienced by individuals psychologically, those identities would directly influence an individual's social and psychological well-being, as the experiences and the larger societal contexts would influence their functioning. Using well-being and intersectionality in the study could serve as evidence that the social

contexts and structural factors of the community and the larger society within which the people live impact their overall well-being. Hence, taking caste and gender as the two identities, this cross-sectional study uses the Keyes well-being model to explore life satisfaction and well-being in individuals belonging to a higher and lower caste and men and women. Additionally, the study uses the lens of intersectionality to explore the interaction of caste and gender on life satisfaction and well-being.

## Present Study

Despite the long history of social stratification, with individuals from low caste groups experiencing oppression and systemic discrimination, academic discourse on caste focuses on discrimination in different spheres, such as economic, social, and political, putting a skewed emphasis on the psychological impact. A closer look at the research conducted on caste identities would reveal that majority of them are based in rural areas, which adds to the growing consensus that caste is a thing of the past and limited to rural India. Thus, we need more research on caste identities and how these identities play out in urban spaces, where the dominant narrative is that class is what matters rather than caste. Moreover, looking at caste and class as dichotomous reveals a massive gap in the literature and understanding of how caste and class identities play out. Studies have documented how untouchability and caste discrimination are still prevalent in urban (and rural) India (Coffey et al., 2018) and that among educated middle-class Indians, 70 per cent of individuals still marry within caste (Munshi, 2014). Therefore, studying how life satisfaction and well-being are affected across caste groups in urban areas becomes imperative. Few studies have focused on how caste is linked to mental health and well-being (Kiang et al., 2020). The present research thus tends to bridge the gap of literature on caste identities in India and add to the burgeoning literature on life satisfaction and well-being.

Against the backdrop of urban India, this study draws from intersectionality to explore life satisfaction and well-being at the intersections of caste and gender. The present study would add to the literature, first by testing for caste and gender differences in life satisfaction and well-being. Consistent with the previous literature, scheduled caste individuals are expected to have poorer life satisfaction and well-being than general caste individuals; and women are expected to have poorer life satisfaction and well-being than men across caste groups. Second, to test the hypothesis that caste and gender identities intersect with each other, this study will also test for the interaction between caste and gender on life satisfaction and well-being.

## Method

### Participants

The current research collected data from 465 individuals aged between 18–35 years (Mean = 24.79, SD = 3.94), of which 237 belonged to the general category (51%), and 228 belonged to the scheduled caste category (49%). General category respondents were composed of 104 men and 133 women, while scheduled caste participants consisted of 135 men and 93 women. Participants resided in urban centres in India, such as Delhi, Chandigarh, Lucknow, Mumbai, Bengaluru and Kolkata. A section of the participants were students studying in colleges and universities, while others were doctors, engineers, artists, freelancers, researchers, lawyers, and government servants. Since English is the dominant working language in India, the measures were administered in basic English, and it was ensured that the items were easy to comprehend.

### Measures

#### *Demographic Information*

The sample comprised young adults aged between 18–35, and the study involved the use of two demographic variables— caste and gender, as independent variables. Hence, the authors collected demographic information related to age, gender, caste and occupation. The inclusion criteria were age range between 18–35, general and scheduled caste for caste categories, and men and women for gender.

#### *Satisfaction with Life Scale*

The Satisfaction with Life Scale (Diener et al., 1985) measures global cognitive judgements of satisfaction with one's life. It comprises of 5 items (e.g., “the conditions of my life are excellent”, “So far I have gotten the important things I want in life”) asking participants to indicate how much they agree to each item on a 7-point Likert scale (1 = *Strongly disagree*, 7 = *Strongly agree*). The Cronbach alpha of items in the current study was 0.80.

#### *Mental Health Continuum- Short Form*

The Mental Health Continuum Short Form (MHC-SF; Keyes et al., 2008) measures mental health on a 6-point Likert scale (0 = *Never*, 5 = *Everyday*). It comprises 14 items, of which three measure the frequency of emotional well-being, (e.g., “During the past month, how often did you feel”: ‘happy’), six measure psychological well-being (e.g., “that you had experiences that challenged you to

grow and become a better person”), and five measure social well-being (e.g., “that you had something important to contribute to society”). The total score was assessed by summing the items for each dimension, with higher scores indicating superior levels of well-being. Cronbach alpha of items in the study was 0.81 for emotional well-being (EWB); 0.70 for social well-being (SWB); 0.84 for psychological well-being (PWB), and the composite score of MHC-SF was 0.88.

### Procedure

Data for the survey were collected between March and June 2020 during the pandemic. Participants were invited to the study “Well-Being and Mental Health in young adults” using a link to the Qualtrics survey posted on various social media sites, such as WhatsApp, Facebook, LinkedIn and Reddit. All participants read the consent form that expressed their voluntary participation in the study and ensured confidentiality of information. Upon agreeing to the consent form, participants completed measures of life satisfaction and well-being. After completing the survey, participants were asked to fill up demographic information, such as age, gender, occupation and caste.

### Results

A two-way MANOVA was run with two independent variables—caste and gender—and two dependent variables—life satisfaction and well-being. Data were analysed using SPSS 26. Prior to the analyses, data were screened to see if it met the assumptions of MANOVA (Tabachnick et al., 2007). Few participants were identified as univariate outliers, as assessed by inspection of a boxplot, but no multivariate outliers in the data, evaluated by Mahalanobis distance ( $p > 0.001$ ). All participants were retained for this analysis. Life satisfaction and well-being scores were normally distributed, visually assessed by normal Q-Q plots. There was a linear relationship between the dependent variables, and no evidence of multicollinearity was found between them. Covariance matrices were homogeneous, as assessed by Box's  $M$  test.

### Multivariate Analyses

The first two objectives of the study were to assess caste-based and gender differences in life satisfaction and well-being. Significant multivariate main effects were found for caste,  $F(4,458) = 5.038$ ,  $p = 0.001$ , Wilks'  $\Lambda = 0.958$  and for gender,  $F(4, 458) = 6.153$ ,  $p < 0.001$ , Wilks'  $\Lambda = 0.949$  on the combined dependent variables. The third objective was to assess the interaction effect between caste

and gender on life satisfaction and well-being. Contrary to the authors' hypothesis, the interaction effect between gender and caste on the combined dependent variables was not statistically significant, with  $F(4, 458) = 0.938$ ,  $p = 0.442$ , Wilks'  $\Lambda = 0.992$ . Hence, the hypothesis that there will be an interaction between caste and gender on life satisfaction and well-being is rejected. A closer inspection of the mean scores of the four groups (general men, general women, scheduled caste men and scheduled caste women) reveals scheduled caste men to have the lowest scores in both the variables of life satisfaction and well-being and its three subscales. Table 1 corresponds to the descriptive statistics showing mean and standard deviations for the four groups of general and scheduled caste men and women, while Table 2 corresponds to the effect of caste, gender and the interaction of caste and gender on the combined dependent variable.

### Univariate Analyses of Caste

Follow-up univariate two-way ANOVAs were used to examine individual dependent variable contributions to main effects. There was a statistically significant main effect of caste for life satisfaction, where general participants ( $M = 20.56$ ,  $SE = 0.41$ ) scored higher than scheduled caste participants ( $M = 18.18$ ,  $SE = 0.43$ ). Thus, the hypothesis that scheduled caste participants would fare worse in life satisfaction is accepted. Significant differences were also found for total well-being in which general participants ( $M = 36.71$ ,  $SE = 0.87$ ) scored higher than scheduled caste participants ( $M = 33.45$ ,  $SE = 0.90$ ). Therefore, in line with previous literature, the hypothesis that scheduled caste participants would have poor well-being is accepted.

In the sub-scales of MHC, a significant difference was found for emotional well-being (EWB) and social well-being (SWB), in which general respondents (EWB:  $M = 8.86$ ,  $SE = 0.23$ ; SWB:  $M = 9.86$ ,  $SE = 0.34$ ) scored higher than scheduled caste respondents (EWB:  $M = 7.68$ ,  $SE = 0.24$ ; SWB:  $M = 8.79$ ,  $SE = 0.35$ ). However, general respondents, in spite of having higher psychological well-being ( $M = 17.98$ ,  $SD = 0.44$ ) than scheduled castes ( $M = 16.97$ ,  $SD = 0.46$ ), no significant differences in scores for psychological well-being (PWB) were found. Table 3 shows the  $F$ -ratios and  $p$ -values for the effects of caste, gender and interaction of caste and gender on dependent variables of life satisfaction, well-being and its subscales. Table 4 shows the values of estimated marginal means for caste and gender.

### Univariate Analyses of Gender

There was a statistically significant main effect of gender on life satisfaction, where women ( $M = 20.75$ ,  $SE = 0.43$ ) scored higher than men ( $M = 17.99$ ,  $SE = 0.41$ ). This result was contrary to the author's hypothesis. The authors predicted that women in the patriarchal Indian society would have lower life satisfaction than men. In terms of well-being, no statistically main effect of gender for well-being was seen, although the mean scores for women ( $M = 35.85$ ,  $SE = 0.90$ ) were higher than men ( $M = 34.31$ ,  $SE = 0.87$ ).

### Discussion

This study investigated the effects of caste and gender and their interaction on life satisfaction and well-being in urban areas. The findings provided evidence that caste and gender play a role in shaping an individual's well-being. Scheduled caste individuals have significantly lower levels of life satisfaction and well-being, and women across caste groups have significantly higher levels of life satisfaction than men. The study did not find an interaction between caste and gender vis-à-vis life satisfaction and well-being.

### Caste Differences

In line with the authors' hypothesis, the results revealed significant caste differences, which align with previous studies that suggest lower-caste individuals have lower well-being and life satisfaction (Fontaine & Yamada, 2014; Landeghem & Vandeplas, 2018; Spears, 2016). However, as discussed beforehand, most previous studies focused on rural areas where caste plays a dominant role in everyday life. While the caste system may not be visible in the same manner as villages, the findings of the study revealed that caste might have a significant role to play in urban areas as well. Based on previous literature, authors hypothesised that there would be caste differences between general category and SC individuals, with SC individuals having significantly lower life satisfaction and well-being levels. The findings of the study revealed the same, with SC individuals scoring significantly low on the scales of life satisfaction and well-being, with significant differences in two of the three subcomponents of well-being: emotional well-being and social well-being.

Research has shown that high scores in social well-being reflect a heightened sense of social connectedness and acceptance that can boost social resources and act as a buffer against stressful situations (Dang, 2014). Thus, general category individuals' higher scores on well-being and life satisfaction can be attributed to the fact that they

**Table 1** Descriptive statistics

Dependent variable	General				Scheduled caste			
	Men ( <i>N</i> = 104)		Women ( <i>N</i> = 133)		Men ( <i>N</i> = 135)		Women ( <i>N</i> = 93)	
	<i>M</i>	<i>SD</i>	<i>M</i>	<i>SD</i>	<i>M</i>	<i>SD</i>	<i>M</i>	<i>SD</i>
SWL	19.38	6.17	21.75	6.51	16.60	6.21	19.75	6.68
EWB	8.54	3.83	9.18	3.37	7.38	3.73	7.97	3.54
SWB	10.17	6.05	9.55	5.42	8.28	4.74	9.31	4.76
PWB	17.79	7.32	18.16	6.72	16.45	7.01	17.50	6.21
MHC	36.51	15.03	36.90	13.48	32.11	12.81	34.79	12.07

*M* Mean; *SD* Standard Deviation; *N* Sample Size; *SWL* Satisfaction with Life; *EWB* Emotional Well-Being; *SWB* Social Well-Being; *PWB* Psychological Well-Being; *MHC* Mental Health Continuum

**Table 2** Multivariate analyses of caste, gender and interaction of caste and gender

Effect	Wilks' Lambda	<i>F</i> -ratio	<i>p</i> value
Caste	.958	5.03	.001**
Gender	.949	6.15	< .001***
Caste*Gender	.992	.93	.442

\*\*  $p < .01$ , \*\*\*  $p < .001$

**Table 3** Effects of caste, gender and interaction of caste and gender on dependent variables

Dependent variable	Caste		Gender		Caste*Gender	
	<i>F</i> (1,461)	<i>p</i>	<i>F</i> (1,461)	<i>p</i>	<i>F</i> (1,461)	<i>p</i>
SWL	15.84	< .001***	21.10	< .001***	.42	.517
EWB	12.16	.001**	3.28	.070	.00	.945
SWB	4.66	.031*	.17	.676	2.77	.096
PWB	2.42	.120	1.21	.270	.28	.594
MHC	6.70	.010*	1.48	.223	.82	.364

*SWL* Satisfaction with Life; *EWB* Emotional Well-Being; *SWB* Social Well-Being; *PWB* Psychological Well-Being; *MHC* Mental Health Continuum

\*  $p < .05$ ; \*\*  $p < .01$  \*\*\*  $p < .001$

might have better psychological resources to cope with challenging personal and social situations. Social well-being assesses an individual's ability to contribute something important to the society (social contribution) and a sense of belongingness (social integration), acceptance of people as they are (social acceptance), a belief that overall, their society is a good place to be (social growth) and a belief that the way their society works makes sense to them (social coherence). Hence, these questions might make sense for a higher caste individual who is less likely to experience oppression and discrimination and neither has to hide a fundamental aspect of their social identity.

Therefore, a higher caste individual might see society as a fair place and make sense of it. However, it might be an everyday battle for lower caste individuals to make sense of their caste identity and negotiate them in social circles before making sense of the surrounding society and belonging despite the intergenerational trauma and oppression. Hence, this might contribute to lower scores on social well-being in the study.

A closer look at the descriptive statistics revealed that although SC individuals did not score significantly low on the third subcomponent, psychological well-being, their average scores were less than general category individuals.



**Table 4** Estimated marginal means for Caste and Gender

Dependent variable	Caste				Gender			
	General		Scheduled caste		Men		Women	
	Mean	SE	Mean	SE	Mean	SE	Mean	SE
SWL	20.56	.41	18.18	.43	17.99	.41	20.75	.43
EWB	8.86	.23	7.68	.24	7.96	.23	8.58	.24
SWB	9.86	.34	8.79	.35	9.22	.34	9.43	.35
PWB	17.98	.44	16.97	.46	17.12	.44	17.83	.46
MHC	36.71	.87	33.45	.90	34.31	.87	35.85	.90

*S.E* Standard Error; *SWL* Satisfaction with life; *EWB* Emotional Well-Being; *SWB* Social Well-Being; *PWB* Psychological Well-Being, *MHC* Mental Health Continuum

Psychological well-being was examined as composed of six components: self-acceptance, environmental mastery, positive relationships, personal growth, autonomy, and purpose in life. These components may serve as psychological resources for individuals to cope with challenging life situations and exhibit resilient outcomes (Sagone & De Caroli, 2014). Hence, higher castes' high scores on psychological well-being might suggest higher psychological functioning and protective factors for mental health and well-being. This might have contributed to higher life satisfaction and happiness than SC individuals. Moreover, observing the average overall well-being scores, the authors found that SC individuals are below the scale's mid-point. Thus, most of them are expected to lie towards the languishing spectrum. On the other hand, general caste individuals' average overall well-being scores are slightly above the mid-point scale. While general caste individuals' well-being might not necessarily be very high, it is not as low as SC individuals' either. Hence, it can be said that SC individuals are less satisfied with their lives, are less happy, and have lower social well-being than general category individuals.

Moreover, it is left to speculation how the pandemic has impacted well-being in this study as the data was collected in the initial phases of the pandemic. Research reveals that lower caste candidates are less likely to get hired when compared with general category candidates (Das, 2013; Mosse, 2018; Siddique, 2011;). Furthermore, a study conducted after data collection for this paper found that the largest decline in employment during the pandemic occurred for scheduled caste, followed by scheduled tribe, followed by other backward classes, and then general castes (Deshpande, 2021). Hence, it may show SC individuals' heightened fear of downward mobility as opposed to their higher caste colleagues (Iversen et al., 2016). The combination of these trends makes persons of lower castes more prone to unemployment and downward social

mobility, which in turn might lead to worse well-being and life satisfaction outcomes (Bartelink et al., 2020; Lakshmanasamy & Maya, 2020; Sinha, 2018), which is also congruent in the authors' findings.

There is also considerable evidence that experiencing or perceiving discrimination triggers stress responses and contributes to poor mental health and well-being (Myer et al., 2008). Previous research has documented greater perceptions of discrimination linked to poor mental health, poorer well-being and poorer self-esteem (Benner et al., 2018; de Freitas et al., 2018). Thus, while caste directly might not influence well-being, it could indirectly influence stress factors that might lead to lower well-being for low caste individuals, which is reflected in our findings. Workplace or higher education is not the beginning of discrimination but rather its continuation. Thus, caste continues to shape itself in modern, privileged, urban India covertly, leading to poorer mental health and well-being outcomes for disadvantaged castes. The findings suggest that caste might be still prevalent, and a caste-based consciousness dictates how people think and act, leading to poorer well-being of scheduled caste individuals.

### Gender Differences

As opposed to the authors' expectations and hypothesis, no differences were found for gender and its effect on well-being. A closer look at the descriptive statistics reveals that despite having no significant differences, women scored higher than men on well-being and all three of its sub-components- emotional well-being, social well-being and psychological well-being. Women scored significantly higher than men across caste groups regarding life satisfaction. The findings contradict recent metanalytical findings that men have higher life satisfaction than women (Batz-Barbarich et al., 2018). Instead, these results are congruent with previous studies (Jovanović, 2017; Tay

et al., 2014), indicating that women have higher life satisfaction than men.

The results provide an interesting insight into how gender affects well-being in urban areas. Women in India are subject to rigid patriarchal norms both within and outside their homes. In most Indian households, men are favoured more than women in terms of food and education and have more commanding power in almost every family matter. Male bias in households is associated with positive mental health for men and unfavourable for women (Ram et al., 2014). Thus, in a rigid patriarchal environment, women might have difficulty taking control of their own lives, which may, in turn, reflect a lower level of life satisfaction, as shown by previous research (Huebner et al., 2004). However, as discussed beforehand, urban spaces are often considered more progressive than rural areas. The traditional social orders in rural areas are challenged in urban spaces. The authors' findings, therefore, might reflect that urban Indian women have more agency, which leads to higher life satisfaction.

Research has shown that among more educated individuals, women scored higher in life satisfaction than men (Graham & Chattopadhyay, 2013). It might explain the gender differences in our findings as the sample consisted of highly educated and working individuals. Moreover, considering that the sample comprises people ranging from 18–35 years of age, research has shown that younger women (18–24, 25–34, and 35–44) reported higher levels of life satisfaction than younger men. In contrast, older men (above 45 years of age) reported higher levels of life satisfaction than older women (Inglehart, 2002). These results can be partially explained by findings that older women are at higher risk of health problems, are widowed, and have lower material resources (e.g., Pinquart & Sörnsen, 2001).

One could also speculate on this finding in the light of the pandemic. As a national lockdown was imposed due to the Covid-19 pandemic, people lost their jobs as the Indian economy came to a standstill. As men form a more significant part of the workforce in India and traditionally have been seen as “bread-earners” of the family, the anticipation and fear of job loss and uncertainty about the future might have been a factor in their life satisfaction. Research shows that more men lost employment (in absolute terms) than women during the pandemic (Deshpande, 2021). Women's higher life satisfaction and well-being scores might also be explained through the concept of “Depressed Entitlement” (Hogue & Yoder, 2003), which suggests that women have lower expectations of benefits and recognition than their male counterparts.

Conflicting results in studies on gender differences in life satisfaction indicated that several moderators may influence the relationship between gender and life

satisfaction. Several studies have shown that gender and life satisfaction depend on national contexts, socio-cultural conditions, and demographic variables (e.g., Meisenberg & Woodley, 2015). Thus, gender differences remain inconclusive vis-à-vis life satisfaction and vary for life satisfaction and well-being depending on sampling and methodological differences and individual and social factors that might intersect with gender identities.

### Caste and Gender Intersectionality

Another objective of the study was to explore the life satisfaction and well-being scores at the intersections of caste and gender. The multivariate data revealed that caste by gender interaction was not statistically insignificant, contrary to the authors' hypothesis. The authors assumed that lower caste women would have lower well-being and life satisfaction as they struggled with patriarchy and casteism. However, as mentioned above, women across caste groups scored significantly higher than men on life satisfaction, and their average scores on well-being also were higher than men. A closer look at demographic data revealed that both general and SC women have higher mean scores than general caste men on life satisfaction. Moreover, SC men have the lowest mean scores of life satisfaction and well-being (and its subscales) compared to the rest of the three groups (i.e., general caste men, women and SC women). These findings provide a fascinating picture of the intersection of caste and gender dynamics regarding well-being outcomes. As mentioned above, the traditional social orders are challenged in urban spaces, and these findings are evidence of that. The finding that SC women scored higher on life satisfaction than higher caste men reveals the complex and dynamic nature of intersectional identities. The lower scores of SC men might have contributed to the non-significant results, which may raise questions about whether psychological theories and principles of well-being fully represent the range of diversity of human experiences. Therefore, exploring how these social identities intersect in myriad, complex and multidimensional ways in future studies would be worthwhile. The authors' analysis implies that caste and gender play a role in forming an individual's perception of their lives and well-being outcomes and provides a snapshot of how caste identities operate in urban spaces. The findings of the study contribute to the ongoing discourse by providing evidence that caste is alive in cities and urban areas, caste-based discrimination is prevalent, and its effects on the psychological health of historically disadvantaged caste groups are worth examining. It is also imperative for policies to consider the inequality in psychological and behavioural aspects of individuals to promote a more just and egalitarian society.

## Limitations and Future Directions

The study integrate intersectionality with mental health and well-being literature by focusing on multiple social identities without sufficient attention to power inequities, which is not always congruent with intersectionality's emphasis on systems of inequality and privilege (Syed & Ajayi, 2018). A strong intersectionality framework involves the analysis of identities and interlocking systems of power and privilege, while weak intersectionality research includes investigations of multiple identities, usually as demographic variables, without discussion of systems of inequality (Parent et al., 2013; Shin et al., 2017). Therefore, future intersectionality research should explore the well-being of the marginalised groups by including the assessment of structural factors like educational and economic outcomes and analysing discrimination. Moreover, for a rich and nuanced analysis, it is suggested that quantitative surveys complement in-depth qualitative interviews, which would help provide a clear picture of how caste dynamics play out for mental health and well-being. Therefore, combining both qualitative and quantitative strategies allows for utilising both methods' strengths when conducting intersectionality research (Mays & Ghavami, 2018).

Another limitation of the study is that it was cross-sectional, and no causal inferences could be drawn from the study. Moreover, the data on individuals' life satisfaction and well-being were collected during the pandemic, from April to July 2020. The Indian government imposed a nationwide lockdown, and the country came to a standstill. The unprecedented situation caused a lot of uncertainty, fear of job loss, and the fear of contracting Covid-19. This might have hugely impacted the mental health of individuals, and it might have been reflected in our dataset as well. Future studies should therefore control for such external factors and look at causal inferences. The survey was collected entirely online, which has its strengths as online surveys are created quickly and distributed with an extensive reach, especially in times of the pandemic. However, they are only accessed by those who have internet access and are sufficiently biased towards the subject of study (Andrade, 2020). In our research, this could also be perceived as a strength as the study's target population were individuals from urban settings.

There is a paucity of research on the effects of social identities on well-being, and there is a dire need for further research on these topics. Future studies should also focus on how individuals cope with marginalised and stigmatised social identities. The current study focused on two caste categories, i.e., general and scheduled castes. Future studies should also employ other backward classes (OBCs) and

scheduled tribes (STs) for a more holistic approach to social identities. In an experiment led by Hoff and Pandey (2006, 2014), children were asked to solve mazes. When the children's castes were not revealed, low-caste children's performance was not significantly different from that of higher castes. However, when castes were publicly announced, the performance of lower caste children significantly dropped. Therefore, it would be interesting to explore how mental health and well-being are affected when marginalised identities are made salient.

## Implications of the Study

Psychologists and researchers can use the insights from the study to inform existing mechanisms of oppression, identity, and mental health processes, among other contexts. While it is true that as more individuals from marginalised groups gain social mobility and move to cities and urban areas, it might change their class status. However, the changing of class can lessen the salience of caste but does not remove it, and caste remains a significant identity marker in the Indian context, as portrayed by our findings. Moreover, the results that women across caste groups scored significantly higher on life satisfaction and had higher average scores on well-being does not negate that India is still a predominantly patriarchal society, and women across caste groups, religions and socioeconomic status enjoy less agency and liberty than men. The baggage of being the "bread-earner" and a de-facto head of the family creates vulnerabilities among men, and the Covid-19 pandemic only elevated it. Although men hold privilege and power based on gender, research has shown that many men do not seek help when they need it and refrain from receiving gender-sensitive psychological treatment (Mahalik et al., 2012). Hence, the results of the study provide an avenue for policy-makers and social scientists to further explore the declining trends of life satisfaction and well-being in men.

As mentioned earlier, higher psychological well-being scores might suggest higher psychological functioning and protective factors for mental health and well-being (Sagone & De Caroli, 2014). Individuals with intergenerational trauma and baggage of a stigmatised identity can find it difficult to cope with challenging life situations and exhibit resilient outcomes when deemed incompetent, which can have severe repercussions on their self-esteem. Moreover, it can be an uphill battle for individuals with stigmatised identities to have a heightened sense of social connectedness and acceptance, which boosts their social resources and acts as a buffer against stressful situations. Therefore, psychologists and policy-makers should use social psychological principles to foster greater inter-caste contact to

reduce biases and negative stereotypes against lower-caste individuals, affecting their self-confidence and self-esteem (Lowe, 2021), leading to lower well-being outcomes. Moreover, in institutions where inter-caste contact is already high (colleges, government workplaces), policy-makers should take steps to sensitise people towards modern casteism and affirmative action. Such policies generate negative stereotypes about incompetence and reinforce negative self-image against lower-caste individuals (Deshpande, 2019), leading to lower life satisfaction and overall well-being.

Individuals with marginalised identities also face well-being and mental health issues due to the historical erasure of their identities. The Indian education system has a bias due to the erasure of caste. Moreover, school textbooks explain caste in a very explanatory way which does not account for the representation of how Indians live and how their psyches operate. Hence, the caste syllabus should be made more inclusive of the historical aspects of caste and how it is practised in camouflaged forms in modern, urban India. The more people are sensitised about different social identities and intersections, the more people from oppressed and marginalised groups feel inclusive in the system, which might increase their social well-being. Likewise, it is also imperative that caste be taught in the psychology syllabus so that psychologists can do better intervention studies and produce caste-sensitive therapists. Positive psychological interventions and caste affirmative therapy can also lead people to achieve better mental health, well-being and life satisfaction.

## Conclusions

Studies on well-being and caste identities have focused majorly on rural areas and have often explored mental health and well-being from a pathological lens. There has been a dearth of research on how caste identities effect mental health and well-being in urban areas. The present study explored caste and gender differences in life satisfaction and well-being in urban areas. The authors ran a 2X2 MANOVA design with caste (general and scheduled caste) and gender (men and women) as the two independent variables and life satisfaction and well-being as the two dependent variables. In addition, the authors explored the interaction effect between caste and gender on the two dependent variables. As hypothesised, the authors found that individuals belonging to the general category scored significantly higher on life satisfaction and well-being. These findings align with previous studies, showing that high caste individuals have higher well-being scores than lower-caste individuals. Furthermore, in the sub-scales of well-being, general individuals scored significantly higher

on emotional and social well-being than scheduled caste individuals. In contrast, psychological well-being was not significantly different.

The authors also observed that women (across caste groups) scored significantly higher than men in life satisfaction, and no significant differences were found in mental health. In addition, there was no interaction effect between caste and gender. These results contradict some of the previous findings, which found gender differences in life satisfaction, with males having significantly higher life satisfaction than females and with findings of no difference. Hence, it is imperative to look at how gender dynamics have changed for the years that can account for such difference as these findings are contrary to what one could expect in a patriarchal society.

The results show that the role of caste cannot be ignored while studying well-being and mental health in both urban and rural spaces in India. Indeed, there have been efforts made by the community and governments towards increased social mobility and urbanisation, which might have changed some dynamics but has not radically altered the role of caste in an individual's life residing in India. Hence, the scope of caste and its pervasiveness in Indian society needs to be looked into in more detail through more longitudinal and robust cross-sectional studies. Moreover, in the future, psychological research should explore and dig deeper into how caste and gender class interact and create complex social relations and how both factors play a role in an individual's mental health and well-being.

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**Availability of Data and Materials** The data analysed for this paper are available from the author upon reasonable request meeting institutional guidelines.

**Declarations**

**Conflicts of interest** The authors declare that they have no conflict of interest.

**Ethics Approval** APA ethical guidelines were followed in conducting the study, including taking informed consent, ensuring participants have the right to withdraw at any point, maintaining anonymity and ensuring data safety.

**Consent to Participate** Informed consent was obtained from all individual participants included in the study.

**Consent for Publication** Both the authors have consented to submit the article for publication.

## References

- Adur, S. M., & Narayan, A. (2017). Stories of dalit diaspora: migration, life narratives, and caste in the us. *Biography*, 244–264.
- Aggarwal, P., & Sriram, S. (2018). Exploring well-being among mental health professionals in India. *Psychological Studies*, 63(4), 335–345.
- Ahuja, A., & Ostermann, S. L. (2016). Crossing caste boundaries in the modern Indian marriage market. *Studies in Comparative International Development*, 51(3), 365–387.
- Andrade, C. (2020). The limitations of online surveys. *Indian Journal of Psychological Medicine*, 42(6), 575–576.
- Anthias, F. (2012). Hierarchies of social location, class and intersectionality: Towards a translocational frame. *International Sociology*, 28(1), 121–138.
- Bartelink, V. H., Zay Ya, K., Gulbrandsson, K., & Bremberg, S. (2020). Unemployment among young people and mental health: A systematic review. *Scandinavian Journal of Public Health*, 48(5), 544–558.
- Batz-Barbarich, C., Tay, L., Kuykendall, L., & Cheung, H. K. (2018). A meta-analysis of gender differences in subjective well-being: Estimating effect sizes and associations with gender inequality. *Psychological Science*, 29(9), 1491–1503.
- Benner, A. D., Wang, Y., Shen, Y., Boyle, A. E., Polk, R., & Cheng, Y. P. (2018). Racial/ethnic discrimination and well-being during adolescence: A meta-analytic review. *American Psychologist*, 73(7), 855.
- Bowleg, L. (2012). The problem with the phrase women and minorities: Intersectionality—An important theoretical framework for public health. *American Journal of Public Health*, 102(7), 1267–1273.
- Bros, C. (2014). The burden of caste on social identity in India. *The Journal of Development Studies*, 50(10), 1411–1429.
- Coffey, D., Hathi, P., Khurana, N., & Thorat, A. (2018). Explicit prejudice. *Economic & Political Weekly*, 53(1), 47.
- Crenshaw, K. (1989). Demarginalizing the intersection of race and sex: A black feminist critique of antidiscrimination doctrine, feminist theory and antiracist politics. *u. Chi. Legal f.*, 139.
- Crenshaw, K. (1991). Mapping the margins: Identity politics, intersectionality, and violence against women. *Stanford Law Review*, 43(6), 1241–1299.
- Dang, M. T. (2014). Social connectedness and self-esteem: Predictors of resilience in mental health among maltreated homeless youth. *Issues in Mental Health Nursing*, 35(3), 212–219.
- Das, M. (2013). Exclusion and discrimination in the labor market (World Development Report 2013 Background Paper ID 2181701). Rochester, NY: The World Bank.
- de Freitas, D. F., Fernandes-Jesus, M., Ferreira, P. D., Coimbra, S., Teixeira, P. M., de Moura, A., & Fontaine, A. M. (2018). Psychological correlates of perceived ethnic discrimination in Europe: A meta-analysis. *Psychology of Violence*, 8(6), 712.
- Deci, E. L., & Ryan, R. M. (2008). Facilitating optimal motivation and psychological well-being across life's domains. *Canadian Psychology/psychologie Canadienne*, 49(1), 14.
- Deshpande, A. (2019). CASTE, CLASS, GENDER. *A Concise Handbook of the Indian Economy in the 21st Century*, 140.
- Deshpande, A. (2021). The Covid-19 pandemic and gendered division of paid work, domestic chores and leisure: evidence from India's first wave. *Economia Politica*, 1–26.
- Deshpande, M. S. (2010). *History of the Indian caste system and its impact on India today*. California University Press.
- Dhanda, M. (2017). Casteism amongst Punjabis in Britain. *Economic and Political Weekly*. (Vol. 52, Issue No. 3).
- Diener, E. D., Emmons, R. A., Larsen, R. J., & Griffin, S. (1985). The satisfaction with life scale. *Journal of Personality Assessment*, 49(1), 71–75.
- Diener, E., & Seligman, M. E. (2004). Beyond money: Toward an economy of well-being. *Psychological Science in the Public Interest*, 5(1), 1–31.
- Diener, E., Suh, E. M., Lucas, R. E., & Smith, H. L. (1999). Subjective well-being: Three decades of progress. *Psychological Bulletin*, 125(2), 276.
- Dutt, Y. (2020). The specter of caste in Silicon Valley. *The New York Times*.
- Else-Quest, N. M., & Hyde, J. S. (2016). Intersectionality in quantitative psychological research: I. Theoretical and epistemological issues. *Psychology of Women Quarterly*, 40(2), 155–170.
- Fontaine, X., & Yamada, K. (2014). Caste comparisons in India: Evidence from subjective well-being data. *World Development*, 64, 407–419.
- French, A. N. (2020). Dalits and mental health: Investigating perceptions, stigma and barriers to support in Kathmandu, Nepal. *Journal of Global Health Reports*, 4, e2020009.
- Gorringe, H., Jodhka, S. S., & Takhar, O. K. (2017). Caste: Experiences in South Asia and beyond. *Contemporary South Asia*, 25(3), 230–237.
- Graham, C., & Chattopadhyay, S. (2013). Gender and well-being around the world. *International Journal of Happiness and Development*, 1(2), 212–232.
- Gupta, A., & Coffey, D. (2020). Caste, religion, and mental health in India. *Population Research and Policy Review*, 39, 1119–1141.
- Gupta, N. (2019). Intersectionality of gender and caste in academic performance: Quantitative study of an elite Indian engineering institute. *Gender, Technology and Development*, 23(2), 165–186.
- Halim, N., Yount, K. M., & Cunningham, S. (2016). Do scheduled caste and scheduled tribe women legislators mean lower gender-caste gaps in primary schooling in India? *Social Science Research*, 58(July), 122–134.
- Hankivsky, O. (2012). Women's health, men's health, and gender and health: Implications of intersectionality. *Social Science & Medicine*, 74(11), 1712–1720.
- Haq, R. (2013). Intersectionality of gender and other forms of identity: Dilemmas and challenges facing women in India. *Gender in Management: An International Journal*, 28, 171–184.
- Hoff, K., & Pandey, P. (2006). Discrimination, social identity, and durable inequalities. *American Economic Review*, 96(2), 206–211.
- Hoff, K., & Pandey, P. (2014). Making up people—The effect of identity on performance in a modernising society. *Journal of Development Economics*, 106, 118–131.
- Hogue, M., & Yoder, J. D. (2003). The role of status in producing depressed entitlement in women's and men's pay allocations. *Psychology of Women Quarterly*, 27(4), 330–337.
- Huebner, E., Suldo, S., Smith, L., & McKnight, C. (2004). Life satisfaction in children and youth: Empirical foundations and implications for school psychologists. *Psychology in the Schools*, 41, 81–93.
- Inglehart, R. (2002). Gender, aging, and subjective well-being. *International Journal of Comparative Sociology*, 43(3–5), 391–408.
- Iversen, V., Krishna, A., & Sen, K. (2016). Rags to riches? Intergenerational occupational mobility in India (GDI Working Paper No. 004). Manchester: The University of Manchester.

- Jadhav, S., Mosse, D., & Dostaler, N. (2016). Minds of caste—Discrimination and its affects. *Anthropology Today*, 32(1), 1–2.
- Jovanović, V. (2017). Measurement invariance of the Serbian version of the satisfaction with life scale across age, gender, and time. *European Journal of Psychological Assessment*.
- Kahneman, D., Diener, E., & Schwarz, N. (Eds.). (1999). *Well-being: Foundations of hedonic psychology*. Russell Sage Foundation.
- Keyes, C. L. M. (1998). Social well-being. *Social psychology quarterly*, 121–140.
- Keyes, C. L. (2002). The mental health continuum: From languishing to flourishing in life. *Journal of health and social behavior*, 207–222.
- Keyes, C. L., Sohail, M. M., Molokwu, N. J., Parnell, H., Amany, C., Kaza, V. G. K., & Proeschold-Bell, R. J. (2021). How would you describe a mentally healthy person? A cross-cultural qualitative study of caregivers of orphans and separated children. *Journal of Happiness Studies*, 22(4), 1719–1743.
- Keyes, C. L., Wissing, M., Potgieter, J. P., Temane, M., Kruger, A., & Van Rooy, S. (2008). Evaluation of the mental health continuum—short form (MHC-SF) in setswana-speaking South Africans. *Clinical Psychology & Psychotherapy*, 15(3), 181–192.
- Kiang, L., Folmar, S., & Gentry, K. (2020). “Untouchable”? Social status, identity, and mental health among adolescents in Nepal. *Journal of Adolescent Research*, 35(2), 248–273.
- Lakshmanasamy, T., & Maya, K. (2020). The effect of income inequality on happiness inequality in India: A recentered influence function regression estimation and life satisfaction inequality decomposition. *Indian Journal of Human Development*, 14(2), 161–181.
- Leonard, K. I. (2005). South Asians in the Indian Ocean world: Language, policing, and gender practices in Kuwait and the United Arab Emirates. *Comparative Studies of South Asia, Africa and the Middle East*, 25(3), 677–686.
- Lewis, R. J., Kholodkov, T., & Derlega, V. J. (2012). Still stressful after all these years: A review of lesbians’ and bisexual women’s minority stress. *Journal of Lesbian Studies*, 16(1), 30–44.
- Lowe, M. (2021). Types of contact: A field experiment on collaborative and adversarial caste integration. *American Economic Review* 111(6), 1807–1844.
- Lucas, R. E., Diener, E., & Suh, E. (1996). Discriminant validity of well-being measures. *Journal of Personality and Social Psychology*, 71, 616–628.
- Luhmann, M., Hofmann, W., Eid, M., & Lucas, R. E. (2012). Subjective well-being and adaptation to life events: A meta-analysis. *Journal of Personality and Social Psychology*, 102(3), 592.
- Mahalik, J. R., Good, G. E., Tager, D., Levant, R. F., & Mackowiak, C. (2012). Developing a taxonomy of helpful and harmful practices for clinical work with boys and men. *Journal of Counseling Psychology*, 59(4) 591–603.
- Mathias, K., Goicolea, I., Kermode, M., Singh, L., Shidhaye, R., & San Sebastian, M. (2015). Cross-sectional study of depression and help-seeking in Uttarakhand, North India. *British Medical Journal Open*, 5(11), e008992.
- Mays, V. M., & Ghavami, N. (2018). History, aspirations, and transformations of intersectionality: Focusing on gender. In *APA handbook of the psychology of women: History, theory, and battlegrounds, Vol. 1* (pp. 541–566). American Psychological Association.
- Meisenberg, G., & Woodley, M. A. (2015). Gender differences in subjective well-being and their relationships with gender equality. *Journal of Happiness Studies: An Interdisciplinary Forum on Subjective Well-Being*, 16(6), 1539–1555.
- Mondal, S. (2016). Rohith Vemula: An unfinished portrait. *Hindustan Times*.
- Mosse, D. (2018). Caste and development: Contemporary perspectives on a structure of discrimination and advantage. *World Development*, 110, 422–436.
- Mrudula, A., Callahan, J. L., & Kang, H. (2013). Gender and caste intersectionality in the Indian context. *Human Resource Management*, 6, 31–48.
- Munshi, K. (2014). Community networks and the process of development. *The Journal of Economic Perspectives*, 28(4), 49–76.
- Munshi, K. (2019). Caste and the Indian economy. *Journal of Economic Literature*, 57(4), 781–834.
- Myer, L., Stein, D. J., Grimsrud, A., Seedat, S., & Williams, D. R. (2008). Social determinants of psychological distress in a nationally-representative sample of South African adults. *Social Science & Medicine*, 66, 1828–1840.
- Paik, S. (2014). *Dalit women’s education in modern India: Double discrimination*. Routledge.
- Pal, G. C. (2014). Access to justice: Social ostracism obstructs efforts by Dalits for equal rights. *Journal of Social Inclusion Studies*, 1(1), 122–134.
- Pal, G. C. (2015). Social exclusion and mental health: The unexplored aftermath of caste-based discrimination and violence. *Psychology and Developing Societies*, 27(2), 189–213.
- Pal, G. C. (2018). Caste-Gender Intersectionality and Atrocities in Haryana: Emerging Patterns and state Responses. *Journal of Social Inclusion Studies*, 4(1), 30–50.
- Parashari, S. (2019). *Teacher discrimination in occupational expectations and grading*. ISS Working Papers—General Series 640, International Institute of Social Studies of Erasmus University Rotterdam (ISS), The Hague.
- Parent, M. C., DeBlaere, C., & Moradi, B. (2013). Approaches to research on intersectionality: Perspectives on gender, LGBT, and racial/ethnic identities. *Sex Roles*, 68(11), 639–645.
- Patel, K. (2017). What is in a name? How caste names affect the production of situated knowledge. *Gender, Place & Culture*, 24(7), 1011–1030.
- Pavot, W., & Diener, E. (2008). The satisfaction with life scale and the emerging construct of life satisfaction. *Journal of Positive Psychology*, 3, 137–152.
- Pick, D., & Dayaram, K. (2006). Modernity and tradition in a global era: The re-invention of caste in India. *International Journal of Sociology and Social Policy*.
- Pinquart, M., & Sörensen, S. (2001). Gender differences in self-concept and psychological well-being in old age: A meta-analysis. *The Journals of Gerontology Series B: Psychological Sciences and Social Sciences*, 56(4), P195–P213.
- Rajadesingan, A., Mahalingam, R., & Jurgens, D. (2019, July). Smart, Responsible, and Upper Caste Only: Measuring Caste Attitudes through Large-Scale Analysis of Matrimonial Profiles. In *Proceedings of the International AAAI Conference on Web and Social Media* (Vol. 13, pp. 393–404).
- Ram, U., Strohschein, L., & Gaur, K. (2014). Gender socialisation: Differences between male and female youth in India and associations with mental health. *International Journal of Population Research*.
- Razvi, M., & Roth, G. (2010). Non-governmental organisations and the socio-economic development of low-income women in India. *Human Resource Development International*, 13(1), 65–81.
- Rege, S., Devika, J., Kannabiran, K., John, M. E., Swaminathan, P., & Sen, S. (2013). Intersections of gender and caste. *Economic & Political Weekly*, 48, 35–36.
- Ryan, R. M., & Deci, E. L. (2001). On happiness and human potentials: A review of research on hedonic and eudaimonic well-being. *Annual Review of Psychology*, 52(1), 141–166.

- Ryff, C. D. (1989). Happiness is everything, or is it? Explorations on the meaning of psychological well-being. *Journal of Personality and Social Psychology*, 57(6), 1069.
- Ryff, C. D., & Keyes, C. L. M. (1995). The structure of psychological well-being revisited. *Journal of Personality and Social Psychology*, 69(4), 719.
- Sagone, E., & De Caroli, M. E. (2014). Relationships between psychological well-being and resilience in middle and late adolescents. *Procedia-Social and Behavioral Sciences*, 141, 881–887.
- Sankaran, S., Sekerdej, M., & Von Hecker, U. (2017). The role of Indian caste identity and caste inconsistent norms on status representation. *Frontiers in Psychology*, 8, 487.
- Satheesh, S. (2019). Payal Tadvi suicide case: The death of a doctor. *LiveMint*.
- Sharma, S., & Singh, K. (2019). Religion and well-being: The mediating role of positive virtues. *Journal of Religion and Health*, 58(1), 119–131.
- Shin, D. C., & Johnson, D. M. (1978). Avowed happiness as an overall assessment of the quality of life. *Social Indicators Research*, 5(1), 475–492.
- Shin, R. Q., Welch, J. C., Kaya, A. E., Yeung, J. G., Obana, C., Sharma, R., & Yee, S. (2017). The intersectionality framework and identity intersections in the *Journal of Counseling Psychology* and *The Counseling Psychologist*: A content analysis. *Journal of Counseling Psychology*, 64, 458–474.
- Siddique, Z. (2011). Evidence on caste-based discrimination. *Labour Economics*, 18, S146–S159.
- Simon, L., & Thorat, S. (2020). Why a Journal on Caste?. *CASTE/A Global Journal on Social Exclusion*, 1(1).
- Singh, K., Bassi, M., Junnarkar, M., & Negri, L. (2015). Mental health and psychosocial functioning in adolescence: An investigation among Indian students from Delhi. *Journal of Adolescence*, 39, 59–69.
- Singh, K., & Junnarkar, M. (2015). Correlates and predictors of positive mental health for school going children. *Personality and Individual Differences*, 76, 82–87.
- Sinha, N. (2018). Understanding the effects of unemployment in Indian graduates: psychological, financial and social perspectives. *Psychological Studies*, 63(3), 315–324.
- Soundararajan, T. (2016). Erasing caste: the battle over California textbooks and caste apartheid. *Huffington Post*.
- Spears, D. (2016). Caste and life satisfaction in rural North India. *Economic and Political Weekly*, 51(4), 12–14.
- Srinivas, M. N. (2003). An obituary on caste as a system. *Economic and political weekly*, 455–459.
- Steel, P., Schmidt, J., & Shultz, J. (2008). Refining the relationship between personality and subjective well-being. *Psychological Bulletin*, 134(1), 138.
- Syed, M., & Ajayi, A. A. (2018). Promises and pitfalls in the integration of intersectionality with development science. *New Directions for Child and Adolescent Development*, 2018(161), 109–117.
- Tabachnick, B. G., Fidell, L. S., & Ullman, J. B. (2007). *Using multivariate statistics* (Vol. 5, pp. 481–498). Boston, MA: Pearson.
- Tay, L., Ng, V., Kuykendall, L., & Diener, E. (2014). Demographic factors and worker well-being: An empirical review using representative data from the United States and across the world. In *The role of demographics in occupational stress and well-being* (pp. 235–283). Emerald Group Publishing Limited.
- Thapa, R., Van Teijlingen, E., Regmi, P. R., & Heaslip, V. (2021). Caste exclusion and health discrimination in South Asia: a systematic review. *Asia Pacific Journal of Public Health*, 10105395211014648.
- Tiwari, S., Ściagała, K. A., Schild, C., & Zettler, I. (2021). Indian caste names and cooperation in the Prisoner's Dilemma. *Asian Journal of Social Psychology*.
- Uddin, J., Acharya, S., Valles, J., Baker, E. H., & Keith, V. M. (2020). Caste differences in hypertension among women in India: Diminishing health returns to socioeconomic status for lower caste groups. *Journal of racial and ethnic health disparities*, 1–9.
- Van Landeghem, B., & Vandeplass, A. (2018). The relationship between status and happiness: Evidence from the caste system in rural India. *Journal of Behavioral and Experimental Economics*, 77, 62–71.
- World Health Organization. (2005). *Promoting mental health: Concepts, emerging evidence, practice*. WHO.
- Yuval-Davis, N. (2015). Situated intersectionality and social inequality. *Raisons Politiques*, 58(2), 91–100.
- Zwick-Maitreyi, M.; Soundararajan, T.; Dar, N.; Bhel, R.; and Balakrishnan, P. 2017. Caste in the United States. A Survey of Caste among South Asian Americans. *Technical report, Equality Labs, USA*.

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