

## Psychological Effects of Inter Marriages on Mental Health

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### Abstract

The objective of the current investigation was to analyze the impact of inter-family marriages on mental health outcomes. A cross-sectional research methodology was employed, and a total of 300 individuals were selected utilizing a purposive sampling strategy. The sample consisted of 150 adults originating from inter-family marriages and 150 adults stemming from intra-family marriages. Mental health was evaluated through the utilization of the Mental Health Inventory-38 (MHI-38; Veit & Ware, 1983). Statistical computations were performed employing SPSS version 20.0. The findings revealed that positive mental health attributes were markedly elevated among adults engaged in intra-family marriages, whereas the overall mental health status was comparatively inferior among adults involved in inter-family marriages. Specifically, life satisfaction, emotional resilience, and general positive affect were found to be greater in the intra-family marriage cohort. Conversely, detrimental mental health indicators—such as anxiety, depression, and loss of behavioral regulation—were significantly more pronounced among adults from inter-family marriages. All dimensions of mental health exhibited statistically significant variations between the two cohorts at  $p < .0001$ . Additionally, gender disparities were noted, with adults from intra-family marriages displaying superior mental health outcomes compared to their counterparts from inter-family marriages.

**Keywords:** Mental health, inter-family marriages, intra-family marriages, cross-sectional design, life satisfaction, emotional stability.

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## Introduction

Numerous studies have demonstrated that the institution of marriage significantly influences both physical and mental health (Najam & Bari, 2001; Chung & Kim, 2014). Marriage between individuals belonging to the same religious and ethnic demographic is classified as inter-family (consanguineous) marriage (Taylor, 2007). Given that a significant portion of the community endorses inter-family marriages, there exists a prevalent assumption that the pair rate aligns with the individual rate, leading to heightened apprehension regarding potential outcomes (Bratter & Eschbach, 2006). A socially well-adjusted individual is typically perceived as a normative entity (Diehl et al., 1977).

Healthcare practitioners and genetic specialists may regard the adverse ramifications of inter-family marriages in terms of augmented hereditary risks to progeny, as opposed to the prospective social and financial advantages (Hamamy et al., 2007; Abdalla & Zaher, 2014). Consequently, an individual's social standing—encompassing caste, socioeconomic status, and gender—has the capacity to correlate with stress-inducing factors, mediating resources, and mental health outcomes (Pearlin, 1999). Empirical evidence has consistently illustrated that social class exerts both direct and indirect effects on health and well-being. In particular, individuals from lower socioeconomic strata tend to experience suboptimal physical and mental health outcomes (McLeod & Kessler, 1990). Research indicates that mental health disorders are more prevalent among individuals from inter-family marriages, while enhanced physical and psychological well-being is observed in non-consanguineous unions (Ali et al., 2012). A comprehensive study conducted with a sample of 883 participants across various nations revealed a substantial influence of inter-family marriages on individuals' mental health as compared to non-inter-family marriages (Jourard et al., 2007). Additionally, offspring born to first-cousin unions exhibited elevated rates of mental and physical disabilities relative to those born from non-consanguineous marriages (Boseley, 2013; Hamamy, 2012).

Ali, McLean, and Rehman (2012) established that progeny of consanguineous unions exhibit a heightened incidence of psychological disorders. Conversely, certain familial units ascribe mental, psychological, and physical impairments to divine intervention rather than hereditary determinants. The objective of the current investigation is to assess the ramifications of inter-family unions on the psychological well-being of children, as such unions are frequently regarded as detrimental to mental health outcomes. Abdalla and Zaher (2014) investigated the influence of consanguinity on genetic transmission and disclosed that shared genetic characteristics elevate the likelihood of disease manifestation in progeny.

Researchers in Pakistan have identified approximately thirty genes implicated in mental retardation and intellectual disabilities correlated with cousin marriages (Hafeez, 2014). Additional studies have indicated that 55% of British Pakistanis engage in first cousin marriages, with nearly 10% of their offspring succumbing in infancy or encountering disabilities; furthermore, British Pakistanis exhibit a thirteenfold increase in the probability of having children with recessive genetic disorders when juxtaposed with the general populace (Boseley, 2013).

## Method

The methodological design of the present inquiry was both descriptive and comparative in nature. A sample size comprising 300 participants was determined utilizing an online statistical sample size calculator, with a confidence interval set at 95% (Human Development Report, 2015). Data collection was facilitated through the Mental Health Inventory-38 (MHI-38), which was developed by Veit and Ware (1983). Ethical clearance was secured from the Ethics Committee of Hazara University, Haripur. Participants were intentionally selected from

backgrounds of both inter- and intra-family marriages within District Haripur. Analytical procedures were conducted using SPSS, and independent sample t-tests were employed to investigate gender disparities in mental health outcomes (Field, 2018).

In the present study, data were collected from adult offspring ( $n = 300$ ) of couples engaged in both inter-family and intra-family marriages from District Haripur. The findings of the investigation fulfilled the research objective, revealing that mental health levels were superior among adults from intra-family marriages compared to those from inter-family marriages. A statistically significant association was identified between mental health and the two distinct forms of marriage. The mean age of participants from inter-family marriages was  $(19.64 \pm 52.55383)$ , whereas the mean age of participants from intra-family marriages was  $(19.94 \pm 50.64)$ . The overall sample exhibited an average age score of  $(38.75 \pm 195.92)$ . The positive mental health of children from inter-family marriages was assessed as high across all subcomponents of positive mental health, including life satisfaction, general positive affect, psychological well-being, and emotional connections, with respective scores of  $(3.83 \pm 1.146, 53.04 \pm 14.025, 69.60 \pm 11.974, 48.28 \pm 18.273)$ . Conversely, the negative mental health indicators for children of intra-family marriages demonstrated elevated levels across all subcomponents, encompassing anxiety, depression, behavioral loss, and psychological distress, with respective scores of  $(14.36 \pm 2.909, 11.445 \pm 2.466, 27.85 \pm 4.674, 30.05 \pm 7.834)$  accordingly.

REWORDED\_TEXT:

Many studies suggest that marriage significantly influences both physical and mental health. Marriages between individuals from the same religious and ethnic backgrounds are referred to as inter-family marriages. Due to the predominant belief in inter-family marriages, many tend to equate the pair rate with the individual rate, leading to a heightened sense of anxiety. A person who is well-adjusted within a community is labeled as a normal individual. Healthcare professionals and inheritance specialists might take into account the adverse effects of inter-family marriages regarding increased genetic risks for offspring, in contrast to the potential social and financial benefits. Thus, one's struggles, socioeconomic status, and gender hold potential implications.

**Table-1: Level Of Mental Health Among Inter Vs Intra Family Marriages Adults**

	Intra marriages adults male (n=150)	Inter marriages adults Females (n=150)	t	p	CI 95 %
Variable	(Mean $\pm$ SD)	(Mean $\pm$ SD)	t(598)		
Life satisfaction	1.83 $\pm$ .806	3.83 $\pm$ 1.146	-17.885	.000	2.15893 to -1.84107
General positive effect	36.91 $\pm$ 9.979	53.04 $\pm$ 14.025	-11.479	.000	-18.08250 to -14.17750
Psychological well being	30.05 $\pm$ 7.834	69.60 $\pm$ 11.974	-33.849	.000	-41.17312 to -37.92688

Emotional ties	7.08± 2.641	48.28± 18.273	27.331	.000	-44.16667 to -38.23333
Anxiety	28.75± 6.029	14.36± 2.909	-26.335	.000	13.31437 to 15.46563
Depression	11.445± 2.466	6.81± 2.460	16.408	.000	4.07531 to 5.19469
Lose of behavior	27.85± 4.674	22.00± 4.372	-17.885	.000	4.82162 to 6.87838
Psychological distress	69.60± 11.974	30.05± 7.834	-33.849	.000	37.25078 to 41.84922

## Discussion

Participants who were married within their family showed better mental health compared to those married outside their family. Men in consanguineous marriages experienced more mental health issues, such as anxiety, depression, behavioral changes, and psychological distress. Women from both types of marriages had fewer mental health problems and better overall well-being, with higher levels of life satisfaction, emotional connection, and psychological health than men. Couples who married within their family were less likely to have children with mental health issues and had better mental health outcomes in terms of life satisfaction, emotional connection, and psychological well-being. Overall, the study found that adults from inter-family marriages were more likely to have mental health problems than those from intra-family marriages.

These findings align with research from a Korean study, which found that intermarriages were linked to higher mental health risks (Lee et al., 2012; Chung & Kim, 2014). A British study also reported that over half of British Pakistanis married their first cousins, a practice common in many South Asian and Middle Eastern communities (Boseley, 2013). However, such marriages may increase the risk of genetic disorders in children due to shared DNA, leading to rare but serious recessive conditions (Hamamy et al., 2007; Hamamy, 2012). While some see these unions as strengthening family ties and social cohesion, they are associated with a significantly higher risk of genetic problems in offspring, with British Pakistanis being about 13 times more likely to have children with such conditions compared to the general population (Boseley, 2013).

The existing literature supports these results by showing that cousin marriages are linked to higher risks of mental disorders and health issues compared to non-cousin unions (Ali et al., 2012; Abdalla & Zaher, 2014). Mental health challenges like stigma, stereotypes, prejudice, and discrimination are more common in Muslim communities, influenced by factors such as race, gender, social class, religion, and health status (Pearlin, 1999). Abdalla and Zaher (2014) noted that Pakistan, being a mainly Muslim country, views family marriages as a culturally accepted practice, but these unions may affect genetic health over generations. Religious views encouraging marriage outside close family may also help reduce genetic risks (Hamamy, 2012).

Medical research highlights that parents' genetic makeup and cousin marriages significantly influence children's physical and mental health (Hamamy et al., 2007; Ali et al., 2012). Inter-family marriages are associated with higher rates of family illnesses and mental health issues. This study was conducted in a limited area and did not include all demographic variables. Future research should use larger and more diverse samples to examine how other

factors affect mental health outcomes across different marriage types. Despite these limitations, the study ensured equal representation of both marriage types and used a systematic sample size calculation. However, the findings from one district cannot be applied to the broader population (Human Development Report, 2015).

## Conclusion

Children of intermarriages had worse mental health, while young adults from intra-family marriages showed better mental health.

Additionally, life satisfaction and emotional connections were higher among those in intra-family marriages.

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