EFFECT OF EMOTIONAL AND BEHAVIORAL DISORDERS ON THE SOCIAL RELATIONSHIPS OF YOUNG MUSLIM WOMEN IN PAKISTAN: A SYSTEMATIC LITERATURE REVIEW

By

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APPROVAL

It is Certified that research work contained in this thesis entitled: **"Effect of Emotional and Behavioral Disorders on Social Relationships of Young Muslim Women in Pakistan: A Systematic Literature Review"** has been carried out under my supervision by **SAKINA HAIDAR** and is approved for submission in the partial fulfillment of the requirement for the degree of **"MSc in Psychology and Islamic Counselling".**



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ABSTRACT

Emotional and Behavioral Disorders (EBD) encompass a range of psychological difficulties that influence emotional regulation, behavior, and the quality of social interactions. For young Muslim women in Pakistan, these challenges unfold within a complex socio-cultural and religious environment where mental health concerns are often misunderstood, minimized, or stigmatized. This study aims to examine the effect of Emotional and Behavioral Disorders on the social relationships of young Muslim women in Pakistan through a systematic literature review. Following PRISMA guidelines, this non-empirical study synthesizes global and regional literature to identify key relational outcomes associated with EBD. The review reveals that emotional and behavioral difficulties adversely affect interpersonal communication, family relationships, peer engagement, and broader social participation. Cultural norms emphasizing emotional restraint, gender conformity, and family honor further mediate these relational challenges. Religious interpretations also play a significant role, sometimes contributing to stigma but also offering potential coping and resilience when understood in a balanced manner. The findings highlight that Emotional and Behavioral Disorders among young Muslim women are deeply relational and socially embedded rather than isolated psychological conditions. Integrating psychological theories with culturally and religiously informed perspectives provides a more holistic understanding of these experiences. This study underscores the need for culturally sensitive, gender-responsive, and non-clinical mental health interventions aimed at strengthening social relationships, reducing stigma, and promoting emotional well-being among young Muslim women in Pakistan.

Keywords: emotional and behavioral disorders, social relationships, young Muslim women, mental health, cultural context

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List of Abbreviations

APA	American Psychological Association
ASEBA	Achenbach System of Empirically Based Assessment
CBT	Cognitive Behavioral Therapy
DSM-5	Diagnostic and Statistical Manual of Mental Disorders (5th ed.)
EBD	Emotional and Behavioral Disorders
MMAT	Mixed Methods Appraisal Tool
PRISMA	Preferred Reporting Items for Systematic Reviews and Meta-Analyses
WHO	World Health Organization
SLR	Systematic Literature Review

CHAPTER ONE
INTRODUCTION

1.1 Background to the Study

Mental health is an essential component of overall well-being, influencing how individuals think, feel, behave, and interact with others (World Health Organization [WHO], 2017). Emotional and Behavioral Disorders (EBD) represent a broad spectrum of psychological difficulties that affect an individual's capacity to regulate emotions, manage interpersonal interactions, and engage effectively in social environments. Globally, EBD has gained increasing attention due to its long-term implications for mental well-being, personal development, and social functioning. The social relationships of individuals with EBD are particularly vulnerable, as emotional dysregulation, impulsive actions, and persistent behavioral challenges often disrupt communication patterns, trust formation, and relationship stability.

In predominantly Muslim societies such as Pakistan, mental health issues remain largely under-recognized and stigmatized, particularly among women (Mirza & Jenkins, 2004). The intersection of mental health, gender expectations, cultural norms, and religious identity adds additional layers of complexity. Young Muslim women, aged 18–35, navigate a transitional life stage marked by higher education, early career development, marriage expectations, and evolving social roles. The presence of emotional or behavioral difficulties during this period may significantly influence their social relationships, including family bonds, peer interactions, marital prospects, and participation in community networks.

Despite Pakistan's demographic diversity and socio-cultural richness, mental health remains understudied, particularly among women. Social stigma, religious misconceptions, family honour dynamics, and limited access to professional psychological services contribute to the underreporting and undertreatment of EBD. As a result, a considerable number of young women may experience social isolation, strained relationships, or reduced social support without receiving adequate care.

Within Islamic teachings, emotional well-being and social harmony are strongly emphasized; concepts such as compassion (*rahmah*), patience (*sabr*), and balanced behavior (*i'tidal*) reflect Islam's acknowledgement of emotional health (Weatherhead & Daiches, 2010). However, cultural practices and societal expectations sometimes overshadow these principles, making it essential to contextualize EBD within both psychological and Islamic frameworks.

In view of these gaps, the present study employs a Systematic Literature Review (SLR) to synthesise global, regional, and Pakistani evidence concerning the relationship between Emotional and Behavioral Disorders and the social relationships of young Muslim women. Through this synthesis, the study seeks to provide a culturally informed understanding grounded in existing scholarly evidence.

Although previous research has examined Emotional and Behavioral Disorders across different populations and settings, the evidence remains fragmented regarding their influence on the social relationships of young Muslim women within the Pakistani context. This gap provides the rationale for the present systematic literature review.

1.2 Statement of the problem

Although Emotional and Behavioral Disorders affect millions of women worldwide, there is a substantial gap in research examining how these disorders influence the social relationships of young Muslim women particularly in Pakistan. Existing literature often focuses on clinical populations, children, or Western societies, leaving a critical gap in culturally specific, gender-sensitive insights.

Young Muslim women in Pakistan face unique socio-cultural expectations that may intensify the impact of EBD on their social interactions and support systems. Given the lack of systematic, synthesized knowledge on this topic, there remains a need for a structured review that combines available research and identifies key themes, challenges, and implications.

1.3 Purpose of the Study

The purpose of this study is to systematically synthesise existing research on how Emotional and Behavioral Disorders affect the social relationships of young Muslim women (18–35 years) in Pakistan. The study aims to synthesise empirical and theoretical literature, identify recurring patterns, explore cultural and religious influences, and propose a conceptual framework grounded in both psychological and Islamic perspectives.

1.4 Research Objectives

This study aims to:

1. Examine the effects of Emotional and Behavioral Disorders on the social relationships of young Muslim women in Pakistan.
2. Identify cultural, familial, and societal factors influencing these relationships.

3. Identify patterns related to coping, family dynamics, peer networks, and community engagement.
4. Synthesize relevant global and Pakistani evidence on EBD and social relationships.
5. Interpret the synthesized findings using selected psychological theories and Islamic psychological perspectives.

1.5 Research Questions

1. How do Emotional and Behavioral Disorders affect the social relationships of young Muslim women in Pakistan?
2. What cultural, familial, and societal factors influence these relationships?
3. What patterns emerge regarding coping, family dynamics, peer networks, and community engagement?
4. What does the existing global and Pakistani literature report about EBD and social relationships?
5. How can selected psychological theories and Islamic psychological perspectives help interpret the synthesized findings?

1.6 Significance of the Study

Academic Significance

This study fills a critical gap by systematically reviewing literature related to EBD and social relationships specifically among young Muslim women in Pakistan—a population largely neglected in psychological research.

Practical Significance

Findings may guide mental health practitioners, counselors, and educators to design culturally relevant interventions that support young women experiencing emotional or behavioral difficulties.

Policy Significance

Insights may inform policymakers, NGOs, and community organizations to improve awareness programs, mental health services, and culturally suitable support structures.

Cultural and Religious Relevance

By integrating Islamic perspective, the study acknowledges the dominant cultural-religious identity of Pakistani women and provides context-sensitive interpretations of emotional and relational well-being.

1.7 Scope and Delimitations of the study

Scope

The current study focuses on young Muslim women aged 18–35 in Pakistan. This study relies exclusively on secondary data through systematic review methodology. The review considers Emotional and Behavioral Disorders and related emotional and psychological difficulties reported within the included studies.

Delimitations

The review was limited to studies identified through PubMed and a supplementary systematic search of Google Scholar; therefore, relevant studies indexed exclusively in other databases may not have been captured. Secondly, only studies published in the English language were included. Third, the review included ten studies that satisfied the predefined eligibility criteria. This relatively small number of included studies may limit the breadth of perspectives represented in the review.

1.8 Operational Definition of Terms

Emotional and Behavioral Disorders (EBD): For the purpose of this review, EBD is used as an umbrella term for a range of emotional, behavioral, and psychological difficulties reported in the included studies, including anxiety, depression, emotional dysregulation, psychological distress, psychiatric morbidity, and related behavioral problems. The term does not imply that all participants had a formally diagnosed Emotional and Behavioral Disorder; where studies used specific diagnostic or symptom-based terms, those terms are retained when reporting their findings.

Social Relationships: Interpersonal connections including family ties, friendships, marital or romantic relationships, peer networks, and community interactions.

Young Muslim Women: Females aged 18–35 who identify as Muslim and reside in Pakistan.

Systematic Literature Review (SLR): A structured research method that identifies, evaluates, and synthesizes relevant studies using transparent and replicable procedures.

CHAPTER TWO
LITERATURE REVIEW

2.1 Introduction

This chapter reviews, synthesises and critically analyzes existing global and regional literature related to Emotional and Behavioral Disorders (EBD) and their impact on social relationships, with a particular focus on young Muslim women. The review emphasizes emotional dysregulation, internalizing and externalizing symptoms, gendered mental health experiences, social stigma, and Islamic socio-cultural contexts. The review further aims to situate emotional and behavioral difficulties within broader psychological, social, and cultural frameworks, recognizing that mental health experiences are shaped not only by individual cognition and behavior but also by family structures, gender norms, and sociocultural expectations. In doing so, this chapter lays the theoretical and conceptual foundation for understanding how emotional distress manifests in interpersonal relationships in culturally specific settings such as Pakistan and why culturally sensitive perspectives are necessary for meaningful analysis.

This chapter establishes the conceptual and theoretical foundation for the systematic review by examining existing knowledge on Emotional and Behavioral Disorders, social relationships, and the socio-cultural context of young Muslim women in Pakistan. These perspectives provide the basis for interpreting the themes synthesised from the included studies in Chapter Four.

2.2 Conceptual Review

2.2.1 Conceptualization of Emotional and Behavioral Disorders

Emotional and Behavioral Disorders refer to a spectrum of psychological conditions characterized by persistent emotional distress and maladaptive behaviors that interfere with social, academic, and occupational functioning (American Psychiatric Association, 2013; Mash & Wolfe, 2019). Common emotional manifestations include anxiety, depression, emotional instability, fearfulness, and low self-esteem, while behavioral manifestations may involve aggression, impulsivity, non-compliance, social withdrawal, or defiance (Leadbeater et al., 2012).

For the purpose of the present review, EBD is used as an umbrella term to encompass the heterogeneous emotional, behavioral, and psychological difficulties reported across the included studies, such as depression, anxiety, emotional dysregulation, psychological distress, psychiatric morbidity, and related behavioral problems. This operational use of the term does not imply that

all participants had a formally diagnosed EBD; where individual studies used specific diagnostic or symptom-based terminology, those terms are retained when reporting their findings.

Scholarly literature broadly categorizes EBD symptoms into internalizing and externalizing dimensions. Internalizing symptoms involve inwardly directed emotional distress such as sadness, anxiety, guilt, and social withdrawal, whereas externalizing symptoms involve outwardly directed behaviors such as anger, aggression, impulsivity, and rule-breaking (Achenbach & Rescorla, 2001; Rubin et al., 2009). Both dimensions significantly affect individuals' ability to form and maintain healthy social relationships (La Greca & Harrison, 2005).

2.2.2 Emotional Dysregulation and Social Relationships

Emotional dysregulation refers to difficulties in recognizing, expressing, and managing emotions in adaptive ways (Gross, 2015). Research indicates that individuals with poor emotional regulation skills often experience interpersonal conflicts, misunderstandings, and social rejection (Compas et al., 2017). Emotional dysregulation may lead to heightened emotional reactivity, mood swings, and inappropriate emotional responses, which strain family and peer relationships (Aldao et al., 2010).

Studies suggest that young women who experience emotional dysregulation may struggle with assertive communication, emotional expression, and boundary-setting (Nolen-Hoeksema, 2012). In collectivist societies, where emotional restraint and conformity are valued, emotional dysregulation may be perceived negatively, further complicating social interactions (Hofstede, 2011). Persistent emotional instability can result in social withdrawal, reduced trust, and difficulty maintaining long-term relationships (Rubin et al., 2009).

2.2.3 Internalizing Symptoms and Interpersonal Functioning

Disorders such as anxiety and depression are consistently associated with impaired social functioning (Kessler et al., 2005). Literature highlights that individuals with internalizing symptoms often experience fear of judgment, low self-worth, and heightened sensitivity to social feedback, which contribute to avoidance of social situations and reduced engagement in peer and community relationships (La Greca & Lopez, 1998; Schreier et al., 2009).

Among young women, internalizing symptoms may be masked due to societal expectations of patience, modesty, and emotional endurance (Ali et al., 2017). As a result, emotional suffering often remains hidden, leading to unaddressed relational difficulties and emotional isolation

(Husain et al., 2014). Prolonged internalization of distress may weaken emotional bonds and diminish social confidence (Nolen-Hoeksema, 2012).

2.2.4 Externalizing Symptoms and Social Conflict

Externalizing symptoms such as irritability, impulsivity, and aggression are strongly linked to social conflict and interpersonal difficulties (Mash & Wolfe, 2019). Research suggests that individuals exhibiting externalizing behaviors are more likely to experience peer rejection, disciplinary actions, and strained family relationships (La Greca & Harrison, 2005; Leadbeater et al., 2012).

In the context of young women, externalizing behaviors are often judged more harshly due to gender norms that emphasize obedience and emotional control (Tabassum et al., 2020). Such behaviors may be interpreted as disrespectful or immoral, increasing social sanctions and relational breakdown (Corrigan et al., 2014). This gendered response intensifies stigma and further marginalizes affected women within their social environments (Link & Phelan, 2001).

2.2.5 Gendered Mental Health Experiences

Extensive literature highlights that mental health experiences are deeply gendered. Women are more likely to experience internalizing disorders, while men are more often associated with externalizing behaviors (Nolen-Hoeksema, 2012; WHO, 2017). Socialization processes, power dynamics, and cultural expectations contribute significantly to these differences (Ali et al., 2017).

In patriarchal societies, women's emotional expression is often constrained, and their psychological distress may be minimized or normalized (Rashid & Hyder, 2018). Young women are frequently expected to prioritize family harmony over personal emotional needs, resulting in emotional suppression (Khaleque, 2017). Such gendered expectations increase vulnerability to EBD and negatively impact social relationships by limiting authentic emotional engagement (Tabassum et al., 2020).

2.2.6 Stigma, Mental Health, and Social Relationships

Stigma remains a significant barrier to mental health recognition and support. Literature consistently demonstrates that mental health stigma leads to concealment of symptoms, avoidance of professional help, and social isolation (Corrigan et al., 2014). In many societies, mental illness is associated with shame, weakness, or moral failure (Link & Phelan, 2001).

In Pakistan, stigma is intensified by concerns related to family reputation, marriage prospects, and social standing (Husain et al., 2014; Mirza & Jenkins, 2004). Young women with emotional or behavioral difficulties may be discouraged from discussing mental health issues openly, leading to deterioration in social relationships (Zakar et al., 2013). Stigmatization reinforces exclusion, discrimination, and emotional loneliness (Corrigan et al., 2014).

2.2.7 Islamic and Cultural Contextual Factors

Islamic teachings emphasize compassion, balance, patience, and emotional moderation. Faith-based coping mechanisms such as prayer, remembrance, and reliance on God are commonly used to manage emotional distress (Koenig, 2012). However, literature indicates that mental health issues are sometimes misinterpreted through purely spiritual lenses, resulting in neglect of psychological explanations (Weatherhead & Daiches, 2010).

Religious practices in Muslim societies often prioritize collective well-being over individual emotional expression (Hofstede, 2011). While strong family and community bonds can provide support, they may also restrict emotional disclosure. When Emotional and Behavioral Disorders are misunderstood as weak faith or moral shortcomings, social relationships may suffer due to judgment and lack of empathy (Yusuf & Khan, 2021).

2.2.8 Regional Literature on Pakistan and South Asia

Regional studies from Pakistan and South Asia reveal limited mental health literacy, particularly regarding women's emotional well-being (Khalid & Qadir, 2019). Research highlights the influence of poverty, gender inequality, educational pressure, and limited mental health services on psychological outcomes (Rashid & Hyder, 2018).

Young women face compounded stressors related to academic performance, familial expectations, and societal norms (Ali et al., 2017). Existing regional literature often focuses on prevalence rates rather than relational consequences of EBD (Zakar et al., 2013). There remains a notable gap in understanding how emotional and behavioral difficulties affect social relationships within Pakistani Muslim contexts.

2.3 Theoretical Framework

The framework integrates major psychological theories—Cognitive Behavioral Theory, Attachment Theory, Social Learning Theory, Ecological Systems Theory, and Relational Cultural Theory—alongside moderate Islamic psychological perspectives (Beck, 1976; Bowlby, 1988;

Bandura, 1977; Bronfenbrenner, 1979; Jordan, 2010). Together, these frameworks provide a comprehensive lens for understanding Emotional and Behavioral Disorders (EBD) and their influence on the social relationships of young Muslim women in Pakistan. The integration of Western psychological theories with Islamic and cultural perspectives ensures contextual relevance and theoretical depth (Koenig, 2012; Weatherhead & Daiches, 2010).

The findings of previous research suggest that no single theory sufficiently explains the complex relationship between Emotional and Behavioral Disorders and social relationships. Therefore, this review draws upon complementary psychological and Islamic theoretical perspectives to provide a comprehensive framework for interpreting the evidence synthesised in Chapter Four.

2.3.1 Cognitive Behavioral Theory

Cognitive Behavioral Theory (CBT) posits that individuals' thoughts, emotions, and behaviors are interconnected, and that maladaptive cognitions contribute to emotional distress and dysfunctional behavior (Beck, 1976; Beck et al., 1979). According to CBT, emotional and behavioral disorders arise from distorted thinking patterns, negative core beliefs, and ineffective coping strategies (Beck, 2011).

In the context of young Muslim women, negative self-beliefs shaped by societal expectations, gender norms, and fear of judgment may lead to anxiety, depression, emotional dysregulation, and social withdrawal (Nolen-Hoeksema, 2012; Ali et al., 2017). These cognitive distortions affect how individuals interpret social interactions, often leading to misunderstandings, avoidance, and strained relationships (Hofmann et al., 2012). CBT provides a framework for understanding how internal cognitive processes influence emotional regulation and interpersonal functioning.

2.3.2 Attachment Theory

Attachment Theory emphasizes the importance of early emotional bonds with caregivers in shaping emotional regulation, self-worth, and relationship patterns across the lifespan (Bowlby, 1988; Ainsworth et al., 1978). Secure attachment is associated with healthy emotional expression and stable relationships, whereas insecure attachment styles (anxious or avoidant) are linked to emotional instability and interpersonal difficulties (Mikulincer & Shaver, 2007).

Within Pakistani family systems, parenting styles, emotional availability, and cultural expectations significantly influence attachment patterns (Khaleque, 2017). Young women with insecure attachment may experience heightened sensitivity to rejection, dependency, or emotional distancing, which negatively affects family, peer, and marital relationships (Hazan & Shaver, 1987). Attachment Theory thus explains how early relational experiences contribute to emotional and behavioral challenges in later social interactions.

2.3.3 Social Learning Theory

According to Social Learning Theory behavior is learned through observation, imitation, and reinforcement within social environments (Bandura, 1977). Emotional responses and behavioral patterns are shaped by modeling from parents, peers, and community members (Bandura, 1986).

For young Muslim women, social norms regarding emotional expression, obedience, and modesty are often reinforced through family and societal interactions (Ali et al., 2017; Tabassum et al., 2020). Exposure to restrictive or critical environments may reinforce emotional suppression or maladaptive behaviors (Rashid & Hyder, 2018). Social Learning Theory highlights how learned behaviors influence emotional regulation and interpersonal interactions, contributing to the development or maintenance of Emotional and Behavioral Disorders.

2.3.4 Ecological Systems Theory

Ecological Systems Theory views human development as occurring within interconnected systems, ranging from immediate environments to broader societal structures (Bronfenbrenner, 1979). These systems include the microsystem (family, peers), mesosystem (interactions between systems), exosystem (institutions, media), and macrosystem (culture, religion, social norms).

In Pakistan, young Muslim women's emotional and social experiences are shaped by multiple ecological layers. Family expectations, educational pressures, community attitudes, and cultural values collectively influence emotional well-being and social relationships (Hofstede, 2011; Rashid & Hyder, 2018). This theory underscores the importance of contextual factors in understanding Emotional and Behavioral Disorders and their relational impact.

2.3.5 Relational Cultural Theory

Relational Cultural Theory (RCT) emphasizes the centrality of relationships in psychological growth and well-being. It posits that disconnection, isolation, and relational

disempowerment are key sources of psychological distress, particularly for women (Jordan, 2010; Miller, 1986).

RCT is especially relevant to understanding EBD among young women, as social disconnection and lack of emotional validation can exacerbate emotional and behavioral difficulties (Comstock et al., 2008). In cultures where women's voices may be marginalized, relational disconnections can lead to emotional suppression, low self-esteem, and strained social bonds (Ali et al., 2017). RCT highlights the need for mutual empathy, empowerment, and connection in fostering healthy relationships.

2.3.6 Islamic Psychological Perspective

Moderate Islamic psychology emphasizes balance, compassion, accountability, and holistic well-being. Islamic teachings acknowledge emotional suffering and encourage seeking knowledge, support, and healing while maintaining spiritual connection (Koenig, 2012). Concepts such as *sabr* (patience), *tawakkul* (trust in God), and *rahmah* (compassion) provide coping mechanisms for emotional distress (Yusuf & Khan, 2021).

However, Islamic psychology also recognizes the importance of addressing psychological causes alongside spiritual practices. When Emotional and Behavioral Disorders are misattributed solely to weak faith or moral failure, relational harm may occur (Weatherhead & Daiches, 2010). A balanced Islamic psychological perspective supports emotional expression, empathy, and communal responsibility, aligning with mental health awareness and relational well-being.

2.3.7 Integrated Conceptual Framework

The integrated conceptual framework of this study positions Emotional and Behavioral Disorders as outcomes of cognitive processes, attachment patterns, learned behaviors, ecological influences, relational dynamics, and spiritual context (Beck, 1976; Bowlby, 1988; Bandura, 1977; Bronfenbrenner, 1979; Jordan, 2010). These factors interact to influence emotional regulation, behavioral responses, and social relationships.

Cognitive distortions affect emotional responses; attachment patterns shape relational security; social learning reinforces behavioral norms; ecological systems provide contextual pressures; relational disconnections intensify distress; and Islamic values influence meaning-making and coping (Koenig, 2012; Hofstede, 2011). Together, these elements explain how

Emotional and Behavioral Disorders impact family relationships, peer interactions, educational environments, and community participation among young Muslim women in Pakistan.

2.4 Research Gaps

Despite the growing body of research on Emotional and Behavioral Disorders (EBD) and social relationships, several critical gaps remain, particularly in relation to young Muslim women in Pakistan. Identifying these gaps provides a clear justification for the present study.

2.4.1 Conceptual Gap

Existing literature often examines Emotional and Behavioral Disorders either from a purely clinical perspective or within isolated social variables. There is a lack of integrative conceptualization that simultaneously links emotional, behavioral, relational, cultural, and religious dimensions. Most studies treat social relationships as secondary outcomes rather than central constructs, resulting in fragmented understanding of how EBD and social relationships dynamically interact among young Muslim women.

This study adopts an integrative conceptual approach by positioning Emotional and Behavioral Disorders and social relationships as interdependent constructs rather than isolated phenomena. By examining emotional, behavioral, relational, cultural, and religious dimensions collectively, the study offers a holistic understanding of how EBD manifests and operates within the lived experiences of young Muslim women.

2.4.2 Theoretical Gap

While Western psychological theories such as Cognitive Behavioral Theory, Attachment Theory, and Social Learning Theory are widely applied, they are rarely integrated into a unified framework, particularly within Muslim contexts. Moreover, the incorporation of Islamic psychological perspectives remains minimal or superficial. There is a clear gap in theory-driven research that meaningfully blends established psychological theories with culturally and religiously congruent frameworks.

An integrated theoretical framework is employed, combining Cognitive Behavioral Theory, Attachment Theory, Social Learning Theory, Ecological Systems Theory, and Relational Cultural Theory, alongside a moderate Islamic psychological perspective. This synthesis enables culturally congruent interpretation of emotional distress and relational functioning, moving beyond the exclusive reliance on Western theoretical models.

2.4.3 Methodological Gap

The majority of studies on EBD rely on quantitative, cross-sectional designs, often using standardized instruments developed in Western contexts. Qualitative insights and systematic literature reviews focusing on culturally specific experiences are limited. Additionally, few studies follow structured review protocols such as PRISMA when examining EBD and relational outcomes, limiting the transparency and replicability of findings.

The study utilizes a PRISMA-guided Systematic Literature Review to ensure methodological rigor, transparency, and replicability. By synthesising findings from diverse qualitative and quantitative studies, the research overcomes the limitations of single-method, cross-sectional designs and provides comprehensive evidence base relevant to culturally specific contexts.

2.4.4 Contextual Gap

Research on Emotional and Behavioral Disorders has predominantly focused on Western populations, with limited attention to South Asian and Muslim-majority societies. Within Pakistan, studies addressing young Muslim women's emotional well-being remain scarce and are often urban-centric, overlooking sociocultural pressures such as gender norms, family honour, stigma, and religious expectations that shape emotional expression and help-seeking behaviors.

By focusing explicitly on young Muslim women in Pakistan, this study centers a population that has been underrepresented in mental health research. Cultural norms, gender roles, family structures, religious beliefs, and societal expectations are treated as central analytical variables rather than peripheral background factors.

2.4.5 Knowledge Gap

There is insufficient synthesized knowledge regarding how Emotional and Behavioral Disorders specifically affect social relationships—including family interactions, peer connections, and community engagement—among young Muslim women. The absence of comprehensive, culturally informed evidence restricts the development of effective, context-sensitive interventions and policies.

Through systematic synthesis and thematic analysis, the study generates consolidated knowledge on the relational impact of Emotional and Behavioral Disorders, including family

relationships, peer interactions, and community engagement. The findings aim to inform culturally sensitive mental health interventions, policy development, and future research directions.

CHAPTER THREE
RESEARCH METHODOLOGY

3.1 Introduction

This chapter outlines the systematic methodological procedures adopted to conduct the literature review on the effect of Emotional and Behavioral Disorders (EBD) on the social relationships of young Muslim women in Pakistan. To ensure transparency, replicability, and academic rigor, this study follows the **Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA)** framework. The PRISMA approach enables the identification, selection, appraisal, and synthesis of relevant literature through a structured and traceable process. This chapter describes the rationale for employing a systematic review design, the search strategy, databases used, inclusion and exclusion criteria, screening procedures, quality appraisal techniques, and data synthesis methods.

3.2 Research Design

A Systematic Literature Review (SLR) was selected as the most appropriate research design for this study because the existing literature on Emotional and Behavioral Disorders (EBD) and social relationships among young Muslim women in Pakistan is limited, scattered, and multidisciplinary. Relevant evidence is found across psychology, mental health, gender studies, sociology, Islamic psychology, and South Asian cultural studies. Therefore, a systematic approach was required to identify, organize, and synthesize the available evidence in a transparent and structured manner.

This study is non-empirical in nature and does not involve direct data collection from participants. Instead, it relies on previously published studies, reports, and scholarly literature to examine how emotional and behavioral difficulties affect interpersonal, family, peer, and community relationships. A PRISMA-guided review was considered suitable because it provides a clear framework for identifying, screening, assessing, and synthesizing relevant studies. This helps reduce selection bias and improves the reliability and replicability of the review process.

The use of an SLR also supports the aim of integrating global, regional, and Pakistani literature while maintaining attention to cultural, religious, and gender-specific factors. Since the topic involves psychological, relational, and socio-cultural dimensions, a systematic literature review allows the findings to be synthesized thematically rather than statistically. This makes the

design appropriate for developing a culturally informed understanding of EBD and its impact on the social relationships of young Muslim women in Pakistan.

3.3 PRISMA Framework Overview

This study was conducted in accordance with the **Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA 2020) Statement** guidelines, which provide an internationally recognized framework for planning, conducting, and reporting systematic literature reviews. The PRISMA framework was adopted to enhance the transparency, consistency, and reproducibility of the review process by documenting each stage of study identification, selection, and synthesis (Page et al., 2021).

The review followed the four principal stages recommended by PRISMA: **identification, screening, eligibility, and inclusion**. During the identification stage, relevant literature was searched across selected electronic databases using predefined search terms and Boolean operators. The screening stage involved reviewing titles and abstracts to remove duplicate and clearly irrelevant records. Studies that met the preliminary selection criteria were then assessed in full during the eligibility stage. Finally, studies that satisfied all inclusion criteria were retained for thematic synthesis in the review.

The PRISMA framework also provides a structured approach for reporting the number of records identified, screened, excluded, and included throughout the review process. Accordingly, a PRISMA flow diagram is presented in this study to illustrate the study selection process and the reasons for excluding records at different stages. This approach strengthens the methodological rigor of the review and enables readers to understand how the final body of evidence was established.

3.4 Search Strategy

The systematic search was conducted using PubMed as the primary bibliographic database. A supplementary systematic search was also conducted using Google Scholar to broaden study identification. ResearchGate and the reference lists of retrieved articles were used only to facilitate full-text retrieval and verify bibliographic information where necessary.

A comprehensive and systematic search strategy was developed to identify relevant literature addressing the effect of Emotional and Behavioral Disorders (EBD) on the social relationships of young Muslim women in Pakistan. The search strategy was designed in

accordance with the PRISMA 2020 guidelines to ensure a transparent, structured, and reproducible review process. To broaden the retrieval of relevant studies, PubMed and Google Scholar were used to identify literature across health, psychology, and social-science disciplines.

The search combined controlled vocabulary, database-specific indexing terms where available, free-text keywords, and Boolean operators (AND, OR) to capture variations in terminology related to Emotional and Behavioral Disorders, social relationships, Muslim women, and the Pakistani context.

Following the initial search, retrieved records were exported for screening. Duplicate records were removed before titles and abstracts were assessed for relevance. Studies that satisfied the predefined eligibility criteria were subsequently reviewed in full and considered for inclusion in the thematic synthesis.

3.4.1 Information Sources

The literature search used **PubMed** as the primary bibliographic database. A supplementary systematic search was conducted using **Google Scholar** to broaden the identification of potentially relevant studies.

ResearchGate was used only as a supplementary resource to locate full-text versions of potentially eligible articles when these were not readily accessible through the original source. It was not used for systematic study identification.

Systematic Study Identification Sources

- PubMed
- Google Scholar

Supplementary Full-Text Retrieval Source

- ResearchGate

Where full-text articles were not accessible through formal database, additional efforts were made to locate them through academic networking platforms such as ResearchGate.

3.4.2 Keywords and Boolean Operators

The search strategy was developed by identifying key concepts from the research question and translating them into searchable keywords and phrases. Four main search concepts were used: **(1) Emotional and Behavioral Disorders, (2) Social Relationships, (3) Young Women, and (4) Pakistan and Muslim Context**. To maximize the retrieval of relevant literature, synonyms and

closely related terms were combined using Boolean operators. The operator **OR** was used to include alternative terms describing the same concept, while **AND** was used to combine different concepts and narrow the search to studies addressing all aspects of the research question.

The principal search terms used in this review are presented below.

Concept 1: Emotional and Behavioral Disorders

- "Emotional and Behavioral Disorders"
- "Emotional Dysregulation"
- "Behavioral Problems"
- "Mental Health"
- "Psychological Distress"
- Anxiety
- Depression

Concept 2: Social Relationships

- "Social Relationships"
- "Interpersonal Relationships"
- "Family Relationships"
- "Peer Relationships"
- "Social Functioning"
- "Social Support"

Concept 3: Population

- "Young Women"
- "Young Muslim Women"
- Women
- Female
- "Female Adults"

Concept 4: Context

- Pakistan
- Pakistani
- Muslim
- "South Asian"

The search terms were combined using Boolean operators. A typical search string was structured as follows:

("emotional and behavioral disorders"
OR "emotional and behavioural disorders"
OR "emotional dysregulation"
OR "behavioral problems"
OR "behavioural problems"
OR anxiety
OR depression
OR "psychological distress")
AND
("social relationships"
OR "interpersonal relationships"
OR "family relationships"
OR "peer relationships"
OR "social support"
OR "social functioning")
AND
(women
OR female
OR "young women")
AND
(Pakistan
OR Pakistani
OR Muslim
OR "South Asia")
NOT
(pregnancy
OR pregnant
OR prenatal
OR postpartum

OR perinatal)

Where necessary, minor modifications were made to the search syntax to accommodate the requirements of PubMed and Google Scholar while maintaining the same core search concepts throughout the review.

3.4.3 Search Limits and Eligibility Filters

To ensure that the search yielded relevant and manageable results, several search limits and eligibility filters were applied across the selected databases. These limits were established before the screening process to improve the relevance, quality, and consistency of the retrieved literature while maintaining transparency in the search strategy.

The search was limited to studies published between **January 2000 and January 2026**. The original PubMed search was conducted in January 2026, while the supplementary Google Scholar search was conducted on 31 August 2026 using the same publication cutoff to maintain consistency. The Google Scholar search returned approximately 17,800 results. As Google Scholar produces a large relevance-ranked result set, the first 200 results were screened as a predefined supplementary-search limit, consistent with recommendations for its use in evidence reviews (Haddaway et al., 2015).

This period was selected to capture contemporary research reflecting current understanding of Emotional and Behavioral Disorders, advances in mental health research, and evolving perspectives on women's social relationships within diverse cultural contexts.

Only studies published in **English** were included because English was the common language across the selected international databases and allowed for consistent appraisal and interpretation of the literature.

Where database filters were available, preference was given to **peer-reviewed journal articles**, dissertations, and theses. Conference abstracts, editorials, opinion pieces, book reviews, and publications without accessible full texts were excluded during the screening process. When available, database filters for **human studies** and **adult populations** were also applied to improve the relevance of the retrieved records.

These search limits were applied before the formal screening process. The final selection of studies was subsequently guided by the predefined inclusion and exclusion criteria presented in Section 3.5.

Table 3.1

Summary of Search protocol

Item	Description
Systematic Identification sources	PubMed and Google Scholar
Supplementary full-text retrieval Sources	ResearchGate
Google Scholar screening limit	First 200 results ranked by relevance
Publication period	January 2000 – January 2026
Language	English
Study design	Primary empirical studies
Search strategy	Boolean operators (AND, OR, NOT)
Screening process	Title screening → Abstract screening → Full-text review

The search strategy was developed by combining four principal search concepts derived from the research question: Emotional and Behavioral Disorders, Social Relationships, Women, and the Pakistan/Muslim context. Synonyms and related terms were incorporated using Boolean operators (AND, OR) to maximize the retrieval of relevant studies while maintaining the specificity of the review. Minor modifications to the search syntax were made where necessary to accommodate the requirements of individual databases; however, the core search concepts remained consistent across all information sources.

The PubMed search identified 194 records after applying the predefined publication period and English-language criteria. The supplementary Google Scholar search returned approximately 17,800 results, of which the first 200 relevance-ranked results were selected for systematic screening. Records from both sources subsequently underwent screening and eligibility assessment in accordance with the PRISMA 2020 guidelines.

3.5 Eligibility Criteria

To ensure that only relevant and methodologically appropriate studies were included in the review, predefined eligibility criteria were established before the screening process. These criteria were developed in line with the research objectives and were applied consistently during title screening, abstract screening, and full-text assessment. Establishing clear eligibility criteria helped minimize selection bias, improve transparency, and ensure that the final body of evidence directly addressed the research question. To maintain methodological rigor, predefined inclusion and exclusion criteria were applied.

3.5.1 Inclusion Criteria

To ensure consistency and relevance, predefined inclusion criteria were established before the screening process. Only studies that directly addressed the research question and met the specified methodological and contextual requirements were considered for inclusion in the review. The inclusion criteria applied in this study are presented in Table 3.2.

Table 3.2

Inclusion Criteria

Criterion	Justification
Studies examining EBD-related emotional, behavioral, or psychological difficulties among women, including depression, anxiety, emotional dysregulation, psychological distress, or related conditions.	Ensured that the included studies addressed the range of emotional, behavioral, and psychological difficulties covered by the review.
Studies investigating social relationships, including family, peer, interpersonal, or community relationships	Directly aligned with the study's focus on relational outcomes.
Studies involving Muslim women or Pakistani women aged approximately 18–35 years	Reflected the target population while allowing inclusion of studies with broader adult female populations where findings were relevant.

Criterion	Justification
Empirical qualitative, quantitative, or mixed-methods studies published in peer-reviewed journals, dissertations, or theses	Ensured that the review was based primarily on original research evidence while maintaining academic quality.
Studies published between January 2000 and January 2026	Captured contemporary evidence reflecting current understanding of mental health and social relationships.
Studies published in English	Allowed consistent appraisal and interpretation across the selected databases.
Full-text publications available for review	Enabled comprehensive assessment of study quality, methodology, and findings.

3.5.2 Exclusion Criteria

Studies that did not align with the objectives of the review or failed to meet the predefined eligibility requirements were excluded during the screening process. The exclusion criteria were developed to ensure that only relevant and methodologically appropriate studies were included in the final synthesis. The exclusion criteria are presented in Table 3.3.

Table 3.3

Exclusion Criteria

Criterion	Justification
Studies involving populations not aligned with the target population, including children or adolescents, older adults, male-only or mixed-gender samples where women-specific findings could not be extracted, and non-Pakistani/non-relevant regional populations.	These populations did not sufficiently represent the target population of the review.
Studies unrelated to EBD-related emotional, behavioral, or psychological difficulties or social relationships	Did not address the research objectives.

Criterion	Justification
Purely biomedical or neurological studies without psychosocial or relational outcomes	The review focused on psychological and social dimensions rather than biological mechanisms alone.
Conference abstracts, editorials, commentaries, book reviews, and publications lacking sufficient methodological detail	These sources generally do not provide adequate evidence for systematic synthesis.
Publications without accessible full text	Full-text access was necessary for detailed quality assessment and data extraction.
Duplicate records identified across multiple databases	Removed to avoid repeated inclusion of the same study.
Studies focusing primarily on mental health in the context of specific physical or medical conditions (e.g., cancer, diabetes, cardiovascular disease, chronic infectious diseases) were excluded.	The primary focus was on emotional and behavioral disorders and social relationships relevant to the review objectives.

3.6 Study Screening and Selection Process

The study selection process followed the PRISMA 2020 framework. Records identified through PubMed and the supplementary Google Scholar search were screened using the predefined eligibility criteria. Duplicate records were removed before screening, and potentially relevant studies were assessed through title, abstract, and full-text review before final inclusion in the thematic synthesis.

The screening and selection process comprised four sequential stages: identification, screening, eligibility assessment, and final inclusion.

3.6.1 Identification

The PubMed search identified 194 records. The supplementary Google Scholar search returned approximately 17,800 results, of which the first 200 relevance-ranked results were

selected for systematic screening. Records from both sources were compiled for screening, and the reference lists of key publications were also checked for potentially relevant studies.

3.6.2 Screening

Duplicate records were identified by comparing study titles, authors, and publication years across PubMed and Google Scholar and were removed before screening. The remaining records were screened by reviewing titles and available abstracts or search-result summaries against the predefined eligibility criteria. Studies clearly unrelated to the target population, emotional or psychological difficulties, social relationships, or eligible study designs were excluded at this stage.

3.6.3 Eligibility Assessment

Studies that appeared potentially relevant after title and abstract screening were retrieved in full and assessed against the predefined eligibility criteria. Each study was evaluated for population relevance, psychological or emotional difficulty, social relationship outcomes, study design, and publication characteristics. Where a full-text article could not be obtained, it was recorded separately as a report not retrieved. For studies excluded after full-text assessment, the specific reason for exclusion was documented and reported in the PRISMA flow diagram.

3.6.4 Final Inclusion

Studies that met all eligibility requirements and were successfully retrieved in full were included in the final review. These studies formed the evidence base for the thematic synthesis presented in Chapter Four. The complete selection process, including duplicate removal, reports not retrieved, full-text exclusions, and final inclusions, is summarized in the PRISMA 2020 flow diagram.

Figure 3.1

PRISMA 2020 Flow Diagram of the Study Selection Process

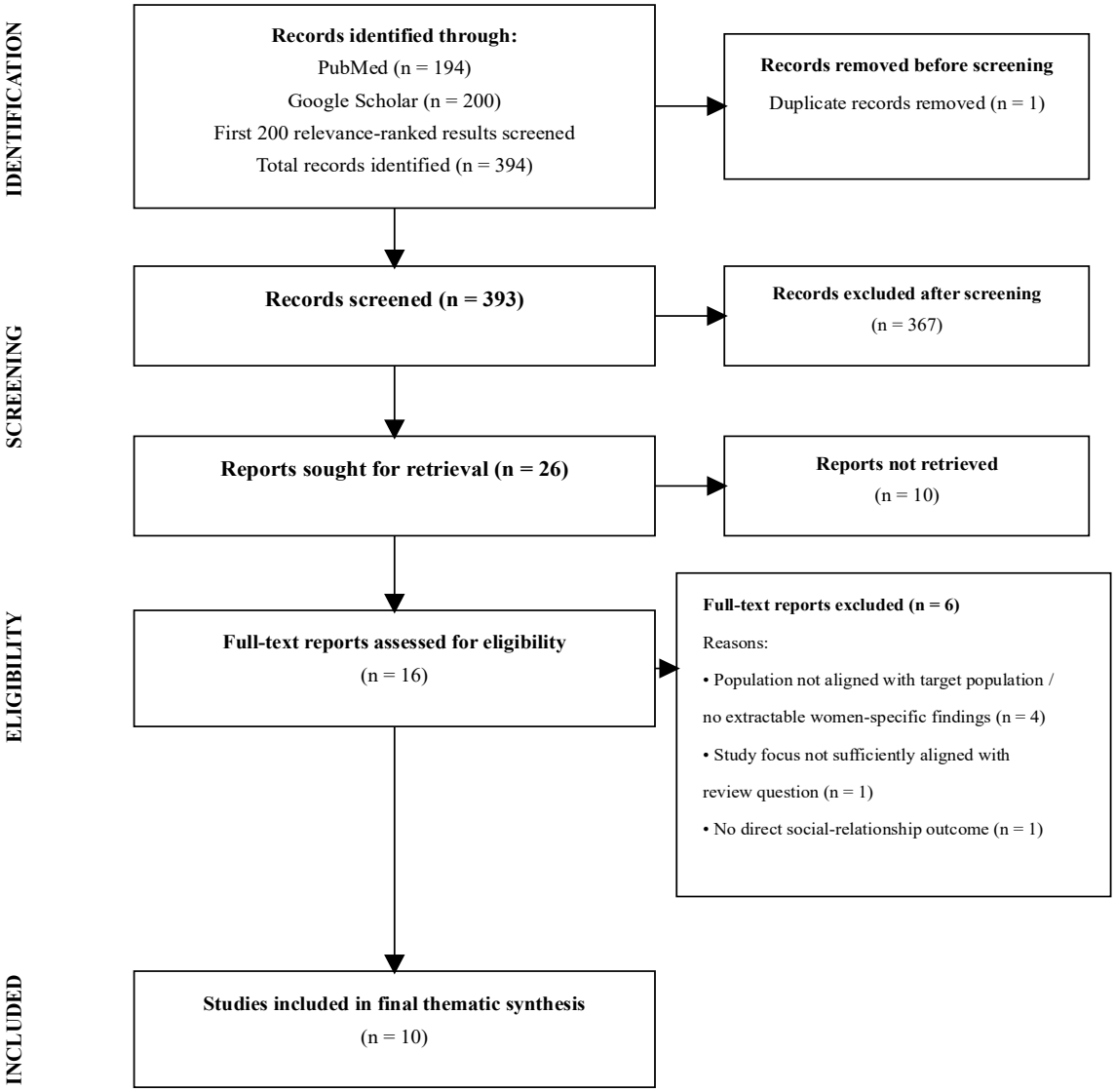

Figure 3.1 presents the PRISMA 2020 flow diagram summarising the study selection process. The PubMed search identified 194 records, while 200 relevance-ranked Google Scholar results were selected for supplementary systematic screening. After removal of one duplicate record, 393 records were screened, of which 367 were excluded. Twenty-six reports were sought

for retrieval; 10 could not be retrieved, and 16 full-text reports were assessed for eligibility. Six full-text reports were excluded, resulting in 10 studies being included in the final thematic synthesis.

3.7 Data Extraction Procedure

Following the final selection of eligible studies, data were extracted using a structured data extraction form developed specifically for this review. The use of a standardized extraction process ensured consistency in recording information across all included studies and facilitated systematic comparison during the thematic synthesis.

For each included study, key methodological and contextual information was recorded, including the author(s), year of publication, country of study, study design, participant characteristics, emotional, behavioral, or psychological difficulty examined, social relationship outcomes investigated, and the principal findings relevant to the research objectives. Information relating to cultural, religious, and contextual factors was also extracted where reported, as these variables were central to understanding the experiences of young Muslim women within the Pakistani context.

The extracted information was organized into a structured evidence table to facilitate comparison across studies and to support the identification of recurring themes during the narrative thematic synthesis.

Table 3.4

Data Extraction Template

Data Item	Description
Author(s)	Name(s) of the study author(s)
Year	Year of publication
Country	Country in which the study was conducted
Study Design	Qualitative, quantitative, or mixed methods
Participants	Characteristics and sample size of participants
Emotional/Psychological Difficulty	Emotional, behavioral, or psychological difficulty examined

Data Item	Description
Social Relationship Outcome	Family, peer, interpersonal, or community relationship examined
Key Findings	Main findings relevant to the review objectives
Cultural/Religious Factors	Cultural or religious considerations reported in the study
Quality Assessment	Overall appraisal outcome (to be completed during quality assessment)

3.8 Quality Assessments

The methodological quality of the studies included in this systematic review was assessed using the **Mixed Methods Appraisal Tool (MMAT), Version 2018** (Hong et al., 2018). MMAT is a widely recognized critical appraisal tool developed specifically for systematic reviews that include qualitative, quantitative, and mixed-methods research. It provides a consistent framework for evaluating methodological quality across different study designs while maintaining transparency and methodological rigor.

Following the selection of eligible studies, each study was critically appraised using the relevant MMAT criteria according to its research design. The appraisal considered aspects such as the appropriateness of the study design, participant selection, data collection procedures, measurement methods, data analysis, and the coherence between the study objectives and reported findings.

The purpose of the quality assessment was not to exclude studies solely on the basis of methodological limitations, but rather to provide a balanced interpretation of the available evidence and to enhance the credibility of the thematic synthesis. The quality appraisal findings were considered during the interpretation of the review results presented in Chapter Four. The quality appraisal informed the interpretation of the findings but was not used as the sole basis for excluding studies from the review.

Table 3.5

MMAT Quality Assessment Framework

Research objectives	Were the aims of the study clearly stated?
Study design	Was the research design appropriate for the objectives?
Participant selection	Was the study population clearly described and appropriate?
Data collection	Were the methods of data collection adequately explained?
Data analysis	Was the analysis appropriate and clearly reported?
Findings	Were the findings presented clearly and supported by the data?
Relevance	Did the study contribute directly to the review question?

3.9 Data Synthesis Method

Given the diversity of the included studies in terms of research design, methodology, and outcome measures, a **narrative thematic synthesis** was adopted rather than a statistical meta-analysis. A meta-analysis was not considered appropriate because the studies differed considerably in their populations, research methods, and the ways in which Emotional and Behavioral Disorders and social relationships were conceptualized and measured.

The thematic synthesis involved a systematic process of reviewing and comparing the findings of the included studies to identify recurring patterns, similarities, and differences. Initially, the findings from each study were examined in detail and key concepts relevant to the research objectives were extracted. These concepts were then compared across studies and grouped into broader categories based on their conceptual similarity.

Through an iterative process of analysis and comparison, these categories were refined into overarching themes that reflected the collective evidence across the included studies. Particular attention was given to cultural, gender-related, and religious factors influencing the relationship between Emotional and Behavioral Disorders and social relationships among young Muslim women in Pakistan. The final themes formed the basis of the findings presented and discussed in Chapter Four.

Throughout the synthesis process, emphasis was placed on identifying patterns across studies rather than simply describing individual study findings. This approach enabled the review to generate an integrated understanding of the existing evidence while acknowledging variations in research settings, methodologies, and cultural contexts.

3.10 Ethical Considerations

As this study is based exclusively on a systematic review of published literature, it did not involve direct data collection from human participants and therefore did not require formal ethical approval from an institutional review board. Nevertheless, ethical principles relevant to secondary research were observed throughout the review process.

The review was conducted with a commitment to academic integrity, transparency, and responsible research practice. All sources included in the review were appropriately acknowledged through accurate citation and referencing in accordance with the **American Psychological Association (APA) 7th edition** guidelines. Care was taken to avoid plagiarism by ensuring that ideas, findings, and interpretations derived from previous studies were properly attributed to their original authors.

Transparency was maintained by clearly documenting the search strategy, eligibility criteria, study selection process, quality assessment procedures, and methods of data synthesis. These measures enhance the reproducibility of the review and allow readers to understand how the evidence was identified, evaluated, and synthesized.

Given the cultural and religious focus of the review, particular care was taken to present the findings respectfully and objectively. The interpretation of the evidence sought to acknowledge the diversity of experiences among young Muslim women while avoiding cultural bias, stereotyping, or stigmatizing language. The study aimed to contribute to a balanced and culturally sensitive understanding of Emotional and Behavioral Disorders within the Pakistani context.

CHAPTER FOUR

SYSTEMATIC LITERATURE ANALYSIS PRESENTATION AND FINDINGS

4.1 Introduction

This chapter presents the findings of the systematic literature review conducted to examine the effect of Emotional and Behavioral Disorders (EBD) on the social relationships of young Muslim women in Pakistan. Following the PRISMA 2020 framework described in Chapter Three, **394 records were identified** through PubMed and the supplementary Google Scholar search. After duplicate removal and screening, **26 reports** were sought for retrieval, **16 full-text reports** were assessed for eligibility, and **10 studies** were included in the final synthesis.

The chapter begins by presenting the characteristics of the included studies, followed by a thematic analysis of the evidence. The findings are organized into five major themes: social support and mental health; family and marital relationship strain; social isolation, psychological distress, and help-seeking; cultural expectations, family honour (izzat), and religious influences; and gender-specific vulnerability and contextual stressors. Together, these themes provide a comprehensive understanding of how emotional and behavioral difficulties influence the social experiences and relationships of young Muslim women within the Pakistani context. As reflected in the operational definition adopted in this review, the included studies examined heterogeneous emotional, behavioral, and psychological difficulties rather than a single uniform diagnostic category.

Table 4.1 summarises the characteristics of the ten studies included in the systematic review and provides the contextual basis for the thematic synthesis presented in the following sections.

Table 4.1

Characteristics of the Included Studies

Author (Year)	Country	Participants	Study Design	Emotional/ Psychological Difficulty Examined	Social Relationship Findings	Key Findings
Gunasinghe et al. (2019)	United Kingdom (British Pakistani Muslim women)	Six young British Pakistani Muslim women	Qualitative (Interpretative Phenomenological Analysis)	Psychological distress, well-being	Family honour (izzat), family expectations, help-seeking, interpersonal relationships	Cultural expectations surrounding izzat influenced women's social relationships, help-seeking behaviours, and psychological well-being.
Richardson et al. (2022)	Pakistan	Rural married women	Longitudinal cohort study	Intimate partner violence, psychological well-being	Family and community social support	Greater perceived social support was associated with reduced intimate partner violence and better mental health outcomes.
Husain et al. (2007)	Pakistan	Adults from a tribal community	Cross-sectional study	Depression	Social stress, life events	Exposure to stressful life events and social adversity was significantly associated with depression.

Author (Year)	Country	Participants	Study Design	Emotional/ Psychological Difficulty Examined	Social Relationship Findings	Key Findings
Qadir et al. (2013)	Pakistan	Married women	Cross-sectional study	Mental health	Marital relationship, perceived social support	Better marital relationships and stronger perceived social support were associated with improved mental health.
Daraz et al. (2024)	Pakistan	Rural women	Cross-sectional study	Climate-related psychological distress	Family and community support	Climate-related stress negatively affected women's mental health, while social support enhanced resilience.
Gask et al. (2011)	United Kingdom (British Pakistani women)	Fifteen British Pakistani women with depression	Qualitative thematic analysis	Persistent depression	Family conflict, isolation, social relationships	Family conflict, isolation, and reduced personal control contributed to persistent depression.
Husain et al. (2021)	Pakistan	455 women attending medical clinics	Cross-sectional study	Major depressive disorder	Childhood trauma, perceived social support	Higher perceived social support reduced the likelihood of depression despite

Author (Year)	Country	Participants	Study Design	Emotional/ Psychological Difficulty Examined	Social Relationship Findings	Key Findings
						childhood adversity.
Ayub et al. (2009)	Pakistan	650 married women attending primary care	Cross-sectional survey	Psychiatric morbidity	Domestic violence, social support	Domestic violence and stressful life events increased psychiatric morbidity, while social support had a protective effect.
Abbas et al. (2019)	Pakistan	Married working and non-working women	Cross-sectional study	Depression, anxiety and stress	Marital adjustment, social support	Social support moderated the association between marital adjustment and psychological distress, contributing to better mental health.
Rahman et al. (2019)	Pakistan	612 women aged 18–60 years from rural Swat	Cluster randomized controlled trial	Psychological distress, anxiety, and depression	Perceived social support	The intervention reduced anxiety and depression, with social support assessed as a key psychosocial outcome.

4.2 Findings

The thematic synthesis of the ten included studies generated five major themes. These themes reflect the ways in which emotional and psychological difficulties influence social relationships among Pakistani and British Pakistani Muslim women. The findings show that emotional distress does not occur in isolation; rather, it is closely connected with social support, family and marital relationships, isolation, cultural expectations, and gendered social pressures.

4.2.1 Social Support and Mental Health

Across the included studies, social support consistently emerged as one of the strongest protective factors influencing both emotional well-being and the quality of social relationships among women. Regardless of differences in study design or population, women who reported supportive family relationships, positive marital adjustment, and strong interpersonal networks generally experienced lower levels of depression, anxiety, and psychological distress. Conversely, inadequate social support was associated with poorer mental health outcomes, greater relational difficulties, and reduced psychological resilience (Abbas et al., 2019; Husain et al., 2021; Qadir et al., 2013; Richardson et al., 2022).

The evidence further suggests that social support functions not only as emotional reassurance but also as a mechanism that enables women to cope with personal and interpersonal challenges. Women receiving encouragement from spouses, family members, or their wider social networks were better able to manage stress and maintain healthier relationships. In contrast, limited emotional support increased vulnerability to distress and often reduced women's confidence in seeking assistance or discussing emotional concerns. This pattern indicates that supportive relationships contribute to both psychological well-being and healthier social functioning (Abbas et al., 2019; Husain et al., 2021).

Several studies also demonstrated that the relationship between social support and mental health is reciprocal. Richardson et al. (2022) reported that stronger family and community support reduced the likelihood of subsequent intimate partner violence, whereas experiences of violence weakened women perceived social support over time. Similarly, Husain et al. (2021) found that perceived social support reduced the likelihood of major depressive disorder among women despite the presence of childhood adversity and other psychosocial stressors. These findings

suggest that supportive relationships can buffer the impact of adverse life experiences, while deteriorating relationships may increase vulnerability to emotional and psychological difficulties. Rahman et al. (2019) also examined perceived social support alongside anxiety and depression among women in rural Swat, further highlighting the relevance of social support in women's psychological well-being.

Within the Pakistani context, where family relationships and collective social values strongly influence women's daily lives, the quality of social support appears particularly important. The synthesis indicates that emotional and psychological difficulties are closely intertwined with women's relational environments. Supportive families and social networks promote resilience and healthier interpersonal relationships, whereas weak or disrupted support systems contribute to emotional distress and social disconnection. Overall, the findings demonstrate that social support is both a protective factor for mental health and a key determinant of women's ability to establish and maintain positive social relationships.

4.2.2 Family and Marital Relationship Strain

Family and marital relationships emerged as one of the most influential factors shaping women's emotional well-being and social functioning across the included studies. The evidence consistently indicates that supportive family environments contribute to better psychological outcomes, whereas marital conflict, family discord, domestic violence, and strained interpersonal relationships increase vulnerability to emotional and psychological difficulties. These findings suggest that family relationships are not merely social settings but play a central role in influencing women's mental health and their ability to maintain healthy interpersonal relationships.

Several studies demonstrated that positive marital relationships were associated with improved psychological well-being. Qadir et al. (2013) reported that women who experienced greater marital satisfaction and stronger perceived support from their spouses and families showed fewer symptoms of depression and anxiety. Likewise, Abbas et al. (2019) found that social support strengthened the relationship between marital adjustment and mental well-being, indicating that healthy family relationships may reduce the psychological impact of everyday stressors.

In contrast, negative family experiences were consistently associated with poorer mental health outcomes. Ayub et al. (2009) found that women exposed to domestic violence and frequent family conflict were significantly more likely to experience psychiatric morbidity. The study further demonstrated that constructive communication, education, and supportive family

interactions were associated with lower psychological distress, highlighting the protective role of positive family relationships.

The qualitative evidence provides further insight into how family relationships shape women's emotional experiences. Gask et al. (2011) described how many British Pakistani women experiencing depression felt trapped within difficult family circumstances, leading to feelings of helplessness, isolation, and reduced personal control. Similarly, Gunasinghe et al. (2019) reported that family expectations and the cultural concept of *izzat* often influenced women's emotional expression, interpersonal decision-making, and willingness to seek support. While family relationships were valued as an important source of identity and belonging, they could also become a source of emotional pressure when women felt unable to discuss their psychological difficulties openly.

Collectively, the findings demonstrate a reciprocal relationship between emotional well-being and family functioning. Healthy family and marital relationships appear to promote emotional resilience, facilitate communication, and strengthen social connectedness. Conversely, emotional and psychological difficulties may contribute to interpersonal tension, reduced communication, and strained family relationships. Within the Pakistani cultural context, where family remains the primary source of social support and identity, maintaining positive family relationships appears fundamental to both psychological well-being and healthy social functioning.

4.2.3 Social Isolation, Psychological Distress, and Help-Seeking

The thematic synthesis indicates that social isolation is both a consequence and a contributing factor to emotional and psychological difficulties among women. Across the included studies, women experiencing depression, anxiety, or psychological distress often reported reduced social interaction, emotional withdrawal, and reluctance to seek support from others. These experiences limited opportunities to receive emotional reassurance and practical assistance, thereby increasing vulnerability to ongoing psychological distress.

The qualitative studies provided valuable insight into the relationship between emotional distress and social isolation. Gask et al. (2011) found that many British Pakistani women experiencing persistent depression described feelings of isolation, loss of control, and being "stuck" within difficult family circumstances. Their emotional difficulties were often reinforced by limited opportunities to discuss personal concerns openly or to access appropriate support.

Similarly, Gunasinghe et al. (2019) reported that cultural expectations surrounding *family honor* influenced women's willingness to disclose emotional problems. Many participants preferred to remain silent about their psychological difficulties because they feared social judgement, bringing shame to their families, or being misunderstood by others.

The quantitative evidence further supports these findings. Husain et al. (2007) demonstrated that depression was associated with greater social adversity, stressful life events, and functional impairment among adults living in a tribal area of Pakistan. Likewise, Richardson et al. (2022) found that women experiencing intimate partner violence gradually reported lower levels of perceived family and community support, reducing their access to supportive relationships during periods of emotional distress. Together, these studies suggest that weakened social relationships may both contribute to and result from psychological difficulties.

Help-seeking behavior also emerged as an important aspect of this theme. Across the included studies, women were generally more likely to seek emotional support when they perceived their family and social environments to be understanding and supportive. Conversely, fear of stigma, concerns about family honor, and lack of emotional support discouraged many women from discussing their psychological concerns or accessing professional services. These barriers may delay early intervention and contribute to the persistence of emotional difficulties.

Overall, the evidence suggests that social isolation, emotional distress, and help-seeking behavior are closely interconnected. Women experiencing psychological difficulties may gradually withdraw from social relationships, while reduced social interaction further limits access to emotional support and coping resources. Within the Pakistani context, where interpersonal relationships play a central role in everyday life, strengthening supportive environments may encourage earlier help-seeking and reduce the long-term social consequences of emotional and psychological difficulties.

4.2.4 Family Honour, Cultural Expectations, and Religious Influences

The included studies indicate that cultural values and family expectations play an important role in shaping women's social relationships and emotional well-being. Rather than acting solely as barriers or protective factors, these cultural influences were found to affect how women understood emotional distress, communicated their concerns, and sought support from others. Within Pakistani society, where family relationships and collective values are highly respected, cultural expectations often influence interpersonal interactions and coping strategies.

The qualitative evidence demonstrated that the concept of family honor, referred to in the literature as *izzat*, influenced many aspects of women's social experiences. Gunasinghe et al. (2019) found that concerns about protecting family honor affected participants' willingness to express emotional difficulties openly or seek professional support. Many women balanced their personal emotional needs with a strong sense of responsibility toward their families, resulting in careful management of emotions and selective disclosure of personal concerns. These findings suggest that family honor can shape help-seeking behavior and interpersonal communication, particularly when women perceive that discussing emotional problems may affect family reputation.

Family expectations were also closely connected with women's emotional experiences. Gask et al. (2011) reported that some British Pakistani women described feeling constrained by traditional family roles and expectations, which contributed to feelings of isolation and persistent psychological distress. However, the study also highlighted that supportive family relationships remained an important source of emotional security, demonstrating that cultural values may provide both challenges and strengths depending on individual family circumstances.

The broader evidence from Pakistani studies supports this balanced perspective. Research examining marital relationships, social support, and domestic violence consistently showed that women's emotional well-being is influenced by family dynamics, social norms, and community relationships (Ayub et al., 2009; Qadir et al., 2013). These findings suggest that cultural expectations should not be viewed independently from family relationships or social support, as they often interact to influence women's psychological adjustment and social functioning.

Religion was not identified as a direct cause of emotional difficulties in the included studies. Instead, religious beliefs and values frequently formed part of the wider cultural environment in which women understood family responsibilities, social relationships, and personal coping. Consequently, the findings indicate that emotional and psychological difficulties among young Muslim women are better understood through the interaction of family relationships, cultural expectations, and available social support rather than through religion alone. This perspective recognizes the complexity of women lived experiences while avoiding simplistic interpretations of cultural or religious influences.

4.2.5 Gender-Specific Challenges and Contextual Stressors

The thematic synthesis indicates that women's emotional well-being is influenced not only by interpersonal relationships but also by broader social, economic, and environmental circumstances. Across the included studies, women experienced a range of gender-specific challenges that affected both their psychological well-being and their ability to maintain healthy social relationships. These challenges included domestic violence, limited autonomy, childhood adversity, environmental stressors, and social expectations associated with women's family and community roles.

Several studies demonstrated that exposure to adverse life circumstances increased the likelihood of emotional and psychological difficulties. Ayub et al. (2009) found that married women who experienced domestic violence and stressful life events reported significantly higher levels of psychiatric morbidity than those who did not experience such conditions. Similarly, Husain et al. (2021) reported that childhood trauma remained an important predictor of depression among women, although the availability of social support reduced this risk considerably. These findings suggest that adverse experiences across different stages of life may have lasting effects on women's emotional health while also influencing their social relationships and coping abilities.

The influence of wider environmental factors was also evident. Daraz et al. (2024) demonstrated that women living in rural Pakistan experienced increased psychological distress associated with climate-related challenges, including environmental uncertainty, reduced resources, and changing living conditions. However, the study also found that supportive communities and strong social networks enhanced women's resilience and helped reduce the psychological impact of these stressors. This reinforces the broader finding that social relationships remain an important protective factor even when women face external challenges beyond their immediate control.

Across the included studies, gender-specific challenges were closely linked with women's social roles and responsibilities. Family expectations, caregiving responsibilities, economic limitations, and restricted opportunities often interacted with emotional distress, affecting women's confidence, communication, and participation in social life. Although these challenges differed across settings, the evidence consistently showed that supportive family relationships, positive social networks, and accessible emotional support helped women adapt more effectively to difficult circumstances.

Overall, the findings suggest that emotional and psychological difficulties among young Muslim women should be understood within the wider social context in which they occur. Individual experiences are influenced by family relationships, community support, cultural expectations, and broader environmental conditions. Recognizing these interacting influences provides a more comprehensive understanding of how gender-specific challenges affect both mental well-being and the quality of women's social relationships.

4.2.6 Summary of Findings

The thematic synthesis of the ten included studies demonstrates that emotional and psychological difficulties among young Muslim women are closely interconnected with the quality of their social relationships. Across the evidence, social support consistently emerged as the strongest protective factor, while family conflict, marital difficulties, domestic violence, social isolation, and limited emotional support were associated with poorer psychological well-being. Rather than functioning independently, these factors interacted to influence women's emotional experiences, interpersonal relationships, and overall social functioning.

The review further indicates that family relationships occupy a central position within women's social lives. Supportive families and positive marital relationships promoted emotional resilience, encouraged help-seeking, and strengthened interpersonal communication. In contrast, strained family relationships, unresolved conflict, and exposure to violence increased vulnerability to depression, anxiety, and psychological distress. These findings suggest that family relationships may either protect against or contribute to emotional difficulties depending on the quality of interpersonal interactions.

The findings also highlight the importance of cultural and social contexts in understanding women's experiences. Family honour, cultural expectations, and gender-specific social roles influenced how women expressed emotional concerns, sought support, and maintained relationships with others. Rather than identifying culture or religion as direct causes of psychological distress, the evidence suggests that these factors shape the social environment within which emotional well-being is experienced and managed.

Overall, the systematic review demonstrates a reciprocal relationship between emotional well-being and social relationships. Emotional and psychological difficulties may reduce women's participation in social life, communication, and willingness to seek help, while supportive relationships, family cohesion, and positive social networks promote resilience and healthier

psychological outcomes. These findings provide a comprehensive understanding of the relationship between emotional well-being and social functioning among young Muslim women and establish the foundation for the discussion presented in the following section.

4.3 Discussion

The purpose of this discussion is to interpret the findings of the systematic literature review in relation to the research objectives, existing literature, and the theoretical framework presented in Chapter Two. Rather than restating the findings, this section explains how the identified themes contribute to understanding the relationship between emotional and psychological difficulties and the social relationships of young Muslim women in Pakistan. The discussion integrates Cognitive Behavioral Theory, Attachment Theory, Social Learning Theory, Ecological Systems Theory, Relational Cultural Theory, and relevant Islamic psychological perspectives to provide a culturally informed interpretation of the findings.

4.3.1 Social Support and Mental Well-Being

The systematic review identified social support as the most consistent protective factor influencing women's emotional well-being and social relationships. Across the included studies, women who experienced supportive family environments, positive marital relationships, and strong community networks reported lower levels of psychological distress and greater emotional resilience. These findings are consistent with Relational Cultural Theory, which proposes that psychological well-being develops through supportive and mutually respectful relationships rather than through individual functioning alone (Jordan, 2010). The findings also reinforce previous research suggesting that meaningful social connections promote emotional regulation, strengthen coping strategies, and reduce the negative effects of stressful life experiences. The findings of Rahman et al. (2019) further support this pattern, as perceived social support was examined alongside improvements in anxiety and depression among women in rural Pakistan.

From the perspective of Cognitive Behavioral Theory, supportive relationships may also influence the way individuals interpret stressful situations and evaluate their own abilities to cope with adversity (Beck, 1976). Women who receive emotional encouragement and practical assistance are more likely to develop adaptive coping strategies and maintain healthier interpersonal relationships. Conversely, inadequate social support may reinforce negative thinking patterns, emotional withdrawal, and psychological distress. These findings suggest that

strengthening supportive relationships may play an important role in promoting emotional well-being among young Muslim women within the Pakistani context.

4.3.2 Family and Marital Relationships

Family and marital relationships emerged as another central finding of the present review. Across the included studies, supportive marital relationships were associated with better emotional well-being, whereas marital conflict, domestic violence, and poor family functioning contributed to depression, anxiety, and psychological distress. These findings reinforce the view that family relationships are fundamental determinants of psychological health among young Muslim women and influence their ability to maintain positive social relationships.

Attachment Theory provides a useful explanation for these findings by suggesting that emotionally secure and supportive relationships promote resilience, trust, and healthy interpersonal functioning (Bowlby, 1988). Women who experience understanding, respect, and emotional security within their families are more likely to develop adaptive coping strategies and maintain healthier relationships. In contrast, exposure to conflict, rejection, or violence may increase emotional distress and weaken interpersonal trust. The findings of this review therefore support the proposition that relationship quality directly influences emotional well-being.

The findings also highlight the reciprocal nature of this relationship. Emotional and psychological difficulties may place strain on family communication and marital relationships, while family conflict further increases psychological distress. Rather than representing separate processes, family relationships and emotional well-being appear to influence one another continuously. Similar patterns have been reported in previous Pakistani studies, which emphasise the importance of family cohesion and supportive marital relationships for women's mental health (Qadir et al., 2013; Abbas et al., 2019).

Within Pakistani society, where family remains the primary source of emotional, financial, and social support, maintaining positive family relationships appears particularly important. The present review therefore suggests that interventions designed to improve women's mental well-being should not focus solely on the individual but should also consider family communication, marital relationships, and supportive home environments.

4.3.3 Social Isolation and Help-Seeking

Social isolation emerged as both an outcome of emotional distress and a factor that may contribute to its persistence. Women experiencing depression or psychological distress frequently reported withdrawing from social interactions or limiting emotional disclosure because of fear of judgement, misunderstanding, or negative social consequences. Reduced social participation further limited access to emotional support and reinforced feelings of loneliness and helplessness.

These findings can be interpreted using both Cognitive Behavioral Theory and Relational Cultural Theory. Cognitive Behavioral Theory suggests that emotional distress may encourage negative thinking patterns, hopelessness, and avoidance behaviours that reduce social interaction (Beck, 1976). Relational Cultural Theory further proposes that disconnection from supportive relationships contributes to emotional suffering, whereas meaningful interpersonal connections promote psychological growth and resilience (Jordan, 2010). Together, these perspectives explain why emotional distress and social isolation often reinforce one another.

The review also found that willingness to seek help was strongly influenced by women's social environments. Participants who perceived supportive family relationships were generally more willing to discuss emotional concerns and seek assistance, whereas fear of stigma or social judgement discouraged emotional disclosure. These findings suggest that improving mental health literacy, reducing stigma, and strengthening community support may encourage earlier help-seeking among young Muslim women.

4.3.4 Family Honour, Cultural Expectations, and Religious Influences

The present review demonstrates that emotional well-being among young Muslim women cannot be understood without considering the wider cultural and social environment in which relationships are formed and maintained. The included studies indicate that family honour, cultural expectations, and religious values influence women's interpersonal relationships, emotional expression, and decisions about seeking support. Rather than acting as direct causes of emotional distress, these factors shape the social context within which women interpret and respond to psychological challenges.

One of the most significant findings relates to the influence of family honour on emotional disclosure and help-seeking. The qualitative evidence showed that many women carefully balanced their personal emotional needs with a sense of responsibility toward their families, often considering how openly discussing emotional difficulties might affect family reputation. This

finding reflects the importance of collective family values within Pakistani society, where personal experiences are frequently understood within the broader context of family relationships rather than individual circumstances. Consequently, emotional concerns may sometimes remain unspoken, not because women reject support, but because they seek to preserve family harmony and fulfil perceived social responsibilities.

These findings can be interpreted through **Ecological Systems Theory**, which proposes that individual well-being is influenced by interactions between personal, family, community, and societal environments (Bronfenbrenner, 1979). The review suggests that women's emotional experiences are shaped not only by individual psychological factors but also by family expectations, community norms, and broader cultural influences. This ecological perspective helps explain why similar emotional difficulties may be experienced differently depending on the surrounding social environment.

The findings also align with the **Islamic psychological perspective** presented in Chapter Two. The review did not identify religious beliefs as a source of emotional distress. Instead, religion appeared as part of the broader value system through which many women understood family responsibilities, resilience, compassion, and interpersonal obligations. This distinction is important because it recognises that cultural practices and religious teachings are not always identical. While family honour and social expectations influenced women's behaviour in several studies, the evidence does not suggest that Islamic principles themselves discouraged emotional well-being or help-seeking. Rather, emotional experiences appeared to be shaped by the interaction between cultural traditions, family relationships, and individual circumstances.

Overall, the present review indicates that family honour, cultural expectations, and religious values should be understood as contextual influences rather than independent risk factors. Their effects on emotional well-being depend largely on the quality of family relationships, the availability of social support, and the opportunities women have to communicate openly about their emotional experiences. This interpretation provides a balanced understanding of the findings while acknowledging the complexity of women's lived experiences within Pakistani Muslim society.

4.3.5 Gender-Specific Challenges and Contextual Stressors

The present review further demonstrates that emotional well-being among young Muslim women is influenced by a combination of personal experiences and broader contextual factors.

While individual emotional difficulties were evident across the included studies, these experiences were consistently shaped by women's family responsibilities, social roles, community environments, and exposure to adverse life events. This finding suggests that emotional well-being cannot be understood solely at the individual level but must also be considered within the wider social context in which women live.

The findings are consistent with **Ecological Systems Theory**, which proposes that human development and psychological well-being are influenced by multiple interacting environmental systems (Bronfenbrenner, 1979). Across the included studies, women's emotional experiences were associated with factors operating at several levels, including family relationships, marital circumstances, community support, cultural expectations, and broader environmental conditions. For example, experiences of domestic violence, childhood adversity, and climate-related stressors were shown to affect emotional well-being while simultaneously influencing women's relationships with family members and their wider communities. This ecological interpretation emphasises that psychological difficulties rarely arise from a single cause but develop through the interaction of multiple social and environmental influences.

The findings also reflect aspects of **Social Learning Theory**, which suggests that behaviours, attitudes, and coping strategies are shaped through observation and interaction within the social environment (Bandura, 1977). Family relationships and community expectations may influence how women learn to express emotions, manage interpersonal conflict, and seek support during periods of emotional distress. Where supportive communication and healthy coping behaviours are encouraged, women appear better equipped to manage psychological challenges. Conversely, environments characterised by conflict, limited communication, or restrictive social expectations may reduce opportunities for adaptive coping and emotional expression.

An important finding of the present review is that women also demonstrated resilience despite experiencing multiple challenges. Several studies highlighted the positive influence of supportive family relationships, community networks, and meaningful interpersonal connections in helping women adapt to difficult circumstances. This suggests that protective social relationships may reduce the impact of contextual stressors and strengthen women's emotional well-being, even in the presence of significant adversity. Rather than viewing women solely as vulnerable, the findings recognise their capacity to cope when appropriate support systems are available.

Overall, the review supports a holistic understanding of emotional well-being among young Muslim women. Emotional and psychological difficulties are influenced by the interaction of individual experiences, family relationships, social support, cultural expectations, and broader environmental conditions. Addressing these interconnected influences requires approaches that recognise both personal and social dimensions of mental health. This integrated perspective provides an appropriate foundation for considering the practical implications of the findings presented in the following section.

4.3.6 Practical Implications of the Findings

The findings of this systematic review have several practical implications for promoting the emotional well-being and social relationships of young Muslim women in Pakistan. First, the review highlights the importance of strengthening supportive family and social relationships as part of mental health promotion. Since social support consistently emerged as a protective factor across the included studies, interventions that encourage positive family communication, emotional understanding, and supportive interpersonal relationships may contribute to improved psychological well-being and healthier social functioning.

Second, the findings suggest that mental health services should adopt a family- and community-oriented approach rather than focusing exclusively on individual treatment. Given the central role of family relationships within Pakistani society, involving family members in mental health awareness, psychoeducation, and supportive interventions may improve treatment engagement and long-term emotional outcomes. Community-based programs that reduce stigma and encourage early help-seeking may also enhance access to psychological support, particularly for women experiencing emotional distress.

The review further highlights the importance of culturally sensitive mental health practice. Mental health professionals should recognize that family honour, cultural expectations, and religious values influence how women understand emotional difficulties and seek support. Interventions that respect these cultural contexts while promoting open communication and psychological well-being are likely to be more acceptable and effective than approaches that overlook the social realities of women's lives.

Finally, the findings emphasize the value of multidisciplinary collaboration in supporting women's mental health. Healthcare professionals, psychologists, educators, community organisations, and policymakers all have important roles in creating supportive environments that

strengthen resilience and reduce barriers to help-seeking. Addressing emotional well-being through coordinated family, community, and institutional efforts may contribute to healthier social relationships and improved quality of life for young Muslim women in Pakistan.

CHAPTER FIVE
SUMMARY, CONCLUSIONS AND RECOMMENDATIONS

5.1 Introduction

This chapter presents the overall summary, conclusions, and recommendations arising from the systematic literature review on the effect of Emotional and Behavioral Disorders (EBD) on the social relationships of young Muslim women in Pakistan. Building upon the findings and discussion presented in the previous chapter, this chapter synthesizes the principal insights generated from the review and considers their implications for mental health practice, policy, and future research.

The chapter concludes by identifying the limitations of the review and proposing recommendations to strengthen future research and the development of culturally appropriate approaches to promoting the emotional well-being and social relationships of young Muslim women in Pakistan. The conclusions presented are based on the synthesis of the reviewed literature and are intended to contribute to a broader understanding of the relationship between emotional well-being, social relationships, and the cultural context in which these experiences occur.

5.2 Summary of the Study

This systematic literature review was undertaken to examine the relationship between Emotional and Behavioral Disorders (EBD) and the social relationships of young Muslim women in Pakistan. The review was guided by the objective of synthesising existing evidence to improve understanding of how emotional and psychological difficulties are associated with family relationships, social support, interpersonal interactions, and broader cultural influences within the Pakistani context.

A systematic review methodology based on the Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) framework was adopted to ensure a transparent and structured review process. Relevant studies were identified through PubMed and a supplementary systematic Google Scholar search using predefined search terms and eligibility criteria. Following the screening and quality appraisal process, ten studies were included in the final thematic synthesis. The included studies comprised both qualitative and quantitative research, providing complementary evidence on women's emotional well-being and social relationships.

The thematic synthesis of the reviewed studies identified five interrelated themes. The first theme highlighted the importance of social support as a commonly reported protective factor

associated with improved emotional well-being. The second theme indicated that family and marital relationships were closely associated with women's psychological adjustment, with supportive family environments generally linked to better emotional outcomes. The third theme suggested that emotional and psychological difficulties were frequently associated with social isolation, reduced interpersonal communication, and barriers to help-seeking. The fourth theme emphasised the importance of understanding women's experiences within the context of family honour, cultural expectations, and religious values. The final theme demonstrated that gender-specific challenges and broader contextual stressors should be considered alongside interpersonal relationships when interpreting women's emotional well-being.

The discussion interpreted these themes through established psychological theories, including Relational Cultural Theory, Attachment Theory, Cognitive Behavioral Theory, Social Learning Theory, Ecological Systems Theory, and relevant Islamic psychological perspectives. Rather than viewing emotional well-being as an individual experience alone, the reviewed evidence suggests that women's emotional health is closely connected with the quality of their relationships, the availability of social support, and the wider cultural and family environments in which they live.

Overall, this systematic literature review provides an integrated synthesis of the available evidence and contributes to a broader understanding of the complex relationship between emotional and psychological well-being and social relationships among young Muslim women in Pakistan. The review also highlights the importance of culturally informed perspectives when interpreting mental health experiences and developing supportive interventions within similar social contexts.

5.3 Conclusion

This systematic literature review sought to synthesize the available evidence on the relationship between Emotional and Behavioral Disorders (EBD) and the social relationships of young Muslim women in Pakistan. Based on the thematic synthesis of the included studies, several conclusions may be drawn regarding the ways in which emotional well-being and social relationships are interconnected within the Pakistani cultural context.

First, the reviewed evidence consistently suggests that supportive social relationships are closely associated with better emotional well-being. Family support, positive marital relationships, and meaningful social connections were commonly identified as important sources of emotional

resilience, while limited social support was frequently associated with greater psychological distress. Collectively, the reviewed studies indicate that supportive interpersonal relationships represent an important protective resource for women experiencing emotional and psychological difficulties.

Second, the synthesis indicates that family relationships occupy a central position in understanding women's emotional well-being. The reviewed literature suggests that the quality of family interactions, communication, and marital relationships is closely associated with women's psychological adjustment and their ability to maintain healthy social relationships. At the same time, emotional and psychological difficulties may also be associated with challenges in interpersonal communication and reduced social participation, suggesting a reciprocal pattern between emotional well-being and social relationships.

Third, the reviewed evidence highlights the importance of interpreting emotional well-being within its wider cultural and social context. Family honour, cultural expectations, and community values were consistently identified as contextual influences that shape emotional expression, help-seeking behaviour, and interpersonal relationships. The synthesis further suggests that these influences should be understood alongside family relationships and available social support rather than as independent explanations for emotional distress.

Finally, the review indicates that women's emotional well-being is shaped by multiple interacting influences operating at individual, family, community, and societal levels. The included studies consistently suggest that emotional and psychological experiences cannot be fully understood without considering the broader social environments in which women live. This finding supports the importance of adopting holistic and culturally informed perspectives when interpreting women's emotional well-being and social relationships.

Overall, this systematic literature review contributes to the existing body of knowledge by bringing together evidence from diverse studies within a single analytical framework. The synthesis provides a comprehensive understanding of how emotional well-being and social relationships are interconnected among young Muslim women in Pakistan and highlights the importance of considering both interpersonal and contextual influences when addressing mental health within similar cultural settings.

5.4 Practical Implications

The thematic synthesis of the reviewed studies suggests several practical implications for promoting the emotional well-being and social relationships of young Muslim women in Pakistan. Although the included studies varied in their research designs and contexts, the reviewed evidence consistently highlights the importance of supportive family relationships, positive social networks, culturally responsive mental health practices, and collaborative community support. The following implications are presented to demonstrate how the synthesized evidence may inform mental health practice, educational and community initiatives, and the development of culturally appropriate services within the Pakistani context.

5.4.1 Implications for Mental Health Practice

The reviewed evidence suggests that mental health professionals may benefit from adopting culturally responsive and relationship-oriented approaches when supporting young Muslim women experiencing emotional and psychological difficulties. The thematic synthesis consistently indicates that family relationships, social support, and interpersonal communication are closely associated with women's emotional well-being. Consequently, psychological interventions that acknowledge the influence of family dynamics, social networks, and cultural values may be more appropriate within the Pakistani context than approaches focusing exclusively on individual symptoms. The reviewed studies also suggest that promoting supportive communication, emotional understanding, and culturally sensitive counselling practices may contribute to strengthening women's emotional well-being and social relationships.

5.4.2 Implications for Education and Community Support

The reviewed literature also highlights the importance of increasing awareness of emotional well-being within educational institutions and local communities. Collectively, the included studies suggest that greater understanding of emotional and psychological difficulties may encourage supportive environments and reduce stigma associated with mental health concerns. Educational programmes, community awareness initiatives, and psychoeducational activities may contribute to improving mental health literacy while encouraging appropriate help-seeking among young Muslim women. The synthesis further indicates that collaboration between educational institutions, families, and community organisations may strengthen existing support systems and promote healthier interpersonal relationships.

5.4.3 Implications for Policy and Service Development

The thematic synthesis suggests that organisations involved in planning and delivering mental health services may benefit from recognising the broader social and cultural contexts in which emotional well-being is experienced. The reviewed evidence indicates that mental health services designed with consideration for family relationships, cultural expectations, and community support may better address the needs of young Muslim women within Pakistan. Furthermore, collaboration among healthcare providers, educational institutions, community organisations, and policymakers may support the development of accessible, culturally appropriate, and relationship-focused mental health services. Such approaches may contribute to strengthening existing support structures while promoting emotional well-being within the wider community.

5.5 Limitations of the Review

The present systematic literature review should be interpreted in light of several methodological limitations. Acknowledging these limitations provides an appropriate context for interpreting the reviewed evidence and identifying opportunities for future research.

First, the review was based on searches conducted through PubMed and Google Scholar. Although these sources provided broad coverage of health, behavioural, and multidisciplinary literature, relevant studies indexed exclusively in other specialised databases may not have been captured. Consequently, the synthesis reflects the evidence available within the selected search sources and strategy.

Second, only studies published in the English language were included in the review. Relevant publications available in other languages may therefore not be represented within the final synthesis. This language restriction may have limited the inclusion of additional evidence relevant to the experiences of young Muslim women in Pakistan.

Third, the review included ten studies that satisfied the predefined eligibility criteria. While these studies provided sufficient evidence to conduct a thematic synthesis, the relatively small number of included studies may limit the breadth of perspectives represented in the review. Nevertheless, the included studies comprised both qualitative and quantitative research, allowing the synthesis to incorporate diverse methodological approaches.

Finally, the review employed a narrative thematic synthesis rather than a statistical meta-analysis because of differences in study designs, research objectives, and outcome measures across

the included studies. Consequently, the conclusions presented are based on the synthesis and interpretation of the available evidence rather than on pooled statistical estimates.

Despite these limitations, the systematic review followed a transparent methodology based on the **PRISMA 2020 framework**, applied predefined eligibility criteria, and used a structured thematic synthesis to integrate the reviewed evidence. These methodological procedures support the credibility and transparency of the review while recognising the boundaries within which the findings should be interpreted.

5.6 Recommendations

The reviewed evidence highlights several areas that may be considered in future research, professional practice, and the development of mental health services. The following recommendations are derived from the thematic synthesis of the included studies and are intended to support continued research and the development of culturally responsive approaches to promoting the emotional well-being and social relationships of young Muslim women in Pakistan.

5.6.1 Recommendations for Future Research

Future systematic reviews may benefit from including additional specialised databases in psychology, social sciences, and regional research to capture studies that may not be indexed in PubMed or Google Scholar. This may provide a more comprehensive understanding of the relationship between emotional well-being and social relationships among young Muslim women.

The reviewed evidence also indicates a need for further qualitative research exploring women's lived experiences across different regions of Pakistan and among diverse socioeconomic groups. Future studies may also consider longitudinal approaches to improve understanding of how emotional well-being and social relationships develop over time.

5.6.2 Recommendations for Professional Practice

The reviewed literature suggests that mental health professionals may benefit from adopting culturally responsive approaches that recognise the importance of family relationships, social support, and community influences when supporting young Muslim women experiencing emotional and psychological difficulties. Greater emphasis on family engagement, psychoeducation, and supportive communication may strengthen existing mental health practices while remaining sensitive to cultural values and individual needs.

5.6.3 Recommendations for Policy and Community Development

The thematic synthesis indicates that continued efforts to improve mental health awareness and reduce stigma within educational institutions and local communities may support earlier recognition of emotional and psychological difficulties. The reviewed evidence further suggests that collaboration among healthcare providers, educators, community organisations, and policymakers may contribute to the development of accessible and culturally appropriate mental health services. Future initiatives may also benefit from recognising the important role of supportive family relationships and community networks in promoting emotional well-being among young Muslim women.

5.7 Final Conclusion

This systematic literature review was undertaken to synthesise the available evidence on the relationship between Emotional and Behavioral Disorders (EBD) and the social relationships of young Muslim women in Pakistan. Through a structured review of the literature and thematic synthesis of the included studies, the review provides a comprehensive understanding of the complex interaction between emotional well-being, interpersonal relationships, and the wider cultural context in which these experiences occur.

The reviewed evidence consistently suggests that emotional well-being is closely associated with the quality of women's social relationships. Supportive family environments, positive marital relationships, and meaningful social support were commonly identified as factors associated with emotional resilience, while family conflict, social isolation, domestic violence, and limited emotional support were frequently associated with psychological distress. The synthesis further indicates that these experiences should be understood within the broader context of family relationships, cultural expectations, community influences, and available support systems rather than through individual psychological factors alone.

The review also highlights the importance of adopting culturally informed perspectives when interpreting emotional well-being among young Muslim women in Pakistan. The included studies suggest that family honour, cultural expectations, and religious values form part of the wider social environment that shapes emotional experiences, interpersonal relationships, and help-seeking behaviour. Understanding these contextual influences may contribute to more appropriate interpretations of women's lived experiences and support the development of culturally responsive mental health practices.

Overall, this systematic literature review contributes to the existing body of knowledge by integrating evidence from diverse studies into a coherent thematic synthesis. While recognising the methodological limitations of the review, the synthesis provides a balanced and evidence-informed understanding of the relationship between emotional well-being and social relationships among young Muslim women in Pakistan. It is hoped that the insights generated from this review will support future research, strengthen culturally responsive mental health practice, and contribute to continued efforts to promote the psychological well-being and social inclusion of young Muslim women within Pakistan and comparable cultural settings.

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APPENDICES



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Student Name: _____Sakina Haidar_____

Student ID: _____**ST10222152**_____

Course Name: _____MSc in Psychology and Islamic Counselling_____

Assignment Title: _____Effect of Emotional and Behavioral Disorder on Social Relationships of Young Muslim Women in Pakistan: A systematic Literature Review_____

Date: _____16/2/2026_____

Signature: _____

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