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KEYWORDS	ABSTRACT
Marital Stability, Joint Family, Dyadic Analysis, Marital Well-Being, Sargodha Division	Marriage is the complex adaptive system shaped by individual, relational, and familial factors, and environmental influences, which in turn affect the long-term stability and well-being of the marriage. This study aimed to explore the determinants of married couples' lives by taking into account the mutual dependence between spouses' experiences & health outcomes. A cross-sectional research design with a quantitative approach was used, in which data were collected from 120 married couples (240 individuals) in the Sargodha Division. The results showed that joint family structure had a positive impact ($\beta = 0.500$, $p < 0.001$), indicating that family support, family communication, trust, mutual goals were important variables in promoting marital satisfaction and stability. The individual factors ($\beta = 0.158$, $p = 0.001$) and social support networks ($\beta = 0.153$, $p = 0.013$) were identified significant factors that improve marital well-being. A direct effect was found amid religious factors and married couples' lives; however, it was not statistically significant ($\beta = 0.094$, $p = 0.095$). The results shed light on mutual effects that emotional and psychological health have on one another within the marital relationship, links between social and economic determinants and marital outcomes.
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INTRODUCTION

There is key role for married people, particularly in later life stages, in facilitating wellbeing, which encompasses the health, emotional, social, financial, and practical wellbeing. The dynamics of these relationships, including role equality, communication and transitions (such as living apart together), are all likely to impact marital satisfaction and wellbeing. Moreover, there is substantial agreement between partners on issues such as depression and physical health, where the quality of marriage

can affect and is affected by health outcomes. Besides, there are gender differences in the impact of marriage upon health, and other types of couples and populations are less studied, suggesting that there is the lack of understanding of marital dynamics beyond the traditional marriage framework (Walker & Luszcz, 2009). Parenthood, financial difficulties and relationship problems play unique roles in mental health issues (Pilcher, Bird, Carey, Liddle & Pickard, 2025). The negative effects of spousal relationships on depression are stronger than positive effects, wives generally are affected by the quality of marriage than husbands (Horwitz, McLaughlin & White, 1998; Umberson, Thomeer & Williams, 2012).

The financial and marital stress during mid-life can have long-term physical health repercussions (Beck, Laifer, Ramsdell & Brock, 2025). The downward spiral of economic hardship, lack of marital stability, and psychological distress to physical health deterioration in the long term is a vicious cycle. Anxiety symptoms of both the individual and the partner are linked to the health trajectories of the couple, and both economic and relational and health factors are intertwined and remain a significant issue even after relationship ends (Lee, Wickrama, Lee & Neal, 2020). Married couples have to deal with lots of things that can affect their relationship and their stability. Role equality, good communication, and significant life changes, such as separation or divorce, have significant impacts on marital satisfaction, emotional security, decision-making & overall marital well-being. Money issues can trigger the great deal of psychological stress in relationships, which could lead to significant health and wellness issues, relationship instability and psychological distress (Liu, Hu, Ma, Zhang, Peng, Zhang & Luo, 2025). Moreover, relationship strain is associated with increased feelings of depression and loneliness, although social connectedness may help buffer some of these negative belongings.

In addition, some studies have shown that cohabiting before marriage has an effect upon the poor relationship quality and on risk of eventual relationship failure, reinforcing idea that experiences before marriage can predict outcomes of relationships. Married life also plays a significant role in social, cultural, and health aspects. There is a multifaceted relationship amid marriage and mental health. The good and bad parts of relationship with a partner can have different impacts on mental health for men and women. The role of religion has been correlated with increasing marital stability when both partners are regularly involved in religious activities, and marital instability when there are differences in religious involvement. Both partners' perceptions of marital quality strongly affect emotional well-being, feelings of loneliness, particularly amid older adults (Ren, Luo, Cheng, Wu, Wang & Han, 2025). Some health risks and social-behavioral determinants like living in a high-risk disease environment, having multiple previous marriages, and engaging in extra-marital relationships can pose risks and challenges to marriages. Together, the results indicated that marital life is influenced by the complex interplay of the economic, relational, social, cultural, and physical well-being factors.

Objectives of Study

1. To examine the influence of the joint family dynamics upon marital satisfaction and stability.
2. To assess the impact of the economic and household stressors on marital well-beings in study.

3. To explore the role of communication, emotional support & family conflicts in marital quality.
4. To identify socio-cultural & individual factors affecting marital stability in the joint families.

Significance of Research

This study is highly relevant, as it sheds light upon multifaceted aspects that influence marital lives and their repercussions on overall well-being. The findings will be used to inform interventions to improve couples' well-being, especially in later life, by exploring how marital relationships relate to emotional, mental, and physical health. Identifying economic and relational stress in relation to long-term health outcomes can inform policy and health promotion strategies related to social determinants of health. The study highlights the need to take both partners' views of their marital quality and feelings of loneliness into account when designing therapeutic interventions, which could lead to better results for older partners who are socially isolated and/or emotionally lacking. Additionally, cultural awareness of protective factors such as religious involvement together and negative factors such as cohabiting with the partner prior to marriage or engaging in extramarital relationships underlies culturally responsive interventions designed to improve marital stability. The study helps identify under-researched populations and marital forms to guide future research & identify public health implications, including reducing health risks in marriages in high-disease-prevalence settings.

LITERATURE REVIEW

Conceptualizing Married Couple Life

It is the complex network that is shaped by the psychological and behavioral characteristics of its individual components, as well as by the experiences of the partners, their social networks, and their cultural environment. In this linking, the relational spirituality framework underscores that, in the interfaith relationships, couples intentionally negotiate multiple influences that can impact their marital and parental relationships, such as family, friends, media, and spiritual beliefs (Stanford, Hendricks, Futris, Marks & Dollahite, 2025). Furthermore, the psychological health and wellbeing in marriage is not an individual phenomenon, but rather a marriage phenomenon, where the mental health and wellbeing of the individual are closely connected over time, raising the marriage system as a dynamic phenomenon with the mutual influence over time (Raudenbush, Brennan & Barnett, 1995; Gerstorf, Hoppmann, Kadlec & Mcardle, 2009). In this way, married life can be approached as the complex, adaptive system dependent upon the individual, relational, family, along with the environmental elements.

Impact of Individual Factors on Married Life

At the individual level, attributes such as psychological health, gender, race/ethnicity, education, and self-esteem are important factors that critically affect marital quality & functioning. Depressive symptoms also exhibit moderate concordance between married people in the middle age and older, indicating that there is some degree of shared emotional experience that impacts upon the marital relations (Townsend, Miller & Guo, 2001). The mental health of the spouse can also predict and be influenced by that of the other spouse, as individual psychological trajectories, such as depressive symptoms and cognitive changes, can be predicted and influence those of the spouse (Gerstorf et al.,

2009). In addition, the individual self-concept and self-esteem are related to perceptions of social support and marital satisfaction, and the effects differ by gender in the couples (Kurdek & Schmitt, 1987). The certain personal factors like social media addiction have been linked to the reduction of self-esteem and life satisfaction among married people, having downstream effects on marital well-being (Chadha, Sharma, Kaur, Arya & Sharma, 2025). Gender also interacts with the type of social network and marital quality, indicating that social network types and individual identities interact (Fiori et al., 2016).

Impact of Joint Family Dynamics on Married Life

How a family communicates, how the roles are divided, how the family has common aims, and how disagreements are managed are vital to marital satisfaction and stability (Molina, 2025). Successful couples, for example, point out that trust, communication, flexibility and task segregation are all crucial aspects to the way they manage their businesses as well as marriage equally in which family functioning is accounted for in their economic pursuits (Franco & Piceti, 2018). Also, relationship between intimacy and conflict in marriages has a significant impact on marital happiness: Intimacy, which includes empathy, agreement, and support, positively influences marital happiness, while conflict negatively influences it, indicating that family relational processes affecting well-being are important (Sandhya, 2008). These dynamics are set in cultural contexts but are also influenced by ever-evolving personal preferences as well as the social norms, particularly among non-Western populations adjusting towards the globalization trends of the diurnal (Nejad, Mahmoudi, Hiebler & Unterrainer, 2026).

Influence of Social Environments on Married Life

Married life is greatly influenced by the social sphere, including relations with extended family, friendship and the wider social network. It is vital to note that the impact of spouses shared social network typologies on marital quality and psychological well-being varies in different ways: For instance, a typology of a spouse's social network is related to a lower quality of marriage, while the other is related to a higher level of psychological well-being (Fiori et al., 2016). The other source of emotional support, family and friends' emotional support differs by couple type, gender and sexual orientation & impacts mental health outcomes in marriage, including experience of psychological distress (Kurdek & Schmitt, 1987). Moreover, relationship strain could be buffered or exacerbated by social connectedness, depending on circumstances, as it could help assuage depressive symptoms and loneliness, but sometimes increase relationship strain (Ermer & Proulx, 2021). The growing importance of social media in people's lives changes the nature of social influences: married couples' excessive use of social media is associated with an impact on their self-esteem and life satisfaction (Chadha et al., 2025).

Role of Religious Factors in Married Life

Religious commitments and practices have significant impact on marital commitment, satisfaction, and stability. Joint religious participation has been linked to stability of marriage and likelihood of divorce; in fact, it is the wives' religious beliefs regarding commitment that are likely to have the particularly strong impact (Call & Heaton, 1997). For interfaith couples, self, family, and social contacts are all important factors in marriage and parenting, with religion being another (Stanford,

[Hendricks, Futris, Marks & Dollahite, 2025](#)). Empirically, it has been shown that during times of stress, such as the COVID-19 crisis, religiosity has protective effect on relational quality, suggesting the protective role for the religious factors in maintaining marital commitment over the long haul ([Aman et al., 2021](#)).

RESEARCH METHODOLOGY

The study intends to explore the various facets of relationship between individual, family, society and environment in terms of the stability and wellbeing of marriage for 120 couples from Sargodha Division. The study is quantitative research type, with complex marriage system and cross sectional and analytical research methods. The method can also be applied to the examination of interaction between factors (individual attributes, social and environmental factors) and their influence on the quality of the marriage life. The study utilizes both the individual and dyadic perspectives to reflect the common and unique experiences of each marriage. There are 120 couples (240 persons) who participated in Sargodha Division. The focus is on the dyadic perspective and both partners report on their experiences of marital quality as well as emotional well-being and health outcomes. This provides a whole person perspective on impact of relationships, family system and social influences upon the marriage.

The constructs measured by the data collection devices are individual factors (psychological health, self-esteem & social media use), joint family dynamics (communication, trust, role division, and shared goals), Social Environment (extended family and friend support), and Religious Factors (joint and individual religious participation) and the dependent variable Married Couple Life (stability, satisfaction, and well-being). The data analysis in this research uses SEM to validate the conceptual model and test the model's hypotheses. Both HTMT, with all constructs less than 0.85 & FLC (square root of AVE for each construct is greater than correlations with other constructs) are used to test the discriminant validity. For determining the significance and strength of relationships, path analysis calculates path coefficients (β), T-statistics and P-values, and in the current analysis, Joint family dynamics $\rightarrow$ married couple life has emerged as important predictor ($\beta = 0.500, p < 0.001$). Ethical and contextual elements are included, taking into account health risk factors in the region, socio-behavioral aspects like extramarital relations, interconnectedness of spouses' mental and physical health pathways.

RESULTS OF STUDY

Table 1 Heterotrait-Monotrait Ratio (HTMT)

	[1]	[2]	[3]	[4]
Individual [1]				
Joint family [2]	0.671			
Married Couple Life [3]	0.650	0.758		
Religious [4]	0.555	0.552	0.558	
Social [5]	0.685	0.662	0.653	0.657

The discriminant validity among constructs studied is shown by results of the Heterotrait-Monotrait Ratio (HTMT). The constructs of Individual, Joint Family, Married Couple Life, Religious and Social

have good separation with all values below 0.85, and this is the generally recommended cutoff. For instance, individual as well as joint family have a moderate relationship (correlation 0.671) with no redundancy, whereas individual and married couple life has moderate relation (correlation 0.650) without redundancy. The same applies to the religious construct which had lower correlations with the other constructs (0.552-0.558) which means that it has a unique dimension. Overall, these HTMT values reinforce that each construct is different concept, that is validating for the model in terms of discriminant validity.

Table 2 Fornell-Larcker Criterion

	[1]	[2]	[3]	[4]	[5]
Individual [1]	1.000				
Joint family [2]	0.671	1.000			
Married Couple Life [3]	0.650	0.758	1.000		
Religious [4]	0.555	0.552	0.558	1.000	
Social [5]	0.685	0.662	0.653	0.657	1.000

In terms of the Fornell-Larcker criterion results, it can be verified that there is discriminant validity among the constructs. This criterion is that the square root of the Average Variance Extracted (AVE) for a construct should be greater than correlation between the constructs. In this instance, the values diagonally (all are 1.000) are square root of AVE for each construct and all off-diagonal correlations are below 1.0. For example, the correlation between Individual and Joint Family is 0.671 which is less than the diagonal value of 1.000 for Individual and Joint Family; this is similar for all other pairs. This means that every construct (individual, joint family, married couple life, religious, and social), represents a different dimension and is sufficiently distinct from it, which justifies the discriminant validity in model.

Table 3 Mean, STDEV, T-Values & P-Values

	OS	SM	SD	TS	PV
Individual -> married couple life	0.158	0.157	0.048	3.257	0.001
Joint family -> married couple life	0.500	0.501	0.059	8.463	0.000
religious -> married couple life	0.094	0.092	0.056	1.672	0.095
social -> married couple life	0.153	0.152	0.062	2.480	0.013

The path coefficient results show that the individual, joint family and social factors have significant positive impact on the married couple life while religious factor shows no statistical significance. Specifically, the increase of individual factors has a positive effect on married couple life ($\beta = 0.158$, $t = 3.257$, $p = 0.001$), which indicates that improvement of individual factors and behaviors results in better marital life. Joint Family has highest positive correlation with Married Couple Life ($\beta = 0.500$, $t = 8.463$, $p < 0.001$) indicates that family support and family structure are significant factors in married life. Likewise, social factors have a significant positive influence on married couple life ($\beta = 0.153$, $t = 2.480$, $p = 0.013$) shows that social relationship and support networks are able to influence well-being of the marital life. This is in contrast to religious factors which have a positive,

although not statistically significant, relationship to married couple life ($\beta = 0.094$, $t = 1.672$, $p = 0.095$), meaning that in sample the influence of religion on marital life is not meaningful. The results show that joint family is most significant predictor of married couple life followed by individual and social factors.

Figure 1 Path Coefficient & P-Value

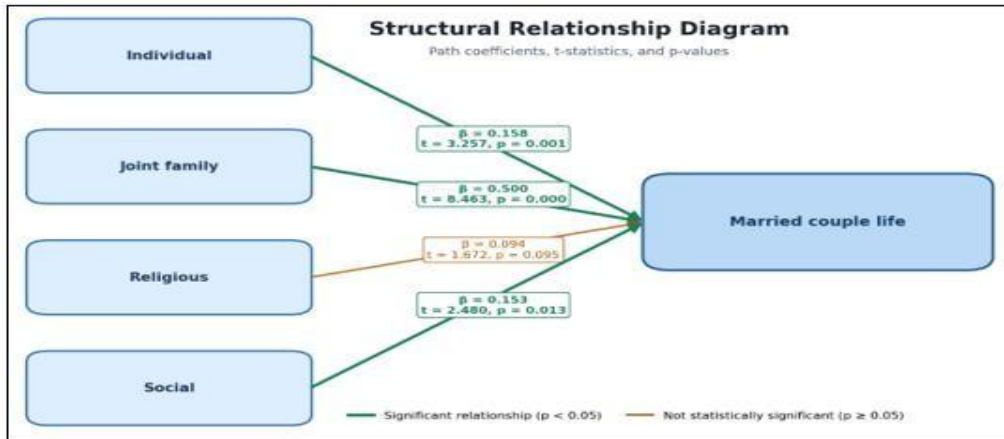
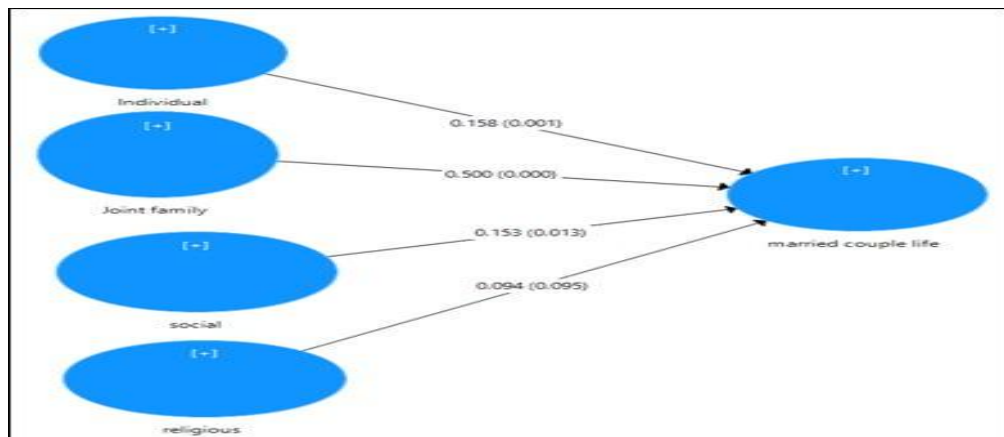


Figure 2 Path Coefficient & P-Value



DISCUSSION

The results of research highlight the importance of family relationships to the quality and stability of marriage. The joint family support was identified as the most significant factor among all factors studied and was found to contribute to the well-being of the married couples (Pilcher, Bird, Carey, Liddle & Pickard, 2025). Thus, the results are in line with previous research that emphasized the significance of the good communication, mutual trust, role differentiation, empathy, and common family values for marital satisfaction and stability (Beck, Laifer, Ramsdell & Brock, 2025). Support at home - emotional, social and practical, improves relationships and assists couples in the face of challenges. However, if there are some issues that have not been resolved and if the two individuals

in a marriage have a negative interaction, it can ruin the marriage and negatively influence the overall life satisfaction (Nejad, Mahmoudi, Hiebler & Unterrainer, 2026). The other aspect of the research highlights the importance of personal and economic risk and protective factors to marital status and outcomes.

The personal characteristics like psychological health, self-esteem and personal behaviour have a significant impact on the quality of the relationship. The link between partners that seems the most obvious is mental health; when one person's mental health issues impact the other (Franco & Piceti, 2018). Moreover, financial worry is an important factor in marital strain because financial pressures have been found to be associated with the psychological distress, marital dissatisfaction and future physical health problems (Lee, Wickrama, Lee & Neal, 2020). These results are consistent with previous research indicating that financial issues can be a hindrance to marital stability via their effect on marital stress and creation of marital issues. There are social and situational aspects which have meaning in determining married life (Ren, Luo, Cheng, Wu, Wang & Han, 2025). The family network, friends' network, community are protective factors of loneliness and emotional distress and relationship strain.

However, the kind of social networks and their organization will make the difference in a positive or negative impact (Ermer & Proulx, 2021). Previous work has identified religion as a factor which influences marital stability both on basis of shared values and through commitment to relationship, but the current study did not reveal a statistically significant influence of religious factors on the lives of married couples. There was some evidence that the environmental factors and cohabitation before marriage and extramarital relationships may also be possible negative correlates of marital stability and marital well-being (Chadha, Sharma, Kaur, Arya & Sharma, 2025). The findings suggest that while individual, social and contextual factors influence marital outcomes, the holistic nature of the family life appears to be the strongest predictor of the stable, fulfilling and healthy marriage, and highlight the importance of developing strong family support networks to strengthen marital well-being.

CONCLUSION

The study reveals that marital stability and well-being is influenced by the interplay of multiple factors namely familial, individual and social, and interplay of familial is the most important one. The findings show that the family support ($\beta = 0.500$), family communication ($\beta = 0.467$) and family objectives ($\beta = 0.447$) are favorable positive factors in marriage. The personal characteristics such as psychological well-being, self-esteem, personal actions, and encouragement of social connections, are important factors in marital positivity and resilience. In the current study, however, immediate family and social support were more likely to be significant in the context of the marital outcomes, as the direct effect of religious factors was not statistically significant. In addition, it's a study that takes place within framework of marriage as a complex adaptive system, where the mental health and well-being of the partners are intricately connected. Today, the financial, relational and other stressors, like financial worries or a lack of companionship, impact the quality of marriage and lead to future marital struggles for emotional and wellbeing. The findings suggest that inclusive social, economic analysis of marital existence is warranted and interventions to enhance marital stability

be directed at family system along with at shared social and financial issues to assist families to reap more beneficial results.

Implication & Recommendation

It shows from the results of current study that there are various factors which influence the marital stability as well as happiness along with their effects and it also suggests that joint family is most prominent determinant of married couples' life. The results suggest that family support, effective communication, trust and shared goals are factors that are significant and important to the marital satisfaction and long-term relationships stability. In this linking, the joint family support was also positively correlated with family relationships ($\beta = 0.500$), showing the significance of family support for a healthy family life and to help couples resolve their problems. The study also uncovers some individual and social factors that are "significant" for the marital outcomes. The psychological wellbeing, self-esteem and personal behaviors can affect the quality of the marital relationships and social support networks provide emotional resources to buffer couples from stress and problems with their marriage.

Happier, more stable in marriage, the more social, healthful and connected a person is. However, in this particular regard, the results indicate that the role of religious variables on married life is not significant, thus it can be concluded that the role of family and social support is more direct in the married life. Another important finding is that marriage is the complex adaptive system with an embedding of emotional and physical health of married people. Financial problems, conflict in the relationship with the person and other stressors can lead towards psychological distress, sense of loneliness and to long term health effects for both members of the couple. The results highlight the importance of the marital health context in the broader social and economic context. Developing married life should thus be directed towards strengthening the family support systems, enhancing the individual and relationship health and addressing economic and social issues of couples while they are married.

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