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Mental Health in British South Asians: The Effects of Cultural Honour, Social Identification, and Resilience

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Abstract

British South Asians can be thought of as belonging to honour cultures in which the group's social image and reputation are central to its identity. This cross-sectional survey study, based on data from 304 British South Asians, examines the effects of cultural honour, social identification, and aspects of resilience upon the mental health variables of depression, anxiety, and life satisfaction using hierarchical multiple regression. Perceived parental pressure to maintain cultural honour and to have an arranged marriage were associated with higher depression, and psychological resilience and identity resilience were associated with lower depression. Being female and perceived parental pressure to maintain cultural honour and to have an arranged marriage were associated with higher anxiety, and psychological resilience (but not identity resilience) were associated with lower anxiety. Being partnered, religiousness, and identity resilience (but not psychological resilience) were associated with higher life satisfaction, and perceived parental pressure to maintain cultural honour was associated with lower life satisfaction. The results suggest that perceived parental pressure to maintain cultural honour is harmful for mental health and that psychological resilience and identity resilience, conversely, have differential protective effects. Interventions to enhance mental health in British South Asians should focus on building psychological resilience and identity resilience, especially in the face of pressures associated with cultural honour.

Keywords: cultural honour; psychological resilience; identity resilience; depression; anxiety; life satisfaction; British South Asians

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Introduction

This article explores some of the determinants of mental health in British South Asians. Specifically, it examines the effects of cultural honour, social identification, and aspects of resilience upon depression, anxiety, and life satisfaction. The term “British South Asians” is used in this study to refer to citizens of the United Kingdom with ancestry from India, Pakistan, or Bangladesh. South Asians represent a significant ethnic minority group in the United Kingdom. In 2021, they constituted approximately 9.3% of the total population of England and Wales (Office for National Statistics, 2022).

There is evidence that identification with meaningful social groups, such as one’s ethnicity and religion, are associated with better mental health (Haslam et al., 2016; Haslam et al., 2018; Dulai & Jaspal, 2024). A key focus of this study is on the association between cultural honour and mental health, over and above the effects of social identification, in British South Asians. After all, British South Asians can be thought of as belonging to honour cultures, which are defined as “groups that position social image or reputation in one’s community as a core concern” and in which honour plays a key role in shaping both self-identity and social interactions (Uskul & Cross, 2020, p. 177). In honour cultures, the individual is socially valued insofar as they maintain honour, which is difficult to gain but easy to lose. In honour cultures, families – and especially parents – monitor individuals’ maintenance of cultural honour and may take steps to address any violations of cultural honour expectations. This can place significant pressure on members of honour cultures to conform and generate fear of retribution if they (are perceived to) fail to do so.

Extant research, conducted mainly in the disciplines of sociology, anthropology, and criminology, has examined different aspects of cultural honour, such as honour-based abuse, violence, and killings; forced marriage; and the role of services in supporting victims (Aplin, 2021; Bano, 2010; Dickson, 2014; Idriss, 2020; Idriss & Abbas, 2010; Julios, 2015). Studies in the United Kingdom have generally investigated the effects of honour upon women from South Asian communities (e.g., Idriss & Abbas, 2010; Kelly et al., 2013), with a strong focus on honour-based violence (Gill et al., 2014; Hall, 2024; Meeto & Mirza, 2010). However, there is limited systematic quantitative research into the association of cultural honour with different dimensions of mental health in British South Asian men and women, over and above the effects of known correlates of mental health, such as social identification. Moreover, there is no published research into the potential protective effects of psychological resilience and identity resilience against poor mental health in this population.

To address this lacuna, this cross-sectional correlational survey study examines the effects of stressors related to cultural honour, namely perceived parental pressure to maintain cultural honour and to have an arranged marriage, and identity threat due to cultural honour; the social identification variables of ethnic identification and religiousness; potential protective factors, that is, psychological resilience and identity resilience upon the mental health variables of depression, anxiety, and life satisfaction in a sample of British South Asians.

As the demographic factors of age, sex, and relationship status have been found to impact mental health outcomes (de Girolamo et al., 2012; Jaspal, 2024; Needham & Hill, 2010), their effects are also controlled for.

Mental health: Depression, anxiety, and life satisfaction

Mental health is widely recognized as a significant dimension of human health (Prince et al., 2007). Yet, depression, anxiety, and dissatisfaction with one's life can also have deleterious effects upon physical health, increasing the risk of both physical morbidity and mortality (Carrillo de Albornoz et al., 2021; Scott et al., 2007; Siahpush et al., 2008). Overall, population studies in the United Kingdom show that British South Asians tend to report similar or slightly better mental health outcomes compared to the general population (Office for National Statistics, 2024).

However, as a stigmatized minority group, British South Asians are exposed to minority stressors associated with their ethnicity, such as racism, and, in some cases, with their religion, such as Islamophobia, that put them at greater risk of poor mental health (Chakraborty et al., 2010; Jaspal & Lopes, 2021; Samari et al., 2018). Moreover, due to the stigma surrounding poor mental health especially in honour cultures, engagement with mental health services is lower and mental health problems are likely to be underreported among British South Asians (Cooper et al., 2013).

Depression is characterized by feelings of hopelessness, helplessness, and entrapment in a nefarious situation that makes the individual feel defeated and that they are in a state of arrested flight (Gilbert, 2006). Though anxiety and depression often co-occur, they are in fact distinct mental health disorders. According to Gilbert et al.'s (2005) evolutionary theory of psychopathology, anxiety is a type of fear and, as such, is distinct from depression. Anxiety is characterized by a 'fight or flee' response that is induced by sympathetic nervous system activation, such as excessive sweating, panic, heart palpitations, in anticipation of internal or external threats, such as rejection by others and uncertainty about one's relationship with others (Schmidt et al., 2008). In contrast to depression and anxiety, which are mental health disorders, life satisfaction is a positive psychological variable that refers to the cognitive-judgmental dimension of subjective wellbeing (Diener et al., 1985). Life satisfaction is defined as "a global assessment of a person's quality of life according to his [or her] chosen criteria" (Shin & Johnson, 1978, p. 478) and is strongly correlated with other mental health variables (Lombardo et al., 2018).

This study examines some of the determinants of these three mental health variables: that is, identification with one's ethnicity and religion; external and internal stressors associated with cultural honour; and psychological resilience and identity resilience. The study novelly draws upon the vulnerability-stress model (Zubin & Spring, 1977; see also Ingram & Luxton, 2005) that notes the significance of socio-environmental stressors, as well as psychological models of resilience, such as identity process theory (Breakwell, 2021), that provide insight into the potential protective factors.

Social identification: Ethnic identification and religiousness

Empirical research using various social psychological theories, including social identity theory (Haslam et al., 2016), the social cure perspective (Haslam et al., 2018), and identity process theory (Jaspal et al., 2022), consistently shows that identification with relevant and meaningful social groups is beneficial for mental health. Group identification can reduce feelings of loneliness, enhance self-esteem, provide a sense of positive distinctiveness from outgroups, and generate feelings of acceptance, inclusion, and belonging (Greenaway et al., 2015; Haslam et al., 2005; Haslam et al., 2018).

Empirical studies generally show that ethnicity and religion are relevant and meaningful groups for British South Asians and, as such, important identity elements (Cinnirella & Hamilton, 2007; Karlsen & Nazroo, 2015). Ethnic identification and religiousness may be particularly important for the derivation of acceptance, inclusion, and belonging in the face of discrimination and marginalization from British society, as per the rejection-identification model (Ramos et al., 2012). In a survey study of 226 British South Asian and Black British people, it was found that both religiousness and ethnic identification predicted higher life satisfaction (Jaspal et al., 2021) and that both forms of social identification were indirectly associated with lower depression and anxiety (Jaspal & Lopes, 2021). It is therefore hypothesized that ethnic identification and religiousness will be associated negatively with depression and anxiety and positively with life satisfaction. When accounting for the effects of social identification variables, the study examines the association between stressors associated with cultural honour and mental health.

Stressors associated with cultural honour

The vulnerability-stress model (Zubin & Spring, 1977; see also Ingram & Luxton, 2005) postulates that mental health can be attributed to a combination of biological factors, such as one's genetic predisposition; socio-environmental factors, such as stressors that one encounters in everyday life; and the availability of protective factors, such as social support. This study examines the contribution of two types of socio-environmental factors, namely external stressors that emanate from other people and internal stressors that are manifested at the psychological level, to explaining mental health outcomes in British South Asians.

External stressors

This study focuses on two external stressors associated with cultural honour that are commonly experienced by British South Asians, namely perceived parental pressure to maintain cultural honour and perceived parental pressure to have an arranged marriage. These can be conceptualized as external stressors because they emanate from other people, namely one's parents. Perceived parental pressure to have an arranged marriage may include, but is not the same as, forced marriage which has been the focus of much research into cultural honour (e.g., Bano 2010; Julios, 2015). It ranges from overt acts, such as being taken to another country to get married, to more subtle acts, such as being shunned when one refuses to agree to an arranged marriage. In this study, participants were asked simply whether or not they felt pressured by their parents to have an arranged marriage.

There is some research into the relationship between exposure to cultural honour pressures and mental health in South Asians, which generally focuses on particular subgroups, such as women, those residing in South Asia, and sexual minorities (e.g., Bock et al., 2025; Foster & Bock, 2025; Jaspal, 2020a; Munawar et al., 2025). For instance, qualitative focus group research with British South Asian women has shown that the perceived importance of maintaining family honour is associated with personal shame that can lead to feelings of entrapment in relationships and avoidance of mental health services (Gilbert et al., 2004; see also Sangar & Howe, 2021). Another qualitative study of British Pakistani Muslim women found that speaking out against cultural honour expectations was associated with loss of personal and cultural identity and social acceptance in the community, which could be deemed harmful for mental health (Gunasinghe et al., 2019). A cross-sectional survey study of 216 British South Asians found that honour-based violence, a rare corollary of cultural honour, was associated with increased anxiety and attempted suicide (Khan et al., 2018).

There is also very limited empirical research into the relationship between the perceived parental expectation to have an arranged marriage and mental health. In a small-scale qualitative interview study, Patel (2017) found that their British South Asian female participants experienced parental pressure to have an arranged marriage in order to uphold cultural honour, which in turn undermined their sense of self. Similarly, in his study of British South Asian gay men, Jaspal (2014) found that perceived pressure to have an arranged marriage was associated with threats to various aspects of identity and that individuals had little recourse to effective coping strategies, relying instead on denial, fantasizing, and self-isolation (see also Jaspal, 2020b for perspectives from South Asian parents). Pressure from significant others, especially in relation to significant life decisions, such as marriage, may plausibly lead to depressive symptomatology as one's family reputation may be perceived to be at stake (Foster & Bock, 2025; see also Bock et al., 2025).

In view of this research, it is hypothesized that exposure to the external stressors of perceived parental pressure to maintain cultural honour and to have an arranged marriage will be associated positively with depression and anxiety, and negatively with life satisfaction, independently of the effects of social identification.

Internal stressors

Not all external stressors affect people in the same way. Some external stressors, such as perceived pressure from significant others to maintain cultural honour, generate internal stressors when they bring about changes in identity. According to identity process theory (Breakwell, 1986; Jaspal & Breakwell, 2014), an event or situation results in identity threat when it undermines feelings of self-esteem, self-efficacy, continuity, and positive distinctiveness. Exposure to cultural honour pressures from significant others can be threatening for identity (Jaspal, 2020a; Jaspal & Ferozali, 2026). After all, they can make individuals feel less independent and autonomous, potentially challenging feelings of self-efficacy; feel curtailed in their individual identity expression due to cultural group pressures, with negative implications

for distinctiveness; question their sense of worth and value particularly when they (are made to) feel that they have contravened cultural honour expectations; and feel uncertain about the present and future, potentially challenging continuity.

Clearly, not everybody will experience identity threat when exposed to cultural honour pressures – some people successfully resist these pressures, while others do not. For instance, in Bradby's (2007) study of substance use in British South Asians, some individuals were aware of social stigma due to honour expectations but managed to protect their own identity by concealing their substance use from others. Identity threat is a fundamentally subjective psychological experience – it signifies that an external event or situation has an adverse psychological impact on the individual's identity and, as such, can be described as an internal stressor that exists independently of any external stressor that may have preceded it. For instance, an individual may cease to face the external stressor of pressure to maintain cultural honour but still experience identity threat at a psychological level due to the damage already done to self-esteem, self-efficacy, and so on.

The experience of identity threat has been found to be harmful for mental health. For instance, in their study of gay and bisexual men in Lebanon, Assi et al. (2025) found that sexuality-related identity threat was associated with higher depression and anxiety. Similarly, Lopes and Jaspal (2024) found that identity threat upon recall of a negative coming out experience was associated with higher psychological distress in a sample of lesbian, gay, and bisexual people in the United Kingdom. In a study of ethnic minorities in the United Kingdom, Dulai and Jaspal (2024) found that identity threat associated with racism predicted lower life satisfaction. On this basis, it is hypothesized that the internal stressor of identity threat due to cultural honour will be associated positively with depression and anxiety and negatively with life satisfaction, independently of both social identification and external stressors.

Protective factors: Psychological resilience and identity resilience

Consistent with the vulnerability-stress model that highlights the significance of protective factors in buffering the adverse effects of stressors upon mental health, this study examines the differential protective effects of two self-schema variables - psychological resilience and identity resilience - upon depression, anxiety, and life satisfaction.

Psychological resilience refers to the individual's ability to "maintain relatively stable, healthy levels of psychological and physical functioning as well as the capacity for generative experiences and positive emotions" in the face of adversity (Bonanno, 2004, pp. 20-21). It essentially amounts to the individual's capacity to "bounce back" when exposed to distressing events and experiences. Hardy et al. (2002) define resilience as a process of surviving or thriving under conditions of adversity through the deployment of both internal resources, such as self-efficacy, and external resources, such as the availability of social support, to cope effectively. Self-efficacy appears to be a central component of psychological resilience. Indeed, the measure used in this study – the Nicholson McBride Resilience Questionnaire – foregrounds self-efficacy, assessing the individual's own capacity to "put things right," "to influence," "to

keep things in perspective,” “find solutions to problems,” and so on. Psychological resilience is conceptualized as a relatively stable self-schema but one that can be developed through effective intervention and self-reflection (Leys et al., 2020).

In identity process theory (Breakwell, 2021), identity resilience is defined as an identity that is characterized by higher combined levels of self-esteem, self-efficacy, continuity, and positive distinctiveness. Unlike psychological resilience that tends to focus on the individual's self-efficacy, identity resilience incorporates the four principles found to underpin a positive sense of identity. For instance, higher self-efficacy may be an important buffer against some stressors, while a combination of higher self-esteem and positive distinctiveness may be more protective against others. The concept of identity resilience attempts to capture the broad range of underlying psychological mechanisms that guide an individual's response to adversity and coping. Like psychological resilience, identity resilience is a relatively stable self-schema that develops across the life course. It is shaped by many factors, including personality traits, social experiences, group memberships, and so on (Breakwell et al., 2022). Two key findings are consistent across many empirical studies of identity resilience conducted cross-culturally:

- Identity resilience is associated with the adoption of more effective, adaptive, and sustainable coping strategies in response to a variety of stressors. For instance, in a study of Lebanese university students, Jaspal et al. (2022) found that identity resilience was associated with higher likelihood of engaging with other people to cope when faced with a stressor. Similarly, Jaspal and Breakwell (2022) found that gay men with higher identity resilience were more likely to seek social support and to disclose their sexual orientation to others despite the short-term risks associated with both strategies.
- Identity resilience is associated with decreased identity threat upon exposure to a stressor (Breakwell & Jaspal, 2022; Lopes & Jaspal, 2024) and with a plethora of positive mental health outcomes (Jaspal, 2024; Jaspal et al., 2022; Jaspal et al., 2025).

Both psychological resilience and identity resilience should be associated negatively with depression and anxiety and positively with life satisfaction. However, because identity resilience captures a broader range of psychological features, namely self-esteem, self-efficacy, continuity, and positive distinctiveness, that collectively enhance the “capacity of the identity to resist its own invalidation, devaluation or fragmentation” (Breakwell, 2021, p. 581), it should explain additional variance in depression, anxiety, and life satisfaction, over and above the effects of psychological resilience.

Hypotheses

- 1) The social identification variables of ethnic identification and religiousness will be associated negatively with depression and anxiety, and positively with life satisfaction, while controlling for the demographic variables.
- 2) The external stressors of perceived parental pressure to maintain cultural honour and to have an arranged marriage will be associated positively with depression and

anxiety, and negatively with life satisfaction, independently of the effects of the social identification variables.

- 3) The internal stressor of identity threat due to cultural honour will be associated positively with depression and anxiety, and negatively with life satisfaction, independently of the effects of the social identification and external stressor variables.
- 4) Psychological resilience will be associated negatively with depression and anxiety, and positively with life satisfaction, independently of the effects of the social identification and stressor variables.
- 5) Identity resilience will be associated negatively with depression and anxiety, and positively with life satisfaction, independently of the effects of the social identification and stressor variables and psychological resilience.

Method

Ethics

De Montfort University's Faculty of Health and Life Sciences Ethics Committee provided ethical approval for this study (ref: 3557). Participants received an information sheet describing the foci of the study and, upon completion of the study, a debrief sheet that outlined the hypotheses and signposted them to professional support in relation to the issues covered in the study.

Design, procedure, and participants

A convenience sample of 304 British South Asian adults was recruited on Prolific, an online participant recruitment platform, to participate in a cross-sectional survey study of cultural honour in South Asian communities. Participants indicated their age in years, sex, ethnicity, place of birth, and relationship status, and then completed measures of ethnic identification, religiousness, parental pressure to maintain cultural honour, parental pressure to have an arranged marriage, identity threat due to cultural honour, psychological resilience, identity resilience, depression, anxiety, and life satisfaction.

Participants were aged 18-87 years ($M = 31.00$, $SD = 10.46$). There were 121 (39.8%) males and 183 (60.2%) females in the sample, of whom 120 (39.5%) identified as Indian, 88 (28.9%) as Pakistani, 62 (20.4%) as Bangladeshi, and 34 (11.2%) as "Other South Asian." All 304 participants reported being born in the United Kingdom. In terms of relationship status, 138 (45.4%) reported being single and 166 (54.6%) reported being in a relationship but not married.

Measures

Ethnic identification

The 9-item brief version of the Ethnic Identity Scale (Douglass & Umaña-Taylor, 2015) was used to measure ethnic identification on a 4-point Likert scale (1=*does not describe me at all*

to 4=*describes me well*). The scale includes items, such as “I have a clear sense of what my ethnicity means to me” and “I feel negatively about my ethnicity.” The mean of all 9 items was calculated, and a higher mean score indicates higher ethnic identification ($\alpha = .774$).

Religiousness

The 12-item Religiousness Scale (Saroglou et al., 2020) was used to measure religiousness on a 7-point Likert scale (1=*totally disagree* to 7=*totally agree*). The scale includes items, such as “I feel attached to religion because it helps me to have a purpose in my life” and “Belonging to a religious tradition and identifying with it is important for me.” The mean of all 12 items was calculated, and a higher mean score indicates higher religiousness ($\alpha = .930$).

Parental pressure to maintain cultural honour

The 10-item Perceived Parental Pressure to Maintain Cultural Honour Scale was created based on previous qualitative research (Jaspal & Ferozali, 2026) to measure perceived parental pressure to maintain cultural honour on a 5-point Likert scale (1=*strongly disagree* to 5=*strongly agree*). The scale (see Appendix 1) includes items, such as “My parents push me to maintain cultural honour” and “My parents do not get angry when I do not follow cultural norms.” The mean of all 10 items was calculated, and a higher mean score indicates higher perceived parental pressure to maintain cultural honour ($\alpha = .760$).

Parental pressure to have an arranged marriage

Perceived parental pressure to have an arranged marriage was measured using the following single item: “Do your parents pressure you into having an arranged marriage?” Possible responses were 1=*yes* or 0=*no*.

Identity threat due to cultural honour

The following 4 items, based on an identity threat scale used in previous research (e.g., Breakwell & Jaspal, 2022), were used to measure identity threat due to cultural honour: “Cultural honour undermines my sense of self-worth,” “Cultural honour makes me feel less competent,” “Cultural honour makes me feel that my past, present and future are less connected,” and “Cultural honour makes me feel less unique.” Participants indicated how much they agreed or disagreed with each statement on a 5-point Likert scale (1=*strongly disagree* to 5=*strongly agree*). The mean of all four items was calculated, and a higher mean score indicates higher identity threat due to cultural honour ($\alpha = .716$).

Psychological resilience

The 12-item abbreviated Nicholson McBride Resilience Questionnaire (Clarke, 2010) was used to measure psychological resilience on a 5-point Likert scale (1=*strongly disagree* to 5=*strongly agree*). The scale includes items, such as “In a difficult spot, I turn at once to what can be done to put things right” and “I’m good at finding solutions to problems.” The mean of all 12 items was calculated, and a higher mean indicates higher psychological resilience ($\alpha = .755$).

Identity resilience

The 16-item Identity Resilience Index (Breakwell et al., 2022) was used to measure identity resilience on a 5-point Likert scale (1=*strongly disagree* to 5=*strongly agree*). The scale includes items, such as “On the whole, I am satisfied with myself” and “There is continuity between my past and present.” The mean of all 16 items was calculated, and a higher mean score indicates higher identity resilience ($\alpha = .833$).

Depression

The 10-item Center of Epidemiological Studies Depression Scale (Andresen et al., 1994) was used to measure depression on a 4-point Likert scale (0=*rarely or none of the time [less than 1 day]* to 3=*most of the time [5-7 days]*). The scale includes items, such as “I was bothered by things that usually don’t bother me” and “I felt that everything I did was an effort.” The mean of all 10 items was calculated, and a higher mean score indicates higher depression ($\alpha = .866$).

Anxiety

The 7-item General Anxiety Order Scale (Spitzer et al., 2006) was used to measure anxiety on a 4-point Likert scale (0=*not at all* to 3=*nearly every day*). The scale asks how often individuals have been bothered by problems such as “feeling nervous anxious or on edge” and “feeling afraid as if something awful might happen” in the preceding two weeks. The mean of all 7 items was calculated, and a higher mean score indicates higher anxiety ($\alpha = .943$).

Life satisfaction

The 5-item Satisfaction with Life Scale (Diener et al., 1985) was used to measure life satisfaction on a 7-point Likert scale (1=*strongly disagree* to 7=*strongly agree*). The scale includes items, such as “In most ways my life is close to my ideal” and “The conditions of my life are excellent.” The mean of all 5 items was calculated, and a higher mean score indicates higher life satisfaction ($\alpha = .890$).

Covariates

The following covariates were included: age and annual income, which were measured as continuous variables; and the categorical variables of sex, ethnicity, and place of birth.

Statistical analyses

All analyses were conducted in IBM SPSS Statistics Version 29. First, means and standard deviations were calculated for the continuous variables and frequencies and percentages for the categorical variables. Second, Pearson correlations were calculated to examine bivariate associations between the continuous variables. Third, independent samples *t*-tests were conducted to examine differences in the continuous variables by sex (female = 0 vs. male = 1), relationship status (single = 0 vs. partnered= 1), and perceived parental pressure to have an arranged marriage (no = 0 vs. yes = 1).

Finally, hierarchical multiple regression was conducted to examine the independent effects of the social identification variables of ethnic identification and religiousness; the

external stressor variables of perceived parental pressure to maintain cultural honour and to have an arranged marriage; the internal stressor variable of identity threat due to cultural honour; and the protective factors of psychological resilience and identity resilience, while controlling for the effects of the demographic variables. The predictors were entered in the same blocks for depression, anxiety, and life satisfaction. As covariates, the demographic variables were entered in Model 1; followed by the social identification variables, which are consistently found to be associated with mental health, in Model 2; the external stressor variables in Model 3; the internal stressor variable, as a corollary of external stressors, in Model 4; psychological resilience in Model 5; and, finally, the broader construct of identity resilience in Model 6 to examine its effects over and above those of psychological resilience.

Results

Descriptive statistics

Table 1 provides the descriptive statistics for the continuous and categorical variables.

Table 1. Descriptive statistics.

Variables	M	SD
1. Age	31.00	10.46
2. Ethnic identification	2.76	0.59
3. Religiousness	5.37	1.23
4. Pressure honour	3.05	0.75
6. Identity threat	3.06	0.95
7. Psycholog. resilience	3.40	0.51
8. Identity resilience	3.28	0.56
9. Depression	1.19	0.73
10. Anxiety	1.09	0.91
11. Life satisfaction	4.04	1.43
	N (%)	N (%)
	Yes	No
12. Pressure marriage	51 (16.8)	249 (81.9)

Pressure honour = Perceived parental pressure to maintain cultural honour

Pressure marriage = Perceived parental pressure to have an arranged marriage

Identity threat = Identity threat due to cultural honour

Psycholog. resilience = Psychological resilience

Correlations

Table 2 provides the correlations between the continuous variables. Since age was statistically significantly associated with depression, anxiety, and life satisfaction, it was entered as a covariate in the models.

Table 2. Correlation matrix.

Variables	1	2	3	4	5	6	7	8	9
1. Age									
2. Ethnic identification	.047								
3. Religiousness	-.048	.234**							
4. Pressure honour	-.032	.018	-.030						
5. Identity threat	-.047	-.146*	-.026	.226**					
6. Psycholog. resilience	.206**	.300**	.093	-.200**	-.268**				
7. Identity resilience	.154**	.323**	.125*	-.193**	-.229**	.671**			
8. Depression	-.142*	-.218**	-.054	.293**	.273**	-.531**	-.544**		
9. Anxiety	-.156**	-.160**	-.047	.288**	.273**	-.539**	-.442**	.804**	
10. Life satisfaction	.171**	.204**	.207**	-.289**	-.140*	.362**	.400**	-.480**	-.345**

Pressure honor = Perceived parental pressure to maintain cultural honor

Identity threat = Identity threat due to cultural honor

Psycholog. resilience = Psychological resilience

* $p < 0.05$

** $p < 0.001$

Differences by sex, relationship status, and perceived parental pressure to have an arranged marriage

Independent samples *t*-tests showed statistically significant effects of sex (female = 0 vs. male = 1) upon depression, $t(302) = 4.170$, $p < .001$, Cohen's $d = .710$; and anxiety, $t(293) = 4.609$, $p < .001$, Cohen's $d = .884$; but not life satisfaction ($p > .05$). Females reported higher depression ($M = 1.328$, $SD = .776$) and anxiety ($M = 1.282$, $SD = .952$) than males ($M = .981$, $SD = .597$ for depression; and $M = .799$, $SD = .774$ for anxiety). Sex was entered as a covariate in the models predicting depression and anxiety only.

Further tests showed statistically significant effects of relationship status (0 = single vs. 1 = partnered) upon depression, $t(302) = 2.261$, $p = .012$, Cohen's $d = .724$; anxiety, $t(293) = 2.856$, $p = .002$, Cohen's $d = .903$; and life satisfaction, $t(293) = -5.992$, $p < .001$, Cohen's $d = 1.354$. Single participants reported higher depression ($M = 1.293$, $SD = .673$) and anxiety ($M = 1.249$, $SD = .914$) and lower life satisfaction ($M = 3.523$, $SD = 1.481$) than partnered participants ($M = 1.104$, $SD = .763$ for depression; $M = .947$, $SD = .893$ for anxiety; and $M = 4.471$, $SD = 1.237$ for life satisfaction). Relationship status was entered as a covariate in the models.

Finally, there were statistically significant effects of perceived parental pressure to have an arranged marriage (no = 0 vs. yes = 1) upon depression, $t(298) = -4.190$, $p < .001$, Cohen's $d = .684$; anxiety, $t(293) = -4.009$, $p < .001$, Cohen's $d = .891$; and life satisfaction, $t(293) = 2.903$, $p < .001$, Cohen's $d = 1.415$. Participants who perceived pressure to have an arranged marriage reported higher depression ($M = 1.531$, $SD = .655$) and anxiety ($M = 1.546$, $SD = .928$) and lower life satisfaction ($M = 3.508$, $SD = 1.366$) than those who did not ($M = 1.091$, $SD = .690$ for depression; $M = .991$, $SD = .884$ for anxiety; and $M = 4.145$, $SD = 1.424$ for life satisfaction). Therefore, it was included as a predictor in the models.

Hierarchical multiple regression models

Depression

In Model 1, the demographic variables of age, sex, and relationship status were entered and only sex and relationship status were associated with depression.

In Model 2, the social identification variable of ethnic identification was entered and was negatively associated with depression. Sex and relationship status remained significant predictors.

In Model 3, the external stressor variables of perceived parental pressure to maintain honour and to have an arranged marriage were entered, and both were positively associated with depression. Ethnic identification, sex, and relationship status remained significant predictors.

In Model 4, the internal stressor of identity threat due to cultural honour was entered and was positively associated with depression. Perceived parental pressure to maintain honour and to have an arranged marriage, ethnic identification, sex, and relationship status remained significant predictors.

In Model 5, psychological resilience was entered and was negatively associated with depression. Sex, relationship status, ethnic identification, and identity threat due to cultural honour ceased to be significant predictors. Perceived parental pressure to maintain honour and to have an arranged marriage remained significant predictors.

In Model 6, identity resilience was entered and was negatively associated with depression. Perceived parental pressure to maintain honour and to have an arranged marriage and psychological resilience remained significant predictors.

Table 3. Hierarchical multiple regression models predicting depression.

Variables	Adj. R ²	F	p	β	t	p	95% CI
<i>Model 1</i>	.068	8.221	<.001				
Age				-.035	-.580	.563	[-.010, .006]
Sex				-.226	-3.976	<.001	[-.484, -.164]
Relationship status				-.158	-2.606	.010	[-.390, -.054]
<i>Model 2</i>	.093	8.659	<.001				
Age				-.016	-.264	.729	[-.009, .007]
Sex				-.221	-3.939	<.001	[-.475, -.158]
Relationship status				-.152	-2.543	.012	[-.380, -.048]
Ethnic identification				-.169	-3.047	.003	[-.331, -.071]
<i>Model 3</i>	.197	13.187	<.001				
Age				-.043	-.751	.453	[-.010, .005]
Sex				-.209	-3.953	<.001	[-.449, -.150]
Relationship status				-.119	-2.106	.036	[-.324, -.011]
Ethnic identification				-.175	-3.335	<.001	[-.329, -.085]
Pressure honour				.229	4.240	<.001	[.114, .312]
Pressure marriage				.185	3.408	<.001	[.146, .546]

<i>Model 4</i>	.210	12.361	<.001				
Age				-.025	-.428	.669	[-.009, .006]
Sex				-.183	-3.404	<.001	[-.412, -.110]
Relationship status				-.115	-2.050	.041	[-.317, -.006]
Ethnic identification				-.158	-3.015	.003	[-.309, -.065]
Pressure honour				.202	3.706	<.001	[.088, .289]
Pressure marriage				.176	3.264	.001	[.131, .528]
Identity threat				.136	2.458	.015	[.020, .182]
<i>Model 5</i>	.342	20.430	<.001				
Age				.000	-4.137	1.000	[-.007, .007]
Sex				-.083	0.283	.100	[-.262, .023]
Relationship status				-.071		.168	[-.243, .043]
Ethnic identification				-.052	3.192	.296	[-.178, .054]
Pressure honour				.149	1.781	.003	[.047, .231]
Pressure marriage				.129	0.005	.010	[.057, .423]
Identity threat				.087	10.536	.088	[-.010, .139]
Psycholog. resilience				-.415	9.821	<.001	[-.717, -.426]
<i>Model 6</i>	.386	21.848	<.001				
Age				.004	.080	.936	[-.006, .007]
Sex				-.059	-1.209	.228	[-.223, .053]
Relationship status				-.080	-1.611	.108	[-.251, .025]
Ethnic identification				-.011	-.234	.815	[-.128, .100]
Pressure honour				.134	2.746	.006	[.035, .214]
Pressure marriage				.105	2.182	.030	[.019, .374]
Identity threat				.083	1.674	.095	[-.011, .133]
Psycholog. resilience				-.245	-3.857	<.001	[-.509, -.165]
Identity resilience				-.293	-4.649	<.001	[-.526, -.213]

Pressure honor = Perceived parental pressure to maintain cultural honour

Pressure marriage = Perceived parental pressure to have an arranged marriage

Identity threat = Identity threat due to cultural honour

Psycholog. resilience = Psychological resilience

Anxiety

In Model 1, the demographic variables of age, sex, and relationship status were entered and only sex and relationship status were associated with anxiety.

In Model 2, the social identification variable of ethnic identification was entered and was negatively associated with anxiety. Sex and relationship status remained significant predictors.

In Model 3, the external stressor variables of perceived parental pressure to maintain honour and to have an arranged marriage were entered, and both were positively associated with anxiety. Sex, relationship status, and ethnic identification remained significant predictors.

In Model 4, the internal stressor variable of identity threat due to cultural honour was entered and was positively associated with anxiety. Sex, relationship status, ethnic identification, and the external stressor variables remained significant predictors.

In Model 5, psychological resilience was entered and was negatively associated with anxiety. Relationship status, ethnic identification, and identity threat due to cultural honour ceased to be significant predictors. Sex, and perceived parental pressure to maintain honour and to have an arranged marriage remained significant predictors.

In Model 6, identity resilience was entered and was not statistically significantly associated with anxiety.

Table 4. Hierarchical multiple regression models predicting anxiety.

Variables	Adj. R ²	F	p	β	t	p	95% CI
<i>Model 1</i>	.097	11.566	<.001				
Age				-.054	.897	.371	[-.015, .006]
Sex				-.270	-4.770	<.001	[-.708, -.294]
Relationship status				-.172	-2.858	.005	[-.531, -.098]
<i>Model 2</i>	.112	10.281	<.001				
Age				-.039	-.653	.514	[-.014, .007]
Sex				-.266	-4.746	<.001	[-.700, -.290]
Relationship status				-.168	-2.812	.005	[-.522, -.092]
Ethnic identification				-.134	-2.418	.016	[-.375, -.038]
<i>Model 3</i>	.212	14.212	<.001				
Age				-.067	-1.171	.243	[-.016, .004]
Sex				-.256	-4.840	<.001	[-.669, -.282]
Relationship status				-.139	-2.466	.014	[-.457, -.051]
Ethnic identification				-.141	-2.700	.007	[-.376, -.059]
Pressure honour				.220	4.085	<.001	[.138, .394]
Pressure marriage				.188	3.459	<.001	[.197, .717]
<i>Model 4</i>	.222	12.978	<.001				
Age				-.051	-.884	.377	[-.014, .005]
Sex				-.233	-4.340	<.001	[-.629, -.237]
Relationship status				-.135	-2.402	.017	[-.448, -.045]
Ethnic identification				-.126	-2.404	.017	[-.353, -.035]
Pressure honour				.197	3.596	<.001	[.107, .367]
Pressure marriage				.179	3.310	.001	[.177, .695]
Identity threat				.118	2.128	.034	[.009, .218]
<i>Model 5</i>	.354	21.133	<.001				
Age				-.027	-.508	.621	[-.011, .007]
Sex				-.136	-2.693	.008	[-.437, -.068]
Relationship status				-.093	-1.816	.070	[-.356, .014]
Ethnic identification				-.022	-.441	.660	[-.184, .117]
Pressure honour				.143	2.839	.005	[.053, .292]
Pressure marriage				.131	2.642	.009	[.081, .558]
Identity threat				.072	1.401	.162	[-.028, .165]
Psycholog. resilience				-.413	-7.723	<.001	[-.934, -.554]

	<i>Model 6</i>	.356	19.045	<.001				
Age					-.025	-.486	.627	[-.011, .007]
Sex					-.128	-2.525	.012	[-.424, -.052]
Relationship status					-.095	-1.859	.064	[-.359, .010]
Ethnic identification					-.009	-.181	.856	[-.167, .139]
Pressure honor					.138	2.743	.006	[.047, .286]
Pressure marriage					.124	2.483	.014	[.063, .541]
Identity threat					.070	1.382	.168	[-.029, .164]
Psycholog. resilience					-.361	-5.502	<.001	[-.883, -.418]
Identity resilience					-.089	-1.358	.176	[-.355, .065]

Pressure honour = Perceived parental pressure to maintain cultural honour

Pressure marriage = Perceived parental pressure to have an arranged marriage

Identity threat = Identity threat due to cultural honor

Psycholog. resilience = Psychological resilience

Life satisfaction

In Model 1, the demographic variables of age and relationship status were entered, and only relationship status was associated with life satisfaction.

In Model 2, the social identification variables of ethnic identification and religiousness were entered and both were positively associated with life satisfaction. Relationship status remained a significant predictor.

In Model 3, the external stressor variables of perceived parental pressure to maintain honour and to have an arranged marriage were entered and only perceived parental pressure to maintain cultural honour was negatively associated with life satisfaction. Relationship status, ethnic identification, and religiousness remained significant predictors.

In Model 4, the internal stressor variable of identity threat due to cultural honour was entered and was not associated with life satisfaction.

In Model 5, psychological resilience was entered and was positively associated with life satisfaction. Relationship status, religiousness, and perceived parental pressure to maintain cultural honour remained significant predictors. Ethnic identification ceased to be a significant predictor.

In Model 6, identity resilience was entered and was positively associated with life satisfaction. Psychological resilience ceased to be a significant predictor. Relationship status and perceived parental pressure to maintain cultural honour remained significant predictors.

Table 5. Hierarchical multiple regression models predicting life satisfaction.

Variables	Adj. R ²	F	p	β	t	p	95% CI
<i>Model 1</i>	.119	19.082	<.001				
Age				-.061	-.989	.324	[-.025, .008]
Relationship status				.374	6.013	<.001	[.722, 1.424]

<i>Model 2</i>	.176	15.267	<.001				
Age				-.052	-.845	.399	[-.023, .009]
Relationship status				.371	6.172	<.001	[.725, 1.405]
Ethnic identification				.127	2.192	.029	[.031, .583]
Religiousness				.187	3.210	.001	[.083, .348]
<i>Model 3</i>	.236	14.782	<.001				
Age				-.044	-.740	.460	[-.022, .010]
Relationship status				.349	6.014	<.001	[.675, 1.332]
Ethnic identification				.142	2.532	.012	[.076, .608]
Religiousness				.167	2.696	.003	[.065, .321]
Pressure honour				-.225	-4.036	<.001	[-.621, -.214]
Pressure marriage				-.079	-1.404	.161	[-.717, .120]
<i>Model 4</i>	.234	12.637	<.001				
Age				-.047	-.779	.437	[-.022, .010]
Relationship status				.349	6.004	<.001	[.674, 1.332]
Ethnic identification				.140	2.471	.014	[.069, .606]
Religiousness				.167	2.958	.003	[.064, .321]
Pressure honour				-.221	-3.866	<.001	[-.620, -.202]
Pressure marriage				-.078	-1.378	.169	[-.715, .126]
Identity threat				-.016	-.283	.777	[-.189, .141]
<i>Model 5</i>	.267	13.128	<.001				
Age				-.063	-1.060	.290	[-.024, .007]
Relationship status				.339	5.939	<.001	[.650, 1.295]
Ethnic identification				.095	1.671	.096	[-.041, .499]
Religiousness				.157	2.839	.005	[.056, .307]
Pressure honour				-.200	-3.564	<.001	[-.578, -.167]
Pressure marriage				-.058	-1.030	.304	[-.630, .197]
Identity threat				.024	.414	.680	[-.130, .199]
Psycholog. resilience				.204	3.551	<.001	[.262, .912]
<i>Model 6</i>	.296	13.497	<.001				
Age				-.068	-1.170	.243	[-.025, .006]
Relationship status				.346	6.188	<.001	[.677, 1.309]
Ethnic identification				.060	1.056	.292	[-.125, .413]
Religiousness				.152	2.805	.005	[.052, .298]
Pressure honour				-.190	-3.450	<.001	[-.556, -.152]
Pressure marriage				-.039	-.707	.480	[-.553, .261]
Identity threat				.030	.533	.595	[-.118, .205]
Psycholog. resilience				.063	.902	.368	[-.213, .574]
Identity resilience				.241	3.463	<.001	[.269, .978]

Pressure honor = Perceived parental pressure to maintain cultural honour

Pressure marriage = Perceived parental pressure to have an arranged marriage

Identity threat = Identity threat due to cultural honour

Psycholog. resilience = Psychological resilience

Discussion

This study set out to examine the effects of stressors related to cultural honour, namely perceived parental pressure to maintain cultural honour and to have an arranged marriage, and identity threat due to cultural honour; the social identification variables of ethnic identification and religiousness; potential protective factors, that is, psychological resilience and identity resilience, upon the mental health variables of depression, anxiety, and life satisfaction in a sample of British South Asians. The predictors explained reasonable amounts of variance in depression (39%), anxiety (36%), and life satisfaction (30%). When the effects of all the predictors were accounted for,

- depression was predicted by identity resilience, psychological resilience, and perceived parental pressure to maintain cultural honour and to have an arranged marriage;
- anxiety was predicted by psychological resilience, perceived parental pressure to maintain cultural honour and to have an arranged marriage, and sex; and
- life satisfaction was predicted by identity resilience, perceived pressure to maintain cultural honour, religiousness, and relationship status.

Social identification

Hypothesis 1 that the social identification variables of ethnic identification and religiousness would be associated negatively with depression and anxiety and positively with life satisfaction was only partially supported. Ethnic identification was associated with depression, anxiety, and life satisfaction but religiousness was associated only with life satisfaction. Previous research has found a strong ethnic identity is associated with better mental health outcomes among ethnic minorities (Haslam et al., 2016; Haslam et al., 2018), including British South Asians (Jaspal & Lopes, 2021). This could be attributed to feelings of acceptance, inclusion, and belonging (Greenaway et al., 2015; Haslam et al., 2005; Haslam et al., 2018), as well as self-esteem (Phinney, 1991) that one's ethnic group can provide, especially in the face of exclusion, marginalization, and rejection from the White British majority.

Yet, religiousness was not associated with depression or anxiety, even at the bivariate level. Reviews of previous research have generally found that some aspects of religiousness may be protective against depression and anxiety but not others (e.g., Braam & Koenig, 2019; Khalaf et al., 2015). Religiousness was, however, positively associated with life satisfaction, even when the effects of all the other predictors were accounted for. In his analysis of World Values Survey data from 79 nations, Okulicz-Kozaryn (2010) found that religiousness was a predictor of life satisfaction, which he attributed to the human "need to belong" that is satisfied by religious group membership (p. 155).

These findings support the social cure perspective in social psychology that highlights the benefits of identification with meaningful social groups for mental health. Although ethnicity and religion tend to be sources of cultural honour, ethnic identification and religiousness remained statistically significant predictors even when the honour-related stressors were entered in the models, suggesting that British South Asians nonetheless derive

psychological benefits from their ethnicity and religion. Indeed, some British South Asians question the legitimacy of cultural honour through the lenses of their ethnic and religious identities, which may enable them to compartmentalize cultural honour from their ethnic and religious group memberships (Jaspal & Ferozali, 2026).

Differential effects of external and internal stressors upon mental health

Perceived parental pressure to maintain cultural honour was associated with higher depression and anxiety and with lower life satisfaction, even when the effects of all the other predictors were accounted for, but perceived parental pressure to have an arranged marriage was associated with higher depression and anxiety only. Therefore, hypothesis 2 was partially supported. Following minority stress theory (Meyer, 2003), a distinction was made between external and internal stressors and it was hypothesized that the internal stressor of identity threat due to cultural honour would be associated positively with depression and anxiety and negatively with life satisfaction, over and above the effects of the external stressors. Therefore, hypothesis 3 was also partially supported, since it was related to depression and anxiety only (but not to life satisfaction).

It appears, therefore, that perceived pressure to maintain cultural honour is harmful for various dimensions of mental health. This builds upon extant, largely qualitative empirical evidence that cultural honour pressures are associated with shame, feelings of entrapment, anxiety, and suicide attempts (Gilbert et al., 2004; Khan et al., 2018; Sangar & Howe, 2021). While connectedness with one's culture is generally deemed to be beneficial for mental health in ethnic minorities (Dulai & Jaspal, 2024; Jaspal & Lopes, 2021), *pressures* associated with one's culture are clearly not. Moreover, perceived parental pressure to have an arranged marriage appears to be associated with feelings of hopelessness, helplessness, and entrapment (i.e., depression) and the fearful anticipation of threat (i.e., anxiety). British South Asians may find it difficult to negotiate this expectation from parents and therefore experience poor mental health (Jaspal, 2014). However, there were no effects upon life satisfaction, suggesting that, notwithstanding perceived parental pressure to have an arranged marriage, British South Asians may be able to retain a sense of satisfaction with their lives. It is possible that they derive life satisfaction based upon satisfaction with other life domains, such as their relationships with others, employment, and so on. Yet, it should be noted that perceived pressure to have an arranged marriage can vary from overt to subtle coercive practices and, given that a categorical dichotomous measure was used in this study, it is unclear whether overt coercion would be related to decreased life satisfaction (Asadisarvestani & Hamidizadeh, 2025).

The rationale for the hypothesis that identity threat would explain additional variance in the mental health variables was based on the premise that those stressors that operate at the psychological level, rather than those that emanate from other people, may pose unique challenges for mental health. This proved to be so. These findings are consistent with other research showing that exposure to internal stressors is associated with poor mental health, independently of exposure to external stressors. For instance, in his study of gay men, Meyer

(1995) found that the internal stressors of internalized homonegativity and stigma sensitivity predicted psychological distress, independently of the external stressor of prejudice. However, it should be noted that identity threat due to cultural honour ceased to be a significant predictor of depression and anxiety when the protective factors were entered in the models.

Psychological resilience vs. identity resilience

A key objective of this study was not only to identify some of the factors that might undermine mental health outcomes in British South Asians but also those that might operate as protective factors. It was hypothesized that the separate constructs of psychological resilience and identity resilience would be associated negatively with depression and anxiety and positively with life satisfaction and that identity resilience would explain additional variance in the mental health variables. These hypotheses were partially supported. Both psychological resilience and identity resilience were associated with decreased depression. Only psychological resilience was associated with decreased anxiety. And when identity resilience was entered in the model predicting life satisfaction, it emerged as a statistically significant predictor and psychological resilience ceased to be statistically significant.

It appears that psychological resilience, which amounts to the ability to ‘bounce back’, may enable the individual to feel more hopeful and self-efficacious, thereby buffering against depression (Edward, 2005). Having greater psychological resilience perhaps enables the individual to see a way through the challenges that they face, which in turn reduces the risk of experiencing depressive symptoms. Furthermore, psychological resilience was the only statistically significant protective factor against anxiety, which constitutes a type of fear of imminent threat. A person with higher psychological resilience may believe that they will find effective solutions and deploy effective strategies for dealing with the threat to limit its impact on the self (Li & Miller, 2017).

Breakwell (2021) refers to identity resilience as the “capacity of the identity to resist its own invalidation, devaluation or fragmentation” (p. 581), which may in turn promote better mental health notwithstanding the challenges one faces in life. Identity resilience was the strongest predictor of depression, suggesting that the components of self-esteem, self-efficacy, continuity, and positive distinctiveness collectively militate against depressive symptomatology. Moreover, it was the only protective factor that statistically significantly predicted life satisfaction, which is consistent with the findings of previous research (Jaspal, 2024).

The protective factor of psychological resilience appears to eradicate the effects of the internal stressor of identity threat upon depression and anxiety, suggesting that, when the individual believes that they are self-efficacious and empowered to take action in the face of a challenge, identity threat does not appear to precipitate poor mental health. In short, a person may face identity threat but its mental health impact may be curtailed by the presence of psychological resilience.

However, in spite of both psychological resilience and identity resilience, perceived parental pressure to maintain cultural honour remained independently associated with higher

depression and anxiety and lower life satisfaction. Furthermore, perceived parental pressure to have an arranged marriage remained independently associated with higher depression and anxiety. These findings suggest that these protective self-schemas may support the resolution of internal stressors, such as identity threat, but have limited efficacy in preventing poor mental health due to external stressors. After all, one has limited control over external pressures that emanate from other people and especially from significant others, such as one's parents. It should also be noted that British South Asian cultures tend to be collectivist and that the family is generally rated as important (Parveen & Morrison, 2009). It may be more challenging to resist pressures from people that really matter.

Sex and relationship status effects

Although no hypotheses were made regarding sex or relationship status differences in relation to mental health, the results showed that people in a relationship reported higher life satisfaction than those who were single and that women reported higher anxiety than men when accounting for the effects of all the other predictors. In fact, relationship status was the strongest predictor of life satisfaction.

In their cross-sectional study of 553 Polish young adults, Adamczyk and Segrin (2015) found that single people reported significantly less satisfaction with life than people in a romantic relationship. Their path analysis showed that social support mediated the relationship between relationship status and life satisfaction, suggesting that relationships provide support which in turn enhances life satisfaction (see also Chipperfield & Havens, 2001 for data from older adults). Indeed, empirical studies generally point to the significance of relationships as sources of interpersonal support that buffer the effects of stressors that might ordinarily undermine life satisfaction (Adamczyk, 2016).

It has been noted that the burden of maintaining cultural honour and the greatest honour-related pressures tend to be faced by women whose behaviour is more closely regulated by family members than that of men (Campbell et al., 2020). In particular, sexual transgressions, such as sex before marriage, among women may be deemed to be more damaging for cultural honour than those among men. Women may therefore fear adverse consequences of (perceived) non-compliance with cultural honour expectations. This may explain why levels of anxiety – a type of fear associated with the anticipation of threat – were elevated among British South Asian women compared to men.

Limitations

There are several limitations that should be addressed in future research. First, it is not possible to infer causal relationships between the variables based on these cross-sectional correlational data. An experimental design manipulating the psychological salience of cultural honour could shed light on its causal relationship with mental health outcomes. Longitudinal studies assessing mental health at various intervals in British South Asian people's lives could isolate the effects of particular honour-related events and experiences upon mental health. Second, cultural honour is a broad umbrella term that encompasses many different

events and experiences. Perceived pressure to have an arranged marriage is just one of them. It would be beneficial to assess others using different measures in future studies. Similarly, other internal stressors beyond identity threat (such as shame, guilt, and rejection sensitivity) due to cultural honour should also be examined. Third, the relationships between cultural honour and mental health are likely to be moderated by factors that were not measured in this study, such as the individual's living arrangements, their level of personal income, and degree of social support from friends and other social networks. Finally, this study provides novel quantitative empirical insight into the effects of cultural honour for mental health among British South Asians, but should be replicated in other honour cultures to ascertain the cross-cultural transferability of these findings.

Conclusions

Parental pressures in relation to cultural honour appear to be harmful for mental health among British South Asians. Although the self-schemas of psychological resilience and identity resilience may offer respite from internal stressors, such as identity threat due to cultural honour, they may have limited efficacy in preventing the mental health burden associated with external stressors. Therapeutic interventions for enhancing mental health among British South Asians should incorporate a combination of psychological resilience and identity resilience, which appear to have favourable effects upon different dimensions of mental health. These tenets could be incorporated into existing approaches, such as cognitive behavioural therapy. These approaches may also help manage honour-related pressures experienced by individuals. In a similar vein, there needs to be greater societal awareness within South Asian communities of the mental health burden faced by British South Asians due to cultural honour pressures. It is important to engage actively with the issue of cultural honour and to facilitate debates about the issue and how it affects those upon whom the burden of cultural honour falls.

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Appendix 1. Perceived Parental Pressure to Maintain Cultural Honour Scale

- 1) My parents push me to maintain cultural honour.
- 2) My parents do not have high expectations of me.*
- 3) My parents compare my adherence to cultural norms with my siblings/ cousins.
- 4) My parents do not shout at me when I engage in activities that may tarnish my family's reputation.*
- 5) My parents pressure me about my romantic relationships.
- 6) My parents do not pressure me to find a partner of the same culture.*
- 7) My parents are always observing my behaviours.
- 8) My parents always want to make my life decisions for me.
- 9) My parents consistently inspect my clothing choices.
- 10) My parents do not get angry when I do not follow cultural norms.*

*item reverse-scored