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Customary Consanguineous Marriage, and its Impacts in Gaza Strip

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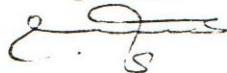
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Customary consanguineous marriage and its impacts in Gaza Strip

Abstract

This study is "The customary consanguineous marriage and its impacts in Gaza Strip". The aim of this study is to identify the rate of customary consanguineous marriage in the Gaza Strip and the health consequences associated with it. This is to provide reliable information as a baseline data for further studies, which may help in improving the quality of health care for both women and child.

Design of the study: cross-sectional design.

Area of the study: Jabalia Village and Bany Suhaila as peri-urban areas, Rimal locality as an urban area and Jabalia camp in the Gaza Strip. These localities represent diversity of the socioeconomic and cultural characteristics.

Setting of the study: Community health centers in the study localities, which are administered by the Palestinian Ministry of Health.

Sample and sampling: The study population was 625 married women that had been selected through a systematic random sample, 175 women from Rimal area, 172 from Jabalia Camp, 143 from Jabalia Village, and 135 mother from Bany Suhaila Village.

The sample was attained irrespective of age, parity or any other variable of the married women who presented at the community health center and who gave verbal consent during the days of data collection. The data had been analyzed by using the SPSS software program.

Material of the study: Interviews using structured administered questionnaire.

Results and Conclusion: The prevalence of consanguineous marriage was 49.4% (in Jabalia Camp 56.4%, in Jabalia Village 53.1%, in Rimal area 40.6% and in Bany Suhaila 48.1%). Results showed possible association between socioeconomic condition and the prevalence of consanguineous marriage. Consanguineous marriage had been associated with couple fertility, maternal morbidity, and infants and children morbidity and mortality.

The following is a summary of the findings:

1. Customary consanguineous marriage is attributed to the following reasons:
 - Promotion of family ties and enforcement of family security.
 - Easy way for marriage negotiation.
 - Part of family tradition.
 - A means of keeping the possessions inside the family.
2. Mothers' education, level of husbands' occupation and the monthly family income were higher among the non-consanguineous married couples.
3. Strong association was seen among the consanguineous married couples and the early age at marriage.
4. More number of pregnancies was seen among the consanguineous married women.
5. Consanguineous married women had more health problems as anaemia, toxemia of pregnancy and bleeding than the non-consanguineous women did in their last pregnancy.
6. Number of cesarean sections was higher among the consanguineous married women.
7. Total mortality rate among the infants and children was higher among the consanguineous married women. Deaths as a direct cause of accidents were excluded.
8. High association was reported among the consanguineous married couples and the following infants and children with congenital abnormalities and health disorders which includes: Congenital malformation and hereditary disorders like; congenital heart disease, congenital hip dislocation, congenital deafness, congenital blindness, thalassaemia, non febrile convulsion and low birth weight infants.

There is a clear need for genetic counseling services, but the most appropriate and efficient approaches have yet to be defined. Research is needed on almost all aspects of genetic counseling. Current legal and religious attitudes towards the options available for people at genetic risk should be considered.

Information is needed about the current views of professionals such as geneticists, paediatricians and obstetricians on whether genetic counseling should be directive or non-directive, on the range of options that are currently available, and the options that should be available to couples at high genetic risk. Appropriate counselors should be trained to undertake pilot studies of the feasibility of screening and counseling extended families, and of incorporating these approaches into paediatric and primary health care services.

ملخص

دراسة حول ظاهرة زواج الأقارب في قطاع غزة والآثار المترتبة عليها ١٩٩٩

مقدمة:

يعتبر زواج الأقارب من الظواهر الاجتماعية ذات الارتباط الجذري بالعادات والتقاليد التي ينظر لها على أنها مصدر أمان اجتماعي واستقرار عائلي في قطاع غزة. ويعرف زواج الأقارب الشرعي على أنه علاقة الزواج بين اثنين تربطهما روابط الدم. و طبقاً لمبادئ علم الجينات فإن احتمال حمل زوجين قريين نفس الجين تكون مرتفعة مما يزيد من احتمال اكتساب المواليد أليلين متشابهين لمرض وراثي نادر. و لا يعني هذا بالضرورة كل قريين وكل مولود. و قد أثبتت الدراسات ومنها هذه الدراسة ارتفاع معدل خطر الإصابة بالأمراض والوفيات بين الأطفال وارتفاع معدل الخصوبة الإجمالي وارتفاع خطر الإصابة بالأمراض نتيجة الحمل وتوابعه بين الأمهات كذلك.

وقد قدرت الإحصاءات الرسمية الصادرة عن مركز الإحصاء المركزي لعام ١٩٩٧ - للمساكن والمنشآت - أن معدل انتشار هذه الظاهرة في فلسطين هو ٤٩%.

منهجية الدراسة:

هذه الدراسة هي دراسة وصفية تمت في أربع مناطق في قطاع غزة وهي: عيادة حباليا المعسكر، عيادة حباليا البلد، عيادة الرمال و عيادة بني سهيلا. وقد هدفت الدراسة إلي التعرف على معدل انتشار ظاهرة زواج الأقارب والآثار الصحية السالبة عنها مما قد يساعد في بناء قاعدة بيانات تخدم الباحثين وصناع القرار. و قد استخدم الاستبيان المركب كأداة لجمع المعلومات التي اعتمدت على تأكيد المعلومات من قبل الأمهات.

لقد تم تحديد حجم العينة ب(٦٢٥) سيدة متروحة من بين الأمهات اللاتي قمن بزيارة المراكز المذكورة في يوم الدراسة- مايو ١٩٩٩ - و بأسلوب العينة العشوائية المنظمة، حيث كانت نسبة الاستجابة ٩٦%. وقد تم استخدام البرامج الإحصائي SPSS في تحليل البيانات.

الأهداف المرحلية:

- تعرف نسبة انتشار الظاهرة في قطاع غزة.
- دراسة العوامل المساعدة على انتشار الظاهرة.
- تعرف مدى ارتباط زواج الأقارب بالعوامل الاقتصادية والاجتماعية.
- دراسة التأثيرات المترتبة على هذه الظاهرة على صحة الأم والطفل.

النتائج والتوصيات:

- كانت نسبة زواج الأقارب في قطاع غزة طبقاً لظاهرة الدراسة وبشكل عام ٤٩,٤% (٥٦,٤% في معسكر حباليا، و ٥٣,١% في حباليا البلد، و ٤٨,١% في بني سهيلا و ٤٠,٦% في منطقة الرمال).
- ارتبطت ظاهرة زواج الأقارب بمجموعة من العوامل الاقتصادية والاجتماعية والثقافية على النحو التالي:
 ١. تعزيز الأمان والروابط العائلية.
 ٢. سهولة التفاوض على أمور الزواج وتوابعه.
 ٣. حرء لا يتحرراً من تقاليد العائلات.
 ٤. المحافظة على ممتلكات العائلة والميراث.

وقد أظهرت الدراسة أن زواج الأقارب يرتبط ويؤثر بمجموعة من العوامل و من أهمها:

- المستوى التعليمي للأمهات، مهنة الزوج، والدخل الشهري للعائلة أعلى بين الأزواج الذين لم يتزوجوا من أقاربهم.
- نسبة الزواج المبكر - أقل من ١٨ سنة- هي الأعلى بين الأزواج الأقارب.
- نسبة الزواج من الأقارب -العم الأول- ٦٠,٢% من إجمالي زواج الأقارب.
- نسبة الحمولات الإجمالية بين الأمهات المتزوجات لأقارب أعلى منها بين غير الأقارب.
- نسبة الحالات المرضية نتيجة للحمل وتوابعه مثل (فقر الدم، تسهم الحمل، التزيف) وزيادة العمليات القيصرية أعلى بين الأمهات المتزوجات من أقاربهن.

- معدل الوفيات بين الأطفال الأقل من خمس سنوات هي الأعلى بين المتزوجين من أقاربهم- مع استثناء الوفيات الناتجة عن الحوادث والإصابات.
- نسبة المشاكل الوراثية والأمراض الخلقية مثل (أمراض القلب، التزلق مفصل اخوض الخلقى، الصمم، أنيميا البحر الأبيض المتوسط والتشنجات الغير حرارية النسب) علاوة على نقص وزن المولود عند الميلاد كانت الأعلى بين الأزواج الأقارب.

التوصيات:

"الوقاية خير من العلاج" بناءً على هذه الحقيقة نضع التوصيات التالية:

- ضرورة تبني الاستشارات قبل الزواج و قبل الحمل.
- اعتماد التثقيف الصحي فيما يخص زواج الأقارب كحزم من برنامج الصحة الإنجابية في المدارس الإعدادية والثانوية.
- دعم تساع القرار وأرباب السياسات والمؤسسات المؤثرة لبرنامج الصحة الإنجابية.

- دعم العلماء وقادة المجتمع ورجال الدين للتبصير بهذه الظاهرة.
 - دمج هذه الخدمة ضمن خدمات تنظيم الأسرة والرعاية الأولية.
 - تدريب الكوادر الصحية المعنية في الرعاية الأولية على أسس الاستشارات الجينية.
 - التنقيف المجتمعي حول الظاهرة بمساعدة الدوائر المعنية مثل دائرة التنقيف الصحي، دائرة الصحة المدرسية، دائرة صحة المرأة، دائرة صحة الطفل، دائرة الصحة المجتمعية وبمساعدة الإعلام العام مثل التلفزيون والوسائل المقروءة والمحرضات والقابلات .
- أما على مستوى الوقاية الثانوية:

- عملية تحيل (للهموجلوبين) للفئات المعرضة للخطر .
- عملية تحيل (فحص جيبي) للفئات المعرضة للخطر.
- تعزيز خدمات المحتر التشخيصية.
- دراسات أخرى معمقة و مقارنة هذه الدراسة التي تد تساعد في تطوير السياسات الصحية.

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Chapter I

Introduction

This study was undertaken in four Palestinian communities In the Gaza Strip. The title is "customary consanguineous marriage and its impacts in the Gaza Strip. Marriage between closely related individuals is known as consanguineous marriage. Consanguinity or blood relation leads to inbreeding in human population. According to genetic principles, the possibility of spouses being the carriers of the same gene is considerably increased if they are related and hence such marriages are prone to produce offspring who inherit two identical alleles in higher frequency than those of unrelated parents. It does not mean that consanguineous marriage per se is deleterious. But it is known that many harmful traits in man are recessives, and hence inbreeding increases the chance for the expression of recessive alleles that are hidden in the heterozygous carrier parents. This results in the production of affected children being more in consanguineous families than in the open. Consanguineous marriages are of different patterns that include: uncle-niece (marrying one's sister's daughter) or aunt-nephew (marrying his father's sister), first-cousin which can be either cross (marriage between the children of a brother and sister) or parallel (marriage between the children of two brothers or two sisters) and second-cousin (marriage between the children of two first cousins). Of these, uncle-niece/aunt-nephew marriages are generally less common eventhough uncle-niece is prevalent in some South India Hindu communities, in the Moroccan Jewish community in Jerusalem and in certain group's rules of Northern Spain. This type of union is strictly forbidden by the civil and religious rules in the Muslims. Consanguineous marriage is customary throughout the Gaza Strip, and it is an

centers nowadays providing this services with the support of health education activities regarding women and male awareness and encouraging of small, happy and prosperous families. The most acceptable methods used are loop, tablets and condom. No genetic counseling are provided, despite that the prevalence of prematurity and congenital anomalies resemble more than 30% of the total infant mortality (PMOH. 1997).

1.6. Research questions

What is the prevalence of consanguineous marriage in the study areas?

What are the risk factors associated with consanguineous marriage among women and their children?

What are the implications of the results of this study in order to improve the preventive approach?

1.7. Aim of the study

The aim of this study is to identify the rate of customary consanguineous marriage in Gaza strip and the health consequences associated with it. This will help in developing of baseline data that can be the base for further studies and help in better planning.

1.8. Objectives

1. To identify the rate of customary consanguineous marriage among the population under study.
2. To determine the major factors which may play a part in favoring consanguineous marriage among Gaza population.
3. To study the association between the socio-economic and cultural factors and the rate of customary consanguineous marriage.

4. To study the health consequences affecting both maternal and child as a result of consanguineous marriage.

1.9. Importance of the study

The result of this study can help in strengthening the sensitivity of those in a position of planning, to set out suitable strategies, in term of developing the primary health care services in the area of pre-conception information and counseling. This will facilitate better planning of health education programs regarding genetic counseling and pre-conception information.

1.10. Justification

Consanguineous marriage pattern increases the birth rate of individuals with recessively inherited disorders. WHO estimates that more than 30% of infant mortality rate due to genetic factors passed without accurately diagnosed. Consanguineous marriages increase the risk of having a child with autosomal recessive inherited disorders to approximately 20-50/1000 births. In Europe were the prevalence of consanguineous marriage is less than 1% in some areas, the autosomal recessive inherited disorders are 1.66/1000. Statistical evidence shows a prevalence of 8.3-16.6/1000 of the same disorders among children of cousin marriage in most Middle East population (WHO. 1997). Palestinian MOH in 1997 estimated that more than 30% of the infant mortality rate is due to prematurity and congenital abnormalities (PMOH 1997). Since that, standardized and comparable studies are needed to provide data that can be used in developing health policies.

Chapter VI

Conclusions and Recommendations

6.1. Conclusions:

Consanguineous marriage is traditionally common in the Palestinian society. Many families consider it has significant social benefits, but it also true that the kinship pattern increase the risk of having children with rare recessively inherited disorders. Consanguineous marriage had a significant effect on couple fertility and morbidity as well as infants and children morbidity and mortality. A cross sectional study was undertaken in four localities in Gaza Strip-Palestine, they are in Jabalia Camp, Jabalia Village and Bany Suhaila as a peri-urban and remote area, and Rimal as an urban area. The total sample of the study was 625 married women whom were selected from those who attended the community health centers in May and June 1999. The sampling method involved interviewing any married woman who visited the clinic for any purpose, and who lives in the area of study and who would agree to answer the questionnaire.

The response rate was approximately 96%. The aims of this study were to measure the rate of customary consanguineous marriage in Gaza Strip –Palestine and to find out the concurrent impacts associated with it as well as to identify possible factors that may influence the prevalence of consanguineous marriages. This will provide information for evaluating, and hence planning of health education programs regarding genetic counseling and preconception information. The conclusion of this study can be summarized as follows:

1. The prevalence of customary consanguineous marriage in this study was estimated at 49.4% (in Jabalia Camp 56.4%, in Jabalia Village 53.1%, in Rimal area

40.6% and in Bany Suhaila 48.1%). These data correspond to the findings of PCBS in 1999, which reported a consanguineous marriage rate of 49% in Palestine and more than 47% in the Gaza Strip.

2. The customary consanguineous marriage may be attributed to the following factors:

- Promotion of family ties and enforcement of family security.
- Easy of marriage negotiation.
- Part of family tradition.
- To keep the possessions inside the family "heritage".

Statistically significant association was noted between the prevalence of consanguineous marriage and the following factors:

3. Socioeconomic factors such as mothers' education ($P = 0.04$), husbands' occupation ($P = 0.04$), and the family income ($P = 0.01$), age of husbands at time of marriage ($P = 0.01$) and that of the women ($P = 0.001$). It is more likely that low socioeconomic conditions influenced the high prevalence of consanguineous marriage.

3. Results have shown that there was a strong association between consanguineous marriage and the early age of marriage for both women and their husbands.

4. Women in consanguineous marriage were less educated, poorer and have more people living in the house.

5. The prevalence of first-degree cousin marriage was 60.2%, while it was 39.8% in the second cousin.

6.2. Recommendations:

One of the wise saying claims "Prevention is the best cure" and it is really so.

Regarding consanguineous marriages, prevention is the best way to confine and humble the expected disorders and problems that might occur as a result of such marriages. In the relation, the following interventions are recommended:

- To ensure access of pre-marriage counseling for future spouses. This can be obligatory in the presence of the Qadi and the counselor.
- To adopt awareness campaign and IEC (information, education and communication) activities on consanguineous marriage as a part of reproductive health programs in the school.
- To introduce the subject of consanguineous marriage in the school curriculum especially at preparatory and secondary level.
- To ensure frequent and consistent support of the decision-makers, legislative council and other influential bodies to the reproductive health program.
- To involve the religious and Muslim leaders in the discouraging of consanguineous marriage, this will fit our culture " cultural appropriateness" and gives the view of active support.
- To introduce pre-conception information and counseling services.

Primary prevention of genetic and congenital disorders depends largely on pre-conception information, screening and counseling. Worldwide, primary health care services need strengthening in this important area. In each country, this calls for identification of an appropriate infrastructure, reinforcement of laboratory diagnostic services, and development of educational materials for women and primary health care workers, and training in basic genetic counseling for primary care workers.