Social Support and Psychological Wellbeing among Parents of Intellectually Challenged Children

Bodla GM1, Saima W2, Ammara T3

Abstract

Objective: To examine the relationship between psychological wellbeing and social support among parents of intellectually challenged children. The study also aimed to examine the psychological wellbeing and social support of the parents of intellectually challenged children.

Method: A sample of 30 parents of intellectually challenged children was chosen. Convenient sampling technique was used to select the sample. Two Questionnaires SPWB (Scale of Psychological Well-being) Social Support Scale (SSS) and Demographic sheet was administered on the present sample.

Result: Correlation and significant difference was found. A significant relationship existed between psychological wellbeing and social support. The study result indicated that social support psychological well being of the male and female parents of intellectually challenged children were affected. Psychological wellbeing of female parents was more affected (66.67 %) as compared to male parents (53.33%). Results also indicated that female parent’s shows poor social support (53.33%) as compared to male parents (46.67%).

Conclusion: These findings encourage to rehabilitation specialists and health care providers to focus on mental health of the caregivers of intellectually challenged children during their rehabilitation.

Key Words: Social Support, Psychological Wellbeing, Intellectually Challenged.

Introduction

Having a child with a disability causes a significant risk to parents’ physical and emotional well-being. concerned for a child with a disability brings multiple challenges to parents, such as extra financial burdens for treating their child’s condition, dealing with the child’s problematic behavior, and social stigma associated with disabilities. The principal purpose of conducting the study was to understand and quantify the psychological wellbeing and social support among parents of intellectually challenged Children. During work with parents of intellectually challenged children many psychological issues are diagnosed. (1) Developmental disability is any disability that is due to problems with growth and development. (2) This term encompasses many congenital medical conditions that have no mental or intellectual-

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components, although it, too, is sometimes used as a euphemism for MR. (2)

Social support is generally defined as the existence or accessibility of people on whom we can rely, people who let us know that they care about, value, and being loved. Support can come from many sources, such as family, friends, pets, organizations, coworkers, etc. Social support is studied across a wide range of disciplines including psychology, Medicine, Sociology, Nursing, Public Health, and Social Work. Social support has been linked to many benefits for both physical and mental health, but social support is not always beneficial. (2,3)
A qualitative study was conducted on parents with intellectual disability about their relationships and social support for their parenting. Most emphasis was placed on the support received from and given to their spouses or partners. Parents mostly involved in seeking help, beginning with their partners, then family members, and, finally, professionals. Implications in light of policy and service provision were discussed.\(^{(4)}\)

Well-being is a dynamic concept that includes subjective, social, and psychological dimensions as well as health-related behaviors. The Ryff Scales of Psychological Well-Being is a theoretically grounded instrument that specifically focuses on measuring multiple facets of psychological well-being. These facts include the following, self-acceptance, the establishment of quality ties to other, a sense of self-sufficiency in thought and action the ability to manage complex environments to suit personal needs and values, the search of meaningful goals and a sense of purpose in life, continued growth and development as a person.\(^{(5)}\)

Caring for a child with a disability brings multiple challenges to parents, such as additional financial burdens for treating their child’s condition, dealing with the child’s problematic behavior, and social stigma associated with disabilities.\(^{(6)}\) Researchers investigated the impact of social support on well-being among parents of children with disabilities. In studies of parents of children with disabilities, higher levels of social support have been associated with levels of negative impact on wellbeing.\(^{(7)}\)

Parental stress has been identified as a major affecter of caregivers’ psychological well-being and a risk increaser for unwillingly placing children with disabilities in the care of others. Recognition of effective means to ease care giving burdens must guide policymaking and will help to provide better and tailored support and intervention for the children.\(^{(8,9)}\) It was found that parental stress and the child’s depressive feelings strongly affected psychological well-being. To protect psychological well-being of caregivers, support services should address depressive feelings among children with intellectual disabilities, facilitate caregiver’s social activity, and reduce stress.\(^{(8)}\)

The role of non-spousal family support may be especially salient among urban-dwelling African Americans given, that many of them are not married and have low incomes. Furthermore, because of the lack of formal supports available in urban communities, the family may be a major source of support parents of children with disabilities can turn to.\(^{(10)}\) In the context of raising a child with a disability, a few studies found that parents with greater social support show more positive parenting behaviors\(^{(9,10)}\) and lower levels of parenting stress\(^{(11)}\). One study showed that the presence of close social relationships helps parents cope with the stress of raising a disabled child.\(^{(12)}\) Support from families can have both positive and negative implications, however. Although families may be an important source of support, close relationships also involve negative interactions\(^{(4)}\).

In a research it is studied that social support having an effect on psychological well-being.\(^{(13)}\) It is seen that the psychological well being of parents and caregivers of the children with intellectually challenged are suffering from stress due to disability of their children and poor social support from family members. Identification of the Psychological Problems of the Parents of Intellectually Challenged and their therapy can be helpful for rehabilitation and improvement of the children.
Methodology
The study was comparative and correlational, two different questionnaires were administered for the collection of data. Study population consisted of Parents of intellectually challenged children. The data was obtained from National Institute of Rehabilitation Medicine through the questionnaires given to the parents of children with mental retardation. The questionnaires were given to 30 parents of already diagnosed cases of mentally retarded children (MR). Demographic details of the sample comprised of age, gender, education, birth order, birth complications and intra-family marriage and out of family marriage. Psychological Wellbeing scale (19) assessed the individual’s well-being. Individuals responded to various statements and indicated on a 6-point how true each statement was of them. Higher scores on each on scale indicate greater well-being on that dimension. Item, 1, 4, 5, 8, 15, 16, 17, 18 purposed for reverse-score. So that higher scores correspond to greater psychological well-being. 9, 11, 13, 14, 16, 18 questions were selected for the Psychological Well-Being Index (PWBI). (19)
In the study social support was assessed with the help of Social Support Scale (2) the term social support was operationally defined as perceived or actual instrument and/or expressive provisions applied by the community, social network and confiding partners.
The social support scale (2) consists of two parts.
Part I measures the social support provided by spouse, children, grandchildren, parents, grandparents, brothers and sisters, relatives, friends, neighbors, co-workers and other groups. The score range for each item was from 1 (none) to 3 (a lot).
Part II of scale consists of twenty items, which measures perceived social support in terms of nurturance (item 3, 10 and 11), attachment (items 1, 4, 8, 13, 15), reassurance of worth (items 14, 17), reliable alliance (items 2, 5, 6, 7, 12 and 16) and social integration (items 18, 19 and 20). Response options were five point Likert scale from 1 (strongly agree) to 5 (strongly disagree). Item number 2, 3, 4, 5, 7, 9, 10, 13, 14, 15, 16, 17, 18, 19, 20 were scored in this way. Scoring is reversed for negative statements for example item number 1, 6, 8, 11 and 12 are scored as 5 (strongly agree) to 1 (strongly disagree).
Data analysis was carried out by using Statistical Package for Social Sciences (SPSS 17). Percentages, correlation and T-test of both groups were computed to find the comparative analysis of both groups.

Results
The study aimed to examine the relationship between psychological wellbeing and social support among parents of children with intellectually challenged. For this purpose SPWB (Ryff’s Psychological Well-being Scale) and SSS (Social Support Scale) was used also. Following tables indicated the results obtained from data analysis. (Table I-VII) Internal consistency and reliability of SPWB (Ryff’s Psychological Well-being Scale) (Table I & II) and SSS (Social Support Scale) was determined using Cronbach’s alpha. Both the scales considered reliable for the present study with alpha reliability of 0.82, and 0.80.

Table I
<table>
<thead>
<tr>
<th>No. of items</th>
<th>Alpha Reliability</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ryff’s Psychological Well-being Scale</td>
<td>18</td>
</tr>
</tbody>
</table>

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Table II: Cronbach’s alpha Reliability analysis PSS (Parental Stress Scale)

<table>
<thead>
<tr>
<th>No. of items</th>
<th>Alpha Reliability</th>
</tr>
</thead>
<tbody>
<tr>
<td>Social Support Scale</td>
<td>29</td>
</tr>
</tbody>
</table>

Table III: Correlation between Psychological Well being based on the scores of SPWB (Ryff’s Psychological Well-being Scale) and Stress based on the scores of Parental Stress Scale (PSS). (N=30)

<table>
<thead>
<tr>
<th>Psychological well-being</th>
<th>p</th>
</tr>
</thead>
<tbody>
<tr>
<td>Social Support</td>
<td>.738</td>
</tr>
</tbody>
</table>

**p<.01**

Table IV: SPWB (Ryff’s Psychological Well-being Scale) between Male and Female parents of intellectually challenged children. (N=30)

<table>
<thead>
<tr>
<th>Groups</th>
<th>M</th>
<th>SD</th>
<th>T</th>
<th>p</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male</td>
<td>62.53</td>
<td>19.72</td>
<td>.389</td>
<td>.382</td>
</tr>
<tr>
<td>Female</td>
<td>60.00</td>
<td>15.67</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Table V: SSS (Social Support Scale) between Male and Female parents of intellectually challenged children. (N=30)

<table>
<thead>
<tr>
<th>Groups</th>
<th>M</th>
<th>SD</th>
<th>T</th>
<th>p</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male</td>
<td>83.67</td>
<td>21.01</td>
<td>0.573</td>
<td>.57</td>
</tr>
<tr>
<td>Female</td>
<td>79.73</td>
<td>16.24</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Table VI: Frequency and Percentages (%) of Psychological Well-being in Male and Female parents of Intellectually Challenged Children. (N=30)

<table>
<thead>
<tr>
<th>Psychological well-being</th>
<th>Male Parents</th>
<th>Female parents</th>
</tr>
</thead>
<tbody>
<tr>
<td>Low</td>
<td>7</td>
<td>46.67%</td>
</tr>
<tr>
<td>High</td>
<td>8</td>
<td>53.33%</td>
</tr>
<tr>
<td>Total</td>
<td>15</td>
<td>100%</td>
</tr>
</tbody>
</table>

Table VII: Frequency and Percentages (%) of social support in Male and Female parents of intellectually challenged Children. (N=30)

<table>
<thead>
<tr>
<th>Social support</th>
<th>Male Parents</th>
<th>Female parents</th>
</tr>
</thead>
<tbody>
<tr>
<td>Low</td>
<td>7</td>
<td>46.67%</td>
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<tr>
<td>Total</td>
<td>15</td>
<td>100%</td>
</tr>
</tbody>
</table>

**Discussion**

The central finding of this study was to assess the relationship between Psychological well-being and Social Support among parents of intellectually challenged children. It usually parents having children with mental retardation needed social support from their family members. Children with developmental disabilities progress in life slowly and gradually. Long lasting care and coping with psychological issues of children affect the mental health of the parents.

Reliability analysis of the instrument used for the present study is carried out and the result indicated that these instruments are reliable measures for the variables that are suppose to measure, for this sample. Therefore the main focus of the study is to investigate the relationship between Psychological well-being and social support among parents of intellectually challenged children. The findings highlight that social support and psychological well being of the parents of intellectually challenged children are affected. Hypothesis of the present study is supported according to which social support having inverse relationship with psychological wellbeing of the parents.

The study was conducted to review social support and psychological well-being relationship. These findings verified the strong associations between supportive social networks, psychological well-being and positive parenting experiences. As part of a semi-
structured interview, mothers were asked about who helped them in their parenting role and how recent and how encouraging this support had been. Adapted psychological questionnaires were presented which measured affect, assertiveness and self-esteem. Significant associations were found between the social support, psychological well-being and positive parenting experiences. (14)

Previous literature clearly points towards the importance of social support for parents with learning difficulties and that this support may be more important factor in parenting success. (15) Presents study results indicated that social support and psychological well being of the male and female parents of intellectually challenged children were affected but there was slight difference in psychological well being and stress among parents of intellectually challenged. Psychological wellbeing of males were 53.33% where as female having 33.3% which showed that male parent’s psychological well being was more affected as compared to females. Result indicated that female parent showed poor social support (53.33%) as compared to male parent (46.67%). (Table VI&VII)

Previous research indicated the high level of marital satisfaction support from husband as expressed by mothers of retarded children is an important facilitator to the family having a child with mental retardation. The elements of such support include encouragement, assistance, feedback and pragmatic help in the completion of tasks important in daily life. In addition, support and help from extended family members like grandparents also act as significant facilitators to coping. (16)

Few parents were able to cope up with the situation of having a mentally retarded child much better than the others depending upon their coping skills and social support. Some families are involved in a series of acute crisis interspersed with chronic sorrow other families accept the reality of disability and love their child for who he or she is. (17) The ability of the parents to cope with the psychological problems is related to the available supporting external resources like support from the family members, relatives, friends, neighbors, and professionals for internal and external coping. (18)

**Limitations**

The current study had a number of limitations. First, the sample we used was limited to OPD patients coming to NIRM. Thus, the findings cannot be generalized to all parents of the country. Second, the measure of support from family members is limited in that we do not know whom the respondent was thinking about when rating positive and negative interactions with family. Children, siblings, and parents all count as family, yet they may be different in their functions of social support. Examining the role of positive and negative social interactions with these different sources of support within the family as well as with neighbors and community members would provide deeper insights into the ways social support affects parental adaptation to children’s disability. Because of the small sample size, we included all parents of children with a disability into one group and did not distinguish between different types of childhood disabilities.

**Conclusion & Recommendations**

This finding encourages health care providers to pay attention to caregivers’ health as well as children’s health. Mental Health education for caregivers to take care of their own health may also be critical. Using more inclusive and sophisticated measures, future
studies should examine the extent to which characteristics of children’s disability (e.g., types of disability, severity, degree of behavioral problems, and age of onset) affect parental adaptation to stress parents of children with a disability.

References


