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Articles

An investigation into social support networks of parents of children with intellectual disability in Bangladesh

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Abstract

Drawing upon the theories of social cognition, social networks and social capital, this article investigates the structure and function of social support networks of parent of children with intellectual disability in Bangladesh, a developing country in South Asia. The primary data for the study were collected using a semi-structured questionnaire. Snowball sampling method was used to reach to participants. It also used psychometric tools such as the Lubben Social Network Scale – Revised (LSNS-R) and the Inventory of Socially Supportive Behaviors (ISSB) to measure the social network and support among the participants. The results show that parents of children with intellectual disability have smaller social network than parents of children without intellectual disabilities. The parents of intellectual disability have relatively a smaller number of close friends and relatives for seeking help, sharing private matters and consulting while making any important decisions. Multiple factors influence their possibility of getting social support. The factors include the number of relatives who see or hear at least once a month; number of relatives to share private matters; availability of relatives for making a decision; number of close friends and the number of close friends who live within five miles of their residence. This article concludes that the social network interventions can be a mechanism for individualized supports and services for the parents.

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1. Introduction

We live in a web of multiple social relations (Pilisuk & Parks, 1986). Several studies indicate that the quality of the relations and quantity of interactions with the people around us impact on various aspects of our life such as physical health (Cohen & Janicki-Deverts, 2009; Cohen, 2004), psychological well-being (Kawachi, & Berkman, 2001; Thoits, 2011), quality of life (Antonucci, 2001; Bergland et al., 2015; Hemmati, & Chung, 2016), marital and relational

adjustment (Graham, et al., 2000; Debbie & Michael, 2008; Julien & Markman, 1991), health behavior (Wright, 2016), health information seeking behavior (Kim, Kreps, & Shin, 2015) and help seeking behavior. Pilisuk and Parks (1986) argued that there are three types of supportive relationships—social, instrumental and emotional. Positive and meaningful relationships contribute to the reduction of various health risks such as diabetes, obesity and hypertension (Yang et al., 2015).

Family members of individuals with intellectual and developmental disabilities experience different forms of stigmas such as self-stigma, courtesy stigma and affiliate stigma (Aldersey et al., 2018; Mitter, Ali, & Scior, 2019; Kelly, McConkey, & Craig, 2019) which negatively affect their psychological wellbeing (Ali et al., 2012). Children with intellectual disability have multiple limitations in both intelligence and adaptive skills affecting their everyday social life (Di Nuovo, et al., 2018). They have considerably lower ability to understand new or complex information and to learn and apply new skills in their daily lives (WHO, 2019). This article considers children with intellectual disability who have developed slower than other children in terms of speaking, walking, and taking care of themselves before 18 years of age. Parents of children with intellectual disability encounter multiple psychological and emotional, social, and economic challenges (Ambikile & Outwater, 2012). Raising a child with intellectual disability is a big source of high-level stress for both mother and father (Hall & Graff, 2011). Several studies show that parenting children with intellectual disability negatively affect quality of life (Misura & Memisevic, 2017; Schmidt, Schmidt, & Brown, 2016; Yuen Shan Leung & Wai Ping Li-Tsang, 2003; Mugno et al., 2007), life satisfaction and marital satisfaction (Hartley et al., 2011; Ki & Joanne, 2014) of the parents. They also suffer from disruption in social life and social relationships.

There is no reliable data on children with disabilities in Bangladesh. However, several newspaper reports indicate that the number of children with intellectual disability has been rising in the country in the past few decades. About 17 children in every 10,000 children in Bangladesh are born with autism (New Age, 2018). According to a survey by the Government of Bangladesh and Unicef, it is estimated that the number of children with some form of disability range between 805,000 to 10 million in the country (Government of Bangladesh & Unicef, 2014). On the other hand, the Bangladesh Population and Housing Census 2011 show that the number of people with disabilities ranged from 1.4 per cent to 9 per cent of the population in the country. Meanwhile, the number of children with disabilities in the country ranged between 1.4 per cent and 17.5 per cent.

The social contexts such as interactions and relationships with other people, memberships of and belonging to social groups shape and influence an individual's social cognition—behavior, beliefs, attitudes, perceptions, expectations, roles and responsibilities (Frith & Blakemore, 2006; Marchant & Frith, 2009; Rote & Smetana, 2011; Shany-Ur & Rankin, 2014; Pennington, 2012). Meanwhile, the social cognition of parents influences their parenting behavior and relationship with their child (Okagaki & Bingham, 2005) and the developmental outcomes of the children (Goodnow, 2002; Holden & Buck, 2002). Parents' personal social network ecology such as their relatives, neighbors, co-workers, and other friends influence their parenting attitudes and behaviors (Cochran & Walker, 2005). Multiple dimensions of social network influence parenting behaviors, coping stress and relational adjustments as important sources of social support. For example, Crockenberg (1988) argued that social support impact parenting behavior, both directly and indirectly, in four ways—reducing various stresses through babysitting, childrearing advice, and financial assistance; buffering stressful events such divorce or marital adjustment, job loss and other difficult time; encouraging to take positive attitude and practices toward life and raising child and emotional support. In general, social support derived from the social network can be instrumental, informational and emotional.

Schilling, Gilchrist and Schinke (1984) argued that there is a strong correlation between coping parental stress at personal level and availability of social support for parents of children with developmental disability. The social supports help them to create a sense that raising a child with the disability and stress caused by it are normal part of their life, which strength their personal coping ability. So, social support could enhance coping skill among the parents. Meanwhile, Lima, Cardoso and Silva (2016) argued that there is a positive association between perception of social support and parental stress among the parents of children with Cerebral Palsy, and this perception is associated with socio-demographic features of the parents. Guralnick, Hammond, Neville and Connor (2008) found that a supportive relationship with friends and extended family members can contribute to reduction of most aspects of parent-related stress among mothers of young children with mild developmental delays.

Understanding the structure and function of social network of the parents of children with intellectual disability could be an effective intervention mechanism for coping parenting stress. For example, Benson (2016) found that strengthening the support networks of the parents can improve psychological functioning both directly and indirectly by enhancing their perceived social support and parenting efficacy. Moreover, the strengthening social relationships could be a source of emotional, informational and instrumental supports; enhance quality of life and

provide a buffer against life stress (Putnam, 2020). However, Monica Östberg and Berit Hagekull (2000) argued that social support does not have buffering effect on parenting stress.

Some studies investigated the parenting issues from a social ecological perspective (Kazak & Wilcox, 1984; Kazak, 1986). According the perspective, an individual's psychological well-being is deep rooted in social environment and social network; psychological well-being and social support are correlated and social network are great source of support. The researchers of this perspective try to understand the mechanism in which the social environment can provide support. For example, Kazak and Wilcox (1984) found that parents with children with intellectual disability experience social isolation from family and friends; their social networks tend to be relatively smaller and denser than the networks of comparison parents. In case of social support, the parents rely more heavily upon multidimensional network contacts than the parents of children without intellectual disability. Stenfert Kroese, Hussein, Clifford and Ahmed (2002) found that there is a strong association between supportive social networks, psychological well-being and positive parenting experiences. Family members and friends are the most important source of the social support (Meral & Cavkaytar, 2012). Johnson, Frenn, Feetham and Simpson (2011) conceptualized the support as family functioning. They argued that there is a strong relationship between parenting stress, support from family functioning and health-related quality of life: physical and mental health of parents of children with intellectual disability.

The issues of children's intellectual disability, their education, raising the children and parenting stress are well documented from psychological perspective (Barone et al., 2019; Carrozzino et al., 2019; Craig et al., 2016; Hutchison et al., 2016; Marchetti, et al., 2018; Martino et al. 2019; Thullen & Bonsall, 2017; Tomai, et al., 2017; Zaidman-Zait et al., 2016). But little is known about the phenomenon from social ecological context. Moreover, very few researches have addressed the issue from the context of Bangladesh. For example, in investigating the dimensions of parenting a child with intellectual disability, most of the previous studies considered either fathers (Davys, Mitchell, & Martin, 2016) or mothers (Al-Yagon & Margalit, 2009; Greer, Grey, & McClean, 2006; Halstead, Griffith, & Hastings, 2017; John, 2012; Kishore, 2011) as unit of analysis. However, the current study considers the parents (both father and mothers) in understanding the phenomena, which is very important from the context of Bangladesh. Because, the social structures, parenting styles and cultures are different than that of the western countries.

Drawing upon theories of social cognition, social networks and Putnam's social capital theory, this research argues that social connectedness matters to the lives of the parents of children with intellectual disability in various ways—source of tangible and intangible assistances. It also argues that the social network intervention can be a mechanism for individualized supports and services for the parents.

2. Methods

2.1 Participants and procedure

The participants of the study consisted of 60 parents (both father and mother) having at least one child with intellectual disability and another 60 parents having child with normal intelligence. The level of intelligence and intellectual disability among the children was not measured by the researcher. Rather, it was the parents who reported whether their children suffered from intellectual disability or not. The non-probability snowball sampling method was used to select the participants. Initially parents of children with intellectual disability were identified using personal contacts. Then the initial respondents were requested to identify the other possible participants in the study. Later, the prospective participants were contacted using phone calls and face-to-face meeting. The aims, objectives and procedures of the study were explained before them. Upon their consent to participate in the study, they were given a set of questionnaires which contained clear instructions in Bangla to fill those up. In this process, 60 questionnaires were distributed among parents of children with intellectual disabilities. Later, the same numbers of questionnaires were distributed among the same number of parents of children without intellectual disability in the study area. Only 39 (response rate 32.5%) parents of children with intellectual disabilities filled the questionnaire during scheduled time period. On the other hand, 47 (response rate 39.16%) parents of children without intellectual disability gave their responses during the period. Finally, 30 responses from each group were included for final analysis. The rest responses were excluded due to incompleteness. Moreover, the responses were excluded if only either father or mother of children with intellectual disability and without intellectual disability did fill the questionnaires.

2.2 Tools and Measures

The primary data for the study were collected using semi-structured questionnaire which contained questions regarding age, gender, marital status, number of children, employment status, socioeconomic status and education level. Meanwhile, psychometric tools such as Lubben Social Network Scale – Revised (LSNS-R), and the Inventory of Socially Supportive Behaviors (ISSB) were used to measure level of social network and presence of social support among the participants.

2.2.1 Lubben Social Network Scale – Revised (LSNS-R)

The structure and function of social support network of the respondents were measured using an improvised Bangla version of Lubben Social Network Scale – Revised (LSNS-R). The LSNS-R is widely used for measuring social engagement including family and friends. The scale consists of 12 items, and scores for each question range from zero to five. The score zero indicate minimal social integration and five indicate substantial social integration. The total score is an equally weighted sum of the 12 questions. The total scores range from 0 to 60 with higher scores indicating a greater level of social support and low risk for isolation. A score less than 20 indicate a person with an extremely limited social network and high risk for isolation. The levels of social network of the respondents were measured by dividing total score in three categories. A score 0-19 indicates extremely limited social network, 20-39 indicate moderate social network and 40- 60 indicate strong social network.

2.2.2 Inventory of Social Supportive Behaviors (ISSB)

A short version of the Inventory of Social Supportive Behaviors (ISSB) was used to assess the amount and frequency of social support the respondents received in various forms during the preceding month. The ISSB is a 19-item and 5-point Likert scale (1=not at all, 2=once or twice, 3=about once a week, 4=several times a week, and 5=about every day). The total social support was measured by summing up the 5-point ratings of each item.

2.3 Data Analysis

Statistical Package for Social Science (SPSS) was used to analyze the data. The analysis consists of variables measuring, extent of the respondent's social network and availability of social support. The responses of the participants were primarily described using descriptive statistics, e.g., frequencies, percentages, means, standard deviation etc. Statistical test such as χ^2 -test and linear regression were performed to determine the significance of associations and relations among the variables.

3. Results

3.1 Demographic features

The parents of children with intellectual disability were on an average 41.35 years old. Most of them were aged between 36-55 years. Their average monthly income was 26516.67 Taka per month. Meanwhile, the average age of parents of children without intellectual disability was 34.21 years. Majority 38 (63.3%) of them were aged between 18-35 years. They earned on an average 27733.33 Taka (Bangladesh currency, 1 USD = 84 Taka) per month. Majority of the respondents from the both groups had bachelor, masters or higher-level degrees from university.

Table 1. Demographic features of the respondents

Respondents	Indicators	Parents of	Parents of
		children without intellectual disability	children with intellectual disability
		n (%)	n (%)
Age	Young Adults (18-35 years)	38 (63.3)	12 (20)
	Middle aged adults (36-55 years)	22 (36.7)	45 (75)
	Older adults (56-more)	0 (0)	3 (5)
Education	Primary School	6 (10.0)	9 (15)
	High school/Secondary level	26 (43.3)	12 (20)
	University Degree or above	28 (46.7)	39 (65)
Income	Low Income (0-30,000)	33 (55.0)	31 (51.7)
	Middle Income (310000-60000)	22 (36.7)	24 (40.0)
	High Income (61,000-90,000)	5 (8.3)	5 (8.3)

3.2 Presence of social network and social support

The mean score in the Lubben Social Network Scale – Revised (LSNS-R) scale for the parents of children with intellectual disability was 25.50, which indicate presence of average social network. Meanwhile, the mean score was 47.45 in the Inventory of Social Supportive Behaviors (ISSB) scale for the parents' group. On the other hand, the parents of children without intellectual disability scored on an average 31.45 in the LSNS-R scale. While, their mean score in ISSB scale was 44.58.

Table 2. Overall social network and social support among parents of children with intellectual disability and Parents of children without intellectual disability

		Minimum	Maximum	Mean	Std. Deviation
Parents of children with intellectual disability	Social network	6.00	51.00	25.5000	11.09512
	Social support	41.00	70.00	47.4500	7.95842
Parents of children without intellectual disability	Social network	15.00	56.00	31.4500	11.13922
	Social support	24.00	68.00	44.5833	9.96994

3.3 Level of social network and social support

Data in the Table 3 show that the social network of the parents of children with intellectual disability ranged between extremely limited (30.0%) to average (61.7%). Most of them informed that they had average (80.0%) social support. Only 20.0% of them had high level of social support.

Meanwhile, most of the parents of children without intellectual disability had average (56.7%) to strong (28.3%) level of social networks. Their social support levels ranged between average (66.7) to high (28.3%).

Table 3. Level of social network and social support among parents of children with intellectual disability and parents of children without intellectual disability had less strong social network

Indicators	Level	Parents of Children with	Parents of Children without
		intellectual disability	intellectual disability
		n (%)	n (%)
Social network	Extremely limited	18 (30.0)	9 (15.0)
	Average	37 (61.7)	34 (56.7)
	Strong	5 (8.3)	17 (28.3)
Social support	Low	0 (0.0)	3 (5.0)
	Average	48 (80.0)	40 (66.7)
	High	12 (20.0)	17 (28.3)

3.4 Structure of social support network of the both respondents' groups

Number of relatives and friends with regular contacts, frequency of communication with them, membership of various social groups are important indicators of presence of socially supportive network of an individual. Data in the Table 4 indicate that parents of children with intellectual disability have relatively a smaller number of close friends and relatives for seeking help, sharing private matters and consulting while making any important decisions. Details are shown in the Table 4.

Table 4. Structure of social support network of the both respondents' groups

	Minimum	Maximum	Mean	Std. Deviation	
Parents of children with intellectual disability	Number of relatives who see or hear at least once a month	1	5	2.62	1.043
	Number of close relatives who would help in need	0	5	1.97	1.119
	Number of friends who see or hear at least once a month	0	5	2.13	1.512
	Number of close friends who would help in need	1	5	2.10	.986
	Number of friends with whom private matters can be shared	0	3	1.27	.756
	Number of close relatives	1	6	4.27	1.858
	Number of social groups belong to	0	3	.95	.502
	Number of close friends live nearby (within 5 miles)	0	3	1.90	.915
Parents of children without intellectual disability	Number of relatives who see or hear at least once a month	1.0	5.0	3.18	1.5567
	Number of close relatives who would help in need	1.0	5.0	2.63	1.1194
	Number of friends whom see or hear at least once a month	1.0	5.0	3.00	1.5183
	Number of friends who would help in need	.0	5.0	2.71	1.3288
	Number of friends with whom private matters can be shared	.0	5.0	2.03	1.0246
	Number of close relatives have	.0	6.0	4.11	1.8420
	Number of social groups belong to	.0	3.0	1.16	.9596
	Number of close friends who live nearby (within 5 miles)	.0	3.0	1.65	.8601

3.5 Factors influencing social support for parents of children with intellectual disability

Multiple factors influence social support of the parents of children with intellectual disability. The factors include are: Number of relatives who see or hear at least once a month ($p=.010$); number of relatives to share private matters ($p=.036$); availability of relatives for making a decision ($p=.001$); Number of close friends (.017) and the number of close friend who live within five miles of their residence ($p = .000$). The details are shown in the Table 5.

Table 6. Sources of social support for parents of children without intellectual disability

	Unstandardized Coefficients		Standardized Coefficients	t	Sig.	95.0% Confidence Interval for B	
	B	Std. Error	Beta			Lower Bound	Upper Bound
(Constant)	25.415	2.637		9.638	.000	20.104	30.726
Number of relatives who see or hear at least once a month	2.628	1.039	.410	2.529	.015	.535	4.720
Number of relatives who can help in need	4.937	2.050	.554	2.409	.020	.808	9.065
Number of friends who see or hear at least once a month	-2.785	.851	-.424	-3.271	.002	-4.500	-1.070
Frequency of being seen or heard by friends	2.492	1.086	.349	2.294	.026	.304	4.681
Number of friends whom can share private matters	-2.816	1.504	-.289	-1.872	.068	-5.845	.214
Number of social groups belong to	2.495	1.261	.240	1.978	.054	-.046	5.035

3.6 Patten of social interaction

We can understand the pattern of social interaction of an individual frequency of communication with his or her relatives, close friends and neighbors. Regarding interaction with relatives in the past one month when the respondents participated in the research, parents of children without disabilities do see their relatives more frequently than the parents of children with intellectual disability every day (Table 7). Of the parents of children with intellectual disability, 35.0% see their relatives two or three times a week, 10.0% at least once a week, 13.3% about once a month and 5.0% never see their relatives. On the other hand, 13.3% parents of children without disabilities see their relatives two or three times a week, 28.3% two or three times a month and 5.0% of them never see their relatives.

But the parents of children with intellectual disability (48.3%) were in more contact with their relatives by telephone, letter, or email than the parents of children without disabilities (35.0%) every day. Among the parents of children with intellectual disability, 18.3% were in contact with their relatives by telephone, letter, or email two or three times a month, 15.0% two or three times a week.

On the contrary, 25.0% parents of children without disabilities were in contact with their relatives by telephone, letter, or email two or three times a month, 21.7% two or three times a week. Parents of children with intellectual disability (40.0%) saw their close friends more than the parents of children without disabilities (15.0%) every day. About 40.0% of the former group saw their close friends two or three times a week, 10.0% at least once a week, 18.3% two or three times a month, once a month. It is noticeable that 13.3% of parents of the group not all see their close friends.

The data the Table 7 indicates that parents of children without disabilities do more interact with their neighbors than the parents of children with intellectual disability. Some 38.3% parents of children without disabilities had chats with their neighbors every day, 35.0% had chats two or three times a week, 6.7% at least once a week, 6.7% two or three times a month, 5.0% once a month, and 8.3% had not chat all.

On the other hand, 31.7% parents of children with intellectual disability had chats with their neighbors every day, 31.7% had chats two or three times a week, 18.3% at least once a week, 10.0% two or three times a month and 3.3% had not chatted all with their neighbors.

Table 7. Pattern of social interaction

		Parents of Children without intellectual disability	Parents of Children with intellectual disability
	Frequency	N (%)	N (%)
In the past month, how often did you see your relatives	Not at all	3 (5.0)	3 (5.0)
	About once a month	3 (5.0)	8 (13.3)
	Two or three times a month	17 (28.3)	4 (6.7)
	At least once a week	0 (0.0)	6 (10.0)
	Two or three times a week	8 (13.3)	21 (35.0)
	Every day	29 (48.3)	18 (30.0)
In the past month, how often were you in contact with your relatives by telephone, letter, or email	Not at all	3 (5.0)	2 (3.3)
	About once a month	3 (5.0)	3 (5.0)
	Two or three times a month	15 (25.0)	11 (18.3)
	At least once a week	5 (8.3)	6 (10.0)
	Two or three times a week	13 (21.7)	9 (15.0)
	Every day	21 (35.0)	29 (48.3)
In the past month, how often did you see your close friends	Not at all	3 (5.0)	8 (13.3)
	About once a month	3 (5.0)	5 (8.3)
	Two or three times a month	14 (23.3)	1 (1.7)
	At least once a week	16 (26.7)	7 (11.7)
	Two or three times a week	15 (25.0)	24 (40.0)
	Every day	9 (15.0)	15 (25.0)
In the past month, how often did you have a chat with a neighbor	Not at all	5 (8.3)	2 (3.3)
	About once a month	3 (5.0)	3 (5.0)
	Two or three times a month	4 (6.7)	6 (10.0)
	At least once a week	4 (6.7)	11 (18.3)
	Two or three times a week	21 (35.0)	19 (31.7)
	Every day	23 (38.3)	19 (31.7)

3.7 Overall satisfaction with social network

Parents of children with intellectual disability are less satisfied overall with their social network than the parents of children without intellectual disability. Some 38.3% parents of children with intellectual disability informed that they are very satisfied with their social network. Of them, 28.3% are fairly satisfied and 25.0% are a little satisfied with their social network. Meanwhile

46.7% parents of children without intellectual disability are very satisfied with their social network. The group's 31.7% parents fairly satisfied and 21.7% a little satisfied.

Parents of children with intellectual disability more often feel lonely than the parents of children with intellectual disability. Among the parents, 10.0% feel lonely all the time, 20.0% most of the time, 21.7% little of the time and 8.3% never feel lonely. Meanwhile, about half (48.3%) parents of children without intellectual disability never feel lonely in their life. The group's none of the parents feel lone all the time. Among the parents, 30.0% feel lone little of the time, 20.0 feel lonely some of the time, and 1.7% feels lonely most of the time.

Table 8. Overall satisfaction with social network

		Parents of Children without intellectual disability	Parents of Children with intellectual disability
Level and frequency		n (%)	n (%)
How satisfied are you overall with your social network?	Very dissatisfied	0 (0.0)	3 (5.0)
	Fairly dissatisfied	0 (0.0)	2 (3.3)
	A little satisfied	13 (21.7)	15 (25.0)
	Fairly Satisfied	19 (31.7)	17 (28.3)
	Very satisfied	28 (46.7)	23 (38.3)
How often do you feel lonely	Lonely all the time	0 (0.0)	6 (10.0)
	Lonely most of the time	1 (1.7)	12 (20.0)
	Lonely some of the time	12 (20.0)	24 (40.0)
	Lonely a little of the time	18 (30.0)	13 (21.7)
	Never lonely	29 (48.3)	5 (8.3)

4. Discussion

The findings of this study are consistent with previous studies in many ways. For example, the results show that parents of children with intellectual disability have smaller social network than parents of children without disabilities. Their social network ranged between extremely limited to average. Moreover, their social support level was average. On the other hand, majority of the parents of children without intellectual disability had strong social network, and their social support level ranged between average to high. The findings of the study are similar to the findings of Anne E. Kazak and Brian L. Wilcox (1984). The smaller social network indicates that parents of children with intellectual disability have lower level of social support and higher risk for isolation. Person with an extremely limited social network are the high risk of isolation, vulnerable to mortality, all-cause hospitalizations, physical health problems, depression and other mental health problems, and they may not adhere to good health practices (Putnam, 2020).

The number of close relatives, close friends, number of groups an individual belong to, and level of engagement in the groups are important indicators of structure of social network of an individual. The closer relatives, close friends an individual have, and the more groups the individual belongs to, there are more possibilities of getting social supports. The findings of the study reveal that parents of children with intellectual disability have relatively a smaller number of close friends and relatives for seeking help, sharing private matters and consulting while making any important decisions. Multiple factors influence their possibility of getting social support. The factors include the number of relatives who see or hear at least once a month; number of relatives to share private matters; availability of relatives for making a decision; number of close friends and the number of close friends who live within five miles of their residence. The results indicate that in most cases the social networks of parents of children with intellectual disability centers around their relatives. Religion, traditional culture and norms might play an influential role in this case. Because, people in the Bangladeshi society tend come forward with instrumental and emotional supports in case any of their relative face any problem at any stage of their life. Having a child with any form of disability is seen from religious aspect. So, people feel that if they provide any form of support to their relatives having a child with disability they will rewarded by the God.

The social network of parents of children tend be relative centric. On the other hand, the social networks of parents of the children with intellectual disability tend to revolve around their friends and colleagues. But they do see their relatives more frequently than those of the parents of children with intellectual disability. The parents of children with intellectual disability were in more contact with their relatives by telephone, letter, or email than the parents of children without disabilities every day. Parents of children without disabilities do more interact with their neighbors than the parents of children with intellectual disability. Parents of children with intellectual disability found to be less satisfied overall with their social network than the parents of children without intellectual disability. Parents of children with intellectual disability more often feel lonely than the parents of children without intellectual disability.

The findings indicate that although parents of children with intellectual disability get more social support from other members of the society than parents of children without disabilities, the quality of support are bellow standard than the parents of children without disabilities get. The frequency of communication with family members, friends and neighbors indicate two things. First, if a person communicates with people more frequently then it means that the person is in a situation, he/she needs help from others. Secondly, the person might have strong social bond, at least he/she has someone to communicate and seek help in need. Our results show that parents of children without disabilities do see their relatives more frequently than the parents

of children with intellectual disability every day which indicate that the latter group has to invest their more times and they find less time to invest in their social lives. Parents of children with intellectual disability are less satisfied overall with their social network than the parents of the normal children. Most often they feel lonely. Their frequency of communication with relatives, close friends and neighbors is relatively lower.

A social network intervention could enhance parental decision-making among the parents of intellectual disability. The decisions include early diagnosis, access to services, and parental stress self-management (Bonis, 2016). Bravo-Benítez, Pérez-Marfil, Román-Alegre and Cruz-Quintana (2019) investigated the grief experiences in family caregivers of children with Autism Spectrum Disorder (ASD). They found that raising a child with disability manifest a feeling of grief among the parents. So, creating support, intervention programs and services should focus on alleviation of the grief to improve their well-being and quality of life. However, parental stress has not only psychological dimension. It has also a financial dimension as extra monetary investment is needed to raise a child with disability. Oh and Lee (2009) found that social support can reduce the burden extra cost related to disabilities. Ha, Greenberg and Seltzer (2011) found that parents of children with a disability remain at high risk of somatic symptoms. Increased supports from family members and relatives could reduce the negative impact of the child's disability on parents' mental health. White and Hastings (2004) found that parents' access to formal professional support and services is not associated with parental well-being, rather informal sources of supports such as extended family and play influential role in parental well-being. So, it can be argued that interventions into social support system would be more useful to enhance personal coping skills among the parents in a country like Bangladesh where institutionalized social services are very poor.

5. Conclusion

Parents of children with intellectual disability have smaller social network than parents of children without intellectual challenges. The social networks of parents of children with intellectual disability tend centers around their relatives. Meanwhile, the social networks of parents of children without intellectual disability focus on their friends and co-workers. Parents of children with intellectual disability have relatively less number of close friends and relatives for seeking help, sharing private matters and consulting while making any important decisions. They do have relatively less interaction with their neighbors, they are less satisfied overall with their social network and they feel more often feel lonely than the parents of children without intellectual disability. Thus, this article concludes that the social network intervention can be a mechanism for individualized supports and services for the parents.

The findings of the study put a significant contribution to the understating of the social support networks of the parents of children with intellectual disability from a social ecological perspective of Bangladesh. The results of the study would be interest of the government for policy making and the NGOs who work to promote support to cope with parental stress among the parents of children with intellectual disability. It is recommended that the government take necessary steps to enhance formal social support networks of the parents.

However, the study has some limitations which include the sample size. The study was conducted among a small number of populations in a small geographical area. Moreover, it has some methodological limitations such as the study relied on self-report data given by the participants. As having a child with intellectual disability as a stigma in the context of Bangladeshi society, the parents may not provide accurate information.

It is recommended that future researches are conducted among larger population which would reveal clearer picture of the phenomenon. Moreover, future studies should adopt in-depth interview method in collecting data to get more accurate insight about the phenomenon.

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