

JOURNEY OF RESILIENCE: MARITAL HARMONY AND COPING STRATEGIES IN FAMILIES WITH INTELLECTUALLY DISABLED CHILDREN

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ABSTRACT

The study delves into the impact of such resilience on the overall well-being and development of the intellectually disabled child. By understanding the complexities of this journey, this research also aims to provide insights that can inform the development of support systems, interventions, and policies that empower and assist these families in their pursuit of resilience, marital harmony, and a high quality of life for all family members. Investigator used descriptive survey method. It gives a snapshot of the state of the art in research and is thus seen as a promising educational strategy. It requires reasoning about issues in education by using tools like interpretation, comparison, measurement, categorization, assessment, and generalization to get to the bottom of things. The focus of the descriptive technique is on the present and the connection between variables, such as circumstances, events, and practices. Investigator used 50 families as a sample. It was found that importance of support systems, coping strategies, and marital harmony in helping these families navigate the challenges they face. Understanding the unique needs of urban and rural families is essential for providing effective support and resources to promote their well-being and resilience.

Keywords: Resilience, Marital Harmony, Coping Strategies, Intellectual Disability, Family Well-being, Support Systems.

1. INTRODUCTION

The journey of resilience among families with intellectually disabled children is a compelling and multifaceted exploration of how these families navigate the unique challenges that arise in the context of their child's disability. This study delves into the intricate dynamics of such families, with a particular focus on the pivotal factors of marital harmony and coping strategies. Intellectual disabilities, which encompass a range of cognitive impairments and developmental challenges, can significantly impact family dynamics and individual well-being. In the face of these challenges, families are often called upon to develop resilience, not only as individuals but also as a unit. Marital harmony and effective coping strategies are central to this process, as they play a fundamental role in maintaining family cohesion, emotional well-being, and the overall quality of life for both parents and their intellectually disabled children. This study seeks to shed light on the intricate journey of resilience in families living with intellectual disability, by examining how parents, as primary caregivers, and the family as a whole, adapt, evolve, and ultimately thrive in the face of adversity. It explores the coping mechanisms and strategies employed by these families to manage the unique demands of raising a child with an intellectual disability while maintaining marital harmony. The study also delves into the impact of such resilience on the overall well-being and development of the intellectually disabled child. By understanding the complexities of this journey, this research aims to provide insights that can inform the development of support systems, interventions, and policies that empower and assist these families in their pursuit of resilience, marital harmony, and a high quality of life for all family members. In doing so, this study contributes to the broader discourse on intellectual disabilities and family dynamics, enriching our knowledge of how love, resilience, and coping strategies are instrumental in shaping the lives of these remarkable families.

1.1 Background of the Study- The background of this study is rooted in the recognition that the journey of resilience in such families is a complex and dynamic process. It involves not only addressing the specific needs of the intellectually disabled child but also maintaining family cohesion, emotional well-being, and marital harmony. The presence of an intellectually disabled child can place considerable stress on the parents' marital relationship. The challenges associated with caregiving, financial strains, and emotional demands can strain the relationship between parents. Therefore, understanding how families maintain or enhance marital harmony in the face of these challenges is crucial. Families must develop coping strategies to adapt to the unique circumstances they face. These strategies include emotional support, problem-solving techniques, accessing external resources, and self-

care practices. Examining the efficacy of these coping mechanisms is central to understanding how resilience is built and maintained. Intellectual disability impacts not only the family but also the development and well-being of the child. The child's ability to thrive and reach their potential is influenced by the family's support and resilience. Investigating the relationship between family resilience and the child's development is an essential aspect of this study. Understanding the challenges faced by families with intellectually disabled children can inform the development of policies and support systems. By gaining insights into effective coping strategies and factors contributing to marital harmony, policymakers can better allocate resources and design interventions that cater to the unique needs of these families. This study takes a holistic approach, recognizing that the well-being of the intellectually disabled child is intertwined with the well-being of the entire family unit. It considers the interplay of individual resilience, family dynamics, and the child's development. This research aims to contribute to the body of knowledge in this field, offering insights that can inform and improve support systems for such families.

2.1 Statement of the Problem- Families with intellectually disabled children undergo a profound and unique journey, one that presents them with a multitude of challenges and demands. Families with intellectually disabled children often experience heightened stress, emotional strain, and disruptions to their daily lives. The complexity of caring for a child with an intellectual disability can strain marital relationships, potentially leading to increased rates of divorce and conflict. In addition, there is a significant need to understand the strategies that families employ to adapt, cope, and build resilience in the face of these challenges. While intellectual disabilities are relatively common, the journey of resilience within these families, specifically regarding marital harmony and coping strategies, remains a topic with limited comprehensive research. There is a paucity of studies that delve into the nuanced dynamics of these families, their experiences, and the factors contributing to marital harmony or discord. The existing literature tends to focus on the child's needs and development, often overlooking the family's resilience and adaptation. The absence of a deep understanding of the journey of resilience in families with intellectually disabled children hinders the development of targeted support systems and interventions. Policies, services, and support mechanisms may not adequately address the unique needs of these families, further exacerbating the challenges they face. The problem extends to the well-being and development of the intellectually disabled child. Family dynamics, including marital harmony and coping strategies, can significantly influence the child's growth, emotional health, and overall development. Thus, the problem has a direct bearing on the child's future prospects and quality of life. Marital disharmony and inadequate coping mechanisms within these families have broader societal implications, including potential financial strains, increased healthcare utilization, and the perpetuation of stigmas associated with intellectual disability. Thus, it is imperative to conduct a comprehensive study that explores the journey of resilience in families with intellectually disabled children, focusing on the preservation of marital harmony and the utilization of effective coping strategies. This research seeks to illuminate the dynamics within these families, contributing to a deeper understanding of their unique experiences and needs. Ultimately, the aim is to inform the development of tailored support systems, interventions, and policies that enhance the well-being of both the family unit and the intellectually disabled child. Thus, the study entitled as "Journey of Resilience: Marital Harmony and Coping Strategies in Families with Intellectually Disabled Children."

1.3. The Objectives of the Study To explore the experiences of parents in living with an intellectually disabled child.

1. To examine the factors that influence the marital harmony in families with intellectually disabled children.
2. To explore the coping mechanisms employed by families to manage the challenges of raising an intellectually disabled child.
3. To identify resilience factors that contribute to the family's ability to maintain well-being.

1.4. The Hypothesis of the Study

H₀₁: There is no significant difference in the experiences of parents living with an intellectually disabled child.

H₀₂: There is no significant relationship between the presence of an intellectually disabled child and the level of marital harmony within families.

H₀₃: There is no significant difference in the coping mechanisms employed by families with intellectually disabled children.

H₀₄: There is no significant relationship between resilience factors and the family's ability to maintain well-being in families with intellectually disabled children.

1.5. Delimitation

- The study was conducted in West Bengal.

- Only intellectual disabled child families were selected.
- The study was conducted in respect of locale and excluding other demographic variables.

2. REVIEW OF RELATED LITERATURE

Grossman, S. E. (2021). Gender differences in marital relations in the shadow of an intellectually disabled mother. Proyecto de investigación. A connection between the length of marriage and the number of children the couple has in relation to relationship satisfaction and intimacy, were in line with the qualitative findings, But the findings of the two had not reinforced additional hypotheses. It is possible that the limitation in sample size was the reason for this. Due to the paucity of research available on the topic investigated, the current study has served as a pioneering study, particularly in Israel. Therefore, the current study could not have covered the entirety of the issues involved and this is the reason for several limitations that emerged in the current study. Part of the limitations were due to the lack of use of sociodemographic variables, such as religion or age.

Singer, G. H., Maul, C., Wang, M., & Ethridge, B. L. (2017). Resilience in families of children with disabilities: Risk and protective factors. In Handbook of special education (pp. 793-810). Routledge. The chapter examines risk and resilience in families of children with three other kinds of disabilities: autism spectrum disorder (ASD), learning disabilities, and behavioral and emotional disorders. As reported by Higgins, Bailey, and Pearce, stress associated with ASD "impacts on most aspects of families' lives, including recreation activities, housekeeping, finances, emotional and mental health of caregivers, marital relationships, physical health of family members, sibling relations and relationships with extended family, friends, and neighbours".

Hartshorne, T. S., Schafer, A., Stratton, K. K., & Nacarato, T. M. (2013). Family resilience relative to children with severe disabilities. Handbook of family resilience, 361-383. Most parents endure the hard work because of the hopes and joys of watching their children grow and change and develop into people who in their turn will make their way in the world. Of course, it does not always turn out the way parents anticipated. Children do not always fulfill their parents' expectations. However, the hope can linger because it should be possible.

Gardner, J., & Harmon, T. (2002). Exploring resilience from a parent's perspective: A qualitative study of six resilient mothers of children with an intellectual disability. Australian Social Work, 55(1), 60-68. This article describes a study of the experiences of six resilient mothers of children with an intellectual disability from a phenomenological perspective, using a qualitative methodology.

It includes a brief review of the literature on resilience, an explanation of how and why the six participants were chosen, and the type of questions they were asked. There is also some exploration of the implications of the findings for social work practice with families of people with an intellectual disability.

2.1. Research Gap

None of the above studies has conducted research on West Bengal perspective related to Journey of Resilience: Marital Harmony and Coping Strategies in Families with Intellectually Disabled Children, therefore researcher showed deep interest to conduct such research.

3. METHODOLOGY OF STUDY

Investigator used descriptive survey method. It gives a snapshot of the state of the art in research and is thus seen as a promising educational strategy. It requires reasoning about issues in education by using tools like interpretation, comparison, measurement, categorization, assessment, and generalization to get to the bottom of things. The focus of the descriptive technique is on the present and the connection between variables, such as circumstances, events, and practices.

2.2. Sample of Study

The sample of study comprised 50 families of children with intellectual disability among them 25 were from urban and rest from rural families of West Bengal.

2.3. Tools

Investigator used self-made questionnaire which were categorized into dimensions of parental experiences, marital harmony, coping mechanism. The total number of items were 120. Each dimension consist of five items.

4. ANALYSIS AND INTERPRETATION OF DATA

H₀₁: There were no significant differences in the experiences of parents living with an intellectually disabled child in respect of locale.

To verify the hypothesis researcher used descriptive statistics and independent sample of t test and the results were given below:

Table 4.1: Showing the Descriptive Statistics of the Experiences of Parents Living with an Intellectually Disabled Child

Sl. No.	Statements	Nature of Responses			Mean	S.D
		Agree	Can't Say	Disagree		
1	My daily life was not affected by stress for upbringing my intellectual disable child.	22	13	15	2.40	.816
2	Raising my intellectually disabled child has led to a deeper understanding of patience and empathy.	22	13	15	2.40	.816
3	Financial burdens are not matter in my family due to the expenses associated with my child's intellectual disability.	18	13	19	2.40	.816
4	I do not experience heightened emotional strain in my role as a parent.	19	13	18	1.88	.833
5	Access to appropriate educational and healthcare services for my child is not a consistent challenge.	23	09	18	2.40	.816

The table 4.1 showing the descriptive statistics of parents' experiences living with an intellectually disabled child. They are the statements related to the experiences of parents living with an intellectually disabled child. For statement 1, the mean response score is 2.40. On average, respondents are somewhat inclined to agree with this statement. The low standard deviation of 0.816 suggests that responses are relatively consistent, with most respondents having similar views on this statement. For second statement, mean score of 2.40, indicating that respondents, on average, are leaning towards agreement. The standard deviation is 0.816, suggesting consistency in responses. For the third statement, mean score of 2.40, respondents, on average, are leaning towards agreement with this statement. The standard deviation is 0.816, indicating relatively consistent responses. Fourth statement the mean response score is 1.88, indicating that respondents, on average, are leaning towards disagreement with this statement. The higher standard deviation of 0.833 suggests some variability in responses, with some parents feeling heightened emotional strain while others do not. For the fifth one the mean score is 2.40, indicating that respondents, on average, lean towards agreement. The standard deviation is 0.816, suggesting consistent responses.

Table 4.2: Showing the Descriptive Statistics of the Experiences of Parents Living with an Intellectually Disabled Child In Respect of Locale

Locale	N	Mean	S.D	Std. Error
Urban	25	12.16	4.017	.803
Rural	25	8.84	3.508	.702

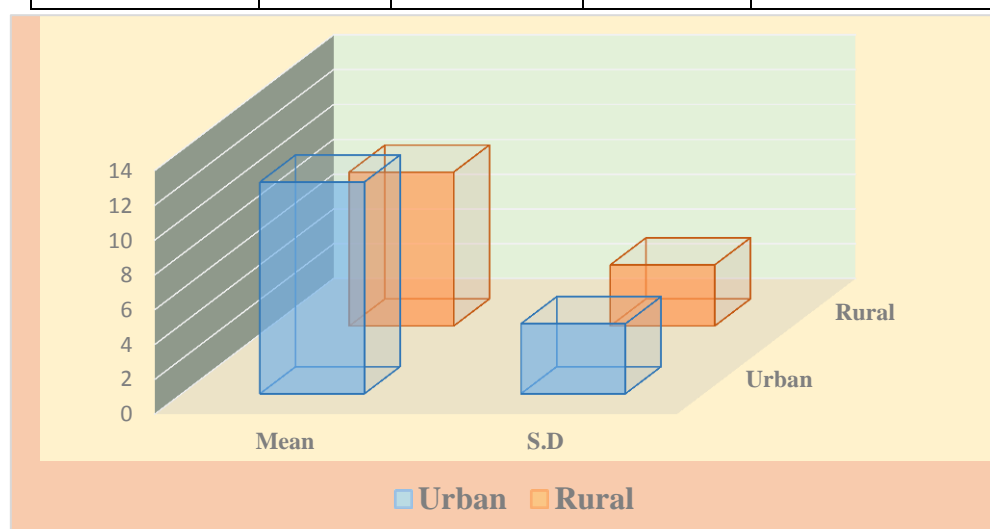


Figure 4.1: Graphical Representation of the Experiences of Parents Living with an Intellectually Disabled Child in Respect of Locale

Table 4.2 and figure 4.1 showed the descriptive statistics of the experiences of parents living with an intellectually disabled child, categorized by the locale (Urban and Rural). The average response score for parents living in urban areas is 12.16. The standard deviation of 4.017 suggested that there were some variabilities in the responses, with some parents reporting significantly higher or lower experiences compared to the mean. The standard error of 0.803 indicated the precision of the sample mean for urban parents. The average response score for parents living in rural areas is 8.84. The standard deviation of 3.508 suggests that there is some variability in the responses among parents in rural areas, similar to the urban group. The standard error of 0.702 indicates the precision of the sample mean for rural parents.

In summary, this table compared the experiences of parents living with intellectually disabled children in urban and rural areas. On average, parents in urban areas have a higher mean score (12.16) compared to parents in rural areas (8.84), suggesting that urban parents may report more positive experiences or better access to resources. However, both groups have some variability in their responses, as indicated by the standard deviations.

Table 4.3: Showing the Independent Sample t test for the Experiences of Parents Living with an Intellectually Disabled Child In Respect of Locale

Dimension	Equality of Variances according to Levene Test			t test for Identical of Average			
Experiences of Parents	Identical Variances Assumed	F-Value	Sig. Value	t-Value	df	Remark	Average Difference
		.433	.514	3.112	47.144	.003	3.320

The table 4.3 provided the results of an independent samples t-test comparing the experiences of parents living with an intellectually disabled child in urban and rural locales. The analysis suggested that the variances in the experiences of parents living with intellectually disabled children in urban and rural locales are not significantly different (as indicated by the non-significant p-value of 0.514). However, the t-test result (t-value of 3.112) indicated that there is a significant difference in the average experiences of parents between the two groups. The average difference is 3.320. Typically, a t-test with a significant difference indicates that there is a statistically significant distinction in the means of the two groups being compared. In this context, it suggested that the experiences of parents living in urban and rural areas with intellectually disabled children differ significantly.

H₀₂: There is no significant difference between the presence of an intellectually disabled child and the marital harmony within families in respect of locale.

To verify the hypothesis researcher used descriptive statistics and independent sample of t test and the results were given below:

Table 4.4: Showing the Descriptive Statistics of the Presence of an Intellectually Disabled Child and the Marital Harmony within Families

Sl. No.	Statements	Nature of Responses			Mean	S.D
		Agree	Can't Say	Disagree		
1	Our marital harmony has been not been affected by the challenges associated with our child's disability.	26	10	14	2.24	.870
2	The presence of our child with an intellectual disability has not significantly altered our marital relationship.	23	09	18	2.10	.909
3	We find it challenging to balance the demands of our child's care with our relationship as a couple.	18	13	19	1.98	.869
4	Our child's intellectual disability has not led to increased conflicts within our marriage.	20	10	20	2.00	.904
5	We make an effort to seek support and counseling to maintain our marital harmony in light of our child's disability.	17	10	23	1.88	.895

The table 4.4 showing the descriptive statistics of or the presence of an intellectually disabled child and its impact on marital harmony within families. For statement 1 the mean response score is 2.24, indicating that, on average,

respondents are leaning towards agreement with this statement. The standard deviation is 0.870, suggesting some variability in the responses, with some parents more strongly agreeing with this statement than others. For the second statement has a mean score of 2.10, suggesting that respondents, on average, lean towards agreement. The standard deviation is 0.909, indicating some variability in the responses, with some parents expressing stronger agreement than others. Third statement depicted the mean response score is 1.98, indicating that, on average, respondents lean towards agreement with this statement. The standard deviation is 0.869, suggesting variability in responses, with some parents finding it more challenging than others to balance care and their relationship. For the fourth one the mean response score is 2.00, indicating that, on average, respondents lean towards agreement with this statement. The standard deviation is 0.904, showing variability in responses, with some parents experiencing more conflicts than others. For the fifth statement, mean score of 1.88, suggesting that, on average, respondents are leaning towards agreement. The standard deviation is 0.895, indicating variability in the responses, with some parents more actively seeking support and counseling than others. Thus, the table provided insights into how parents perceive the impact of having a child with an intellectual disability on their marital harmony. On average, they tend to agree that their marital harmony has been affected, but there is variability in the degree of impact and the efforts made to seek support. The standard deviations indicated the range of responses.

Table 4.5: Showing the Descriptive Statistics of the Presence of an Intellectually Disabled Child and the Marital Harmony within Families in Respect of Locale

Locale	N	Mean	S.D	Std. Error
Urban	25	12.9200	2.88560	.57712
Rural	25	7.4800	2.75560	.55112

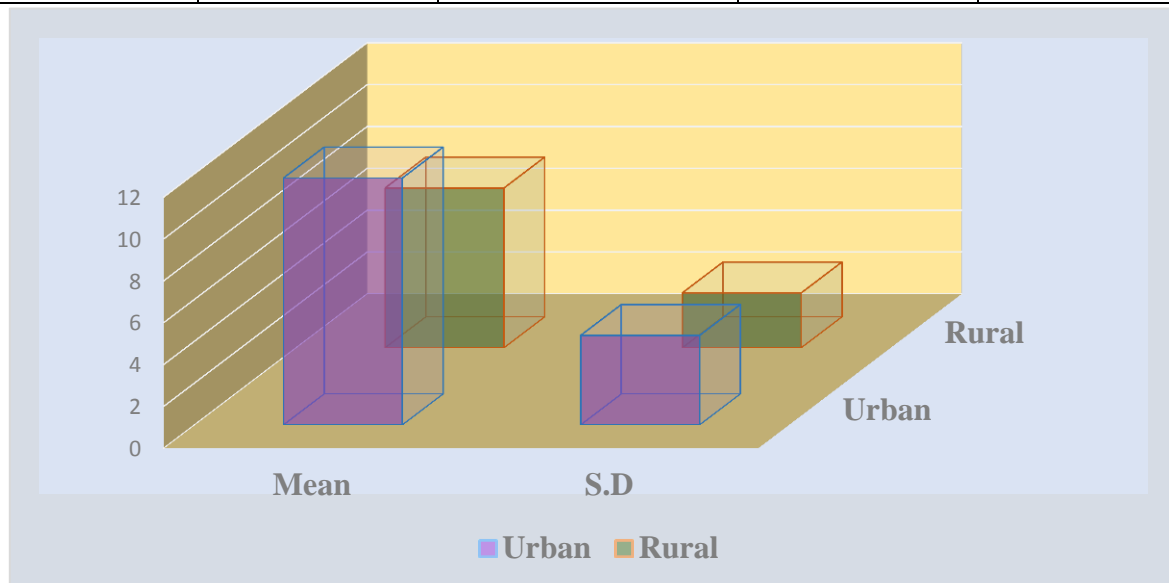


Figure 4.2: Graphical Representation of the Presence of an Intellectually Disabled Child and the Marital Harmony within Families in Respect of Locale

The table 4.5 and figure 4.2 depicted the descriptive statistics of the presence of an intellectually disabled child and its impact on marital harmony within families, categorized by the locale (Urban and Rural). The average response score for families living in urban areas is 12.9200. The standard deviation of 2.88560 suggested that there were some variabilities in the responses, with some families reporting significantly higher or lower experiences compared to the mean. The standard error of 0.57712 indicated the precision of the sample mean for urban families. The average response score for families living in rural areas is 7.4800. The standard deviation of 2.75560 suggested that there is some variability in the responses among families in rural areas, similar to the urban group. The standard error of 0.55112 indicated the precision of the sample mean for rural families. In summary, this table compares the experiences of families with the presence of an intellectually disabled child and its impact on marital harmony in urban and rural areas. On average, families in urban areas have a higher mean score (12.9200) compared to families in rural areas (7.4800), suggesting that urban families may report more positive experiences or better access to resources. However, both groups have some variability in their responses, as indicated by the standard deviations.

Table 4.6: Showing the Independent sample t test for the Presence of an Intellectually Disabled Child and the Marital Harmony within Families in Respect of Locale

Dimension	Equality of Variances according to Levene Test			t test for Identical of Average			
Marital Harmony	Identical Variances Assumed	F-Value	Sig. Value	t-Value	df	Remark	Average Difference
		.044	.834	6.817	47.898	.000	5.44000

The table 4.6 depicted that the variances in the impact of having a child with an intellectual disability on marital harmony within families in urban and rural locales are not significantly different (as indicated by the non-significant p-value of 0.834). However, the t-test result (t-value of 6.817) indicated that there is a significant difference in the average impact on marital harmony between the two groups. The average difference is 5.44000. Typically, a t-test with a significant difference indicates that there is a statistically significant distinction in the means of the two groups being compared. In this context, it suggested that the presence of an intellectually disabled child has a different impact on marital harmony in urban and rural families, with urban families reporting a more significant impact.

H₀₃: There is no significant difference in the coping mechanisms employed by families with intellectually disabled children in respect of locale.

To verify the hypothesis researcher used descriptive statistics and independent sample of t test and the results were given below:

Table 4.7: Showing the Descriptive Statistics of the Coping Mechanisms Employed by Families with Intellectually Disabled Children

Sl. No.	Statements	Nature of Responses			Mean	S.D
		Agree	Can't Say	Disagree		
1	We actively seek emotional support from friends and family to help us cope with the challenges of raising our intellectually disabled child.	16	10	24	1.84	.889
2	We regularly engage in self-care practices to manage stress and maintain our well-being.	17	09	24	1.86	.904
3	We participate in support groups or counseling to connect with others facing similar challenges and share coping strategies.	18	09	23	1.90	.909
4	Maintaining open communication within the family is a key strategy in dealing with the impact of intellectual disability.	21	08	21	2.00	.926
5	We actively educate ourselves about our child's intellectual disability to be better prepared for the journey.	19	10	21	1.96	.903

Table 4.7 depicted the descriptive statistics for coping mechanisms employed by families with intellectually disabled children. For the statement 1, the mean response score is 1.84, indicating that, on average, families are leaning towards agreement with this statement. The standard deviation is 0.889, suggesting some variability in the responses, with some families seeking emotional support more actively than others. For the second statement mean score of 1.86, suggesting that families, on average, lean towards agreement. The standard deviation is 0.904, indicating variability in responses, with some families more actively engaging in self-care practices than others. For the third one, the mean response score is 1.90, indicating that, on average, families lean towards agreement with this statement. The standard deviation is 0.909, suggesting variability in responses, with some families participating in support groups or counseling more than others. For the fourth statement the mean response score is 2.00, indicating that, on average, families strongly agree with this statement. The standard deviation is 0.926, showing some variability in responses, but most families place a strong emphasis on open communication. For the last statement it was found that a mean score of 1.96, suggesting that families, on average, lean towards agreement. The standard deviation is 0.903, indicating variability in responses, with some families actively educating themselves more than others.

Table 4.8: Showing the Descriptive Statistics of the Coping Mechanisms Employed by Families with Intellectually Disabled Children in Respect of Locale

Locale	N	Mean	S.D	Std. Error
Urban	25	12.92	2.886	.577
Rural	25	7.48	2.756	.551

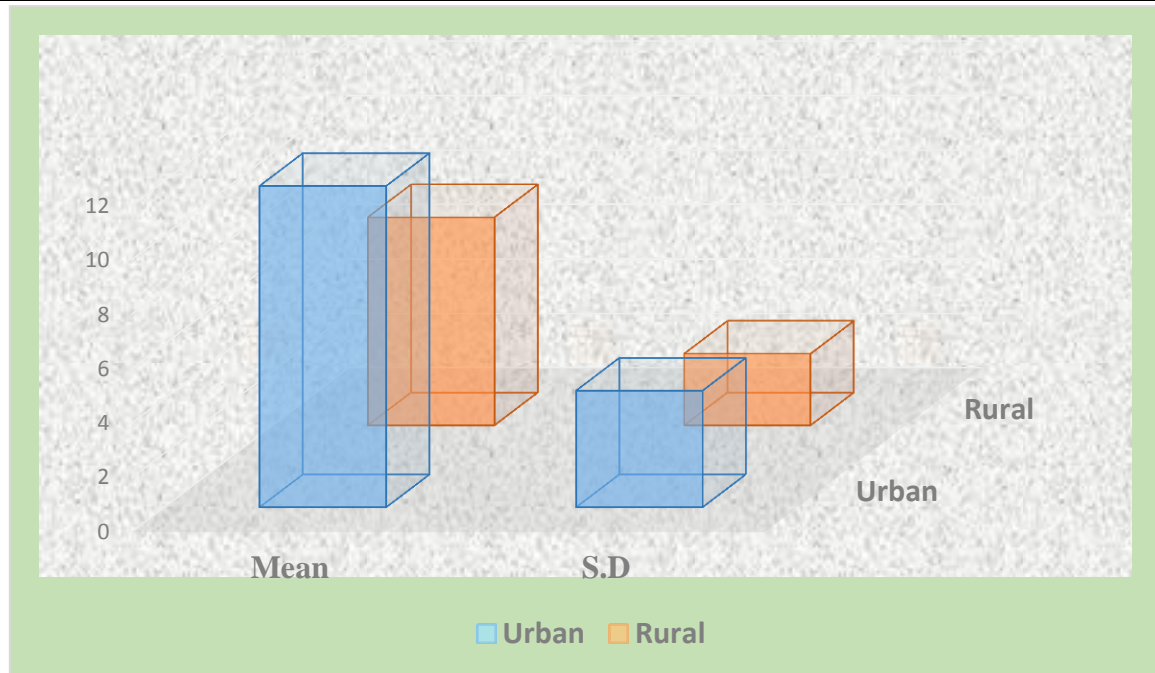


Figure 4.3: Graphical Representation of the Coping Mechanisms Employed by Families with Intellectually Disabled Children in Respect of Locale

The table 4.8 and figure 4.3 descriptive statistics of the coping mechanisms employed by families with intellectually disabled children, categorized by the locale (Urban and Rural). The average response score for families living in urban areas is 12.92. The standard deviation of 2.886 suggests that there is some variability in the responses, with some urban families employing coping mechanisms more actively than others. The standard error of 0.577 indicates the precision of the sample mean for urban families. The average response score for families living in rural areas is 7.48. The standard deviation of 2.756 suggests that there is some variability in the responses among rural families, similar to the urban group. The standard error of 0.551 indicates the precision of the sample mean for rural families. Thus, the table compares the coping mechanisms employed by families with intellectually disabled children in urban and rural areas. On average, families in urban areas have a higher mean score (12.92) compared to families in rural areas (7.48), suggesting that urban families may report employing coping mechanisms more actively or having better access to resources for coping. However, both groups have some variability in their responses, as indicated by the standard deviations.

Table 4.9: Showing the Independent sample t test for the Coping Mechanisms Employed by Families with Intellectually Disabled Children in Respect of Locale

Dimension	Equality of Variances according to Levene Test			t test for Identical of Average			
Coping Mechanism	Identical Variances Assumed	F-Value	Sig. Value	t-Value	df	Remark	Average Difference
		.044	.834	6.817	47.898	.000	5.440

The table 4.9 depicted an independent samples t-test comparing the coping mechanisms employed by families with intellectually disabled children, with respect to the locale (Urban and Rural). The analysis suggests that the variances in the coping mechanisms employed by families with intellectually disabled children in urban and rural locales are not significantly different (as indicated by the non-significant p-value of 0.834). However, the t-test result (t-value of 6.817) indicates that there is a significant difference in the average coping mechanisms between the two groups. The average difference is 5.440. Typically, a t-test with a significant difference indicates that there is a statistically

significant distinction in the means of the two groups being compared. In this context, it suggested that families in urban areas employ coping mechanisms differently from families in rural areas, with urban families employing them more actively.

H₀₄: There is no significant difference between resilience factors and the family's ability to maintain well-being in families with intellectually disabled children in respect of locale.

To verify the hypothesis researcher used descriptive statistics and independent sample of t test and the results were given below:

Table 4.10: Showing the Descriptive Statistics of the Resilience Factors and the Family's Ability to Maintain Well-being in Families with Intellectually Disabled Children

Sl. No.	Statements	Nature of Responses			Mean	S.D
		Agree	Can't Say	Disagree		
1	Strong social support networks, both within and outside the family, play a significant role in our ability to maintain well-being.	19	09	22	1.94	.913
2	Effective problem-solving and adaptability are key factors in our family's ability to navigate the challenges of intellectual disability.	19	10	21	1.96	.903
3	A sense of unity and mutual support within the family positively influences our overall well-being.	19	11	20	1.98	.892
4	Staying informed and educated about our child's intellectual disability empowers us to make informed decision	18	09	23	1.90	.909
5	Resilience is fostered by seeking professional guidance and consultations when necessary.	19	09	22	1.94	.913

From table 4.10 a descriptive statistic for resilience factors and the family's ability to maintain well-being in families with intellectually disabled children was found. For the first statement the mean response score is 1.94, indicating that, on average, families are leaning towards agreement with this statement. The standard deviation is 0.913, suggesting some variability in the responses, with some families strongly agreeing while others may not agree as much. For the second statement a mean score of 1.96, suggesting that families, on average, lean towards agreement. The standard deviation is 0.903, indicating variability in responses, with some families valuing problem-solving and adaptability more than others. For the third statement mean response score is 1.98, indicating that, on average, families strongly agree with this statement. The standard deviation is 0.892, showing some variability but overall strong agreement on the importance of unity and mutual support within the family. For the fourth statement mean response score is 1.90, suggesting that, on average, families lean towards agreement. The standard deviation is 0.909, indicating variability in responses, with some families placing a higher value on staying informed and educated. For the last statement a mean score of 1.94, indicating that, on average, families are leaning towards agreement. The standard deviation is 0.913, suggesting variability in responses, with some families more actively seeking professional guidance than others.

Table 4.11: Showing the Descriptive statistics of the Resilience Factors and the Family's Ability to Maintain Well-being in Families with Intellectually Disabled Children in Respect of Locale

Locale	N	Mean	S.D	Std. Error
Urban	25	11.80	4.282	.856
Rural	25	7.64	2.628	.526

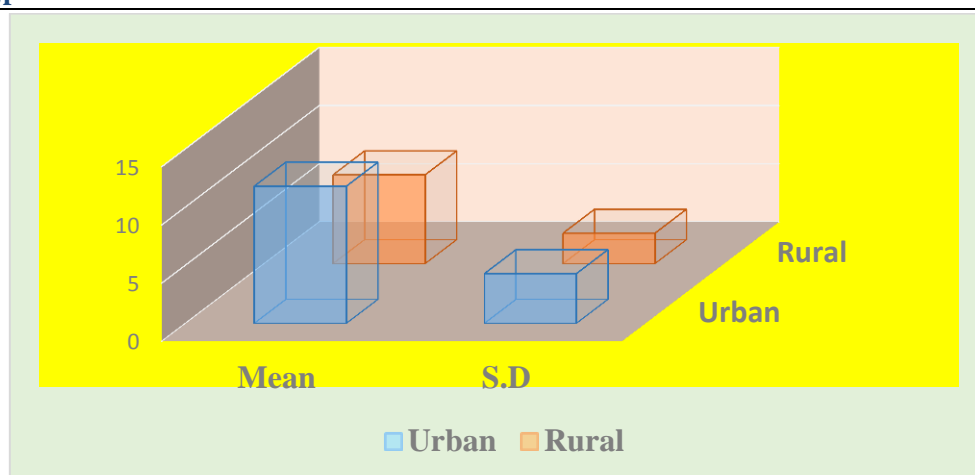


Figure 4.3: Graphical Representation of the Resilience Factors and the Family's Ability to Maintain Well-being in Families with Intellectually Disabled Children

The table 4.11 and figure 4.3 depicted the descriptive statistics of the resilience factors and the family's ability to maintain well-being in families with intellectually disabled children, categorized by the locale (Urban and Rural). The average response score for families living in urban areas is 11.80. standard deviation of 4.282 suggests that there is a substantial amount of variability in the responses within urban families. Some urban families have significantly higher response scores, indicating higher resilience factors, while others have lower scores. The standard error of 0.856 indicated the precision of the sample mean for urban families. The average response score for families living in rural areas is 7.64. The standard deviation of 2.628 suggests that there is variability in the responses among rural families, but the range is narrower compared to urban families. The standard error of 0.526 indicates the precision of the sample mean for rural families. On average, families in urban areas have a higher mean score (11.80) compared to families in rural areas (7.64), suggesting that urban families may report having higher resilience factors and a better ability to maintain well-being. The standard deviations reflect the range of responses and the extent to which families in these locales experience these factors.

Table 4.12: Showing the Independent sample t test for the of the Resilience Factors and the Family's Ability to Maintain Well-being in Families with Intellectually Disabled Children

Dimension	Equality of Variances according to Levene Test			t test for Identical of Average			
	Identical Variances Assumed	F-Value	Sig. Value	t-Value	df	Remark	Average Difference
Resilience Factor		13.332	.001	4.140	48	.000	4.160

The table 4.12 depicted the results of an independent samples t-test comparing the resilience factors and the family's ability to maintain well-being in families with intellectually disabled children, with respect to the locale (Urban and Rural). The analysis suggests that the variances in the resilience factors and the family's ability to maintain well-being in families with intellectually disabled children in urban and rural locales are significantly different (as indicated by the significant p-value of 0.001). This means that the variability in resilience factors is not equal between the two groups. The t-test result (t-value of 4.140) indicates that there is a significant difference in the average resilience factors and the family's ability to maintain well-being between the two groups. The average difference is 4.160. Typically, a t-test with a significant difference indicates that there is a statistically significant distinction in the means of the two groups being compared. In this context, it suggests that families in urban areas have higher reported resilience factors and a better ability to maintain well-being compared to families in rural areas.

5. CONCLUSION

The study on the "Journey of Resilience: Marital Harmony and Coping Strategies in Families with Intellectually Disabled Children" provides valuable insights into the experiences of families raising children with intellectual disabilities.

Resilience Factors and Well-being: Families with intellectually disabled children commonly employ coping strategies to maintain their well-being. Factors such as strong social support networks, problem-solving skills, mutual

support within the family, education about the disability, and seeking professional guidance play a significant role in enhancing resilience.

Marital Harmony and Coping: The presence of an intellectually disabled child can affect marital harmony, but families employ various coping mechanisms to navigate these challenges. Effective communication within the family, seeking support and counseling, and a commitment to maintaining marital harmony are common strategies used by these families.

Locale Differences: The study reveals differences between families living in urban and rural environments in terms of coping mechanisms and resilience factors. Families in urban areas tend to report higher scores for coping mechanisms and resilience factors compared to their rural counterparts. This might be due to differences in access to resources and support systems.

Implications: It is crucial for support services and policymakers to recognize the varying needs of families with intellectually disabled children based on their locale. Urban families may have better access to support and resources, while rural families may need more assistance. Encouraging education and support programs for families can enhance their coping skills and resilience. Recognizing the importance of maintaining strong marital relationships and communication within the family can improve overall family well-being.

In conclusion, the journey of resilience for families raising intellectually disabled children is multifaceted. The study highlights the importance of support systems, coping strategies, and marital harmony in helping these families navigate the challenges they face. Understanding the unique needs of urban and rural families is essential for providing effective support and resources to promote their well-being and resilience.

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