REVIEW OF THE RELATED LITERATURE
CHAPTER III

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Empirical findings of the studies related to the present problem namely study of adjustment, self concept, alienation, and altruism in siblings of handicapped and normal children are being reviewed here.

Adjustment of siblings of handicapped children

Families with a handicapped child create unusual problems of adjustment for the normal children. Gruszka and Margaret (1988) conducted a study in which he compared indices of family functioning and sibling adjustment in two groups of families. One group having 45 families, in which each family had one mentally retarded child and another group was control group of 45 families with all non handicapped children. These two groups of families were matched for age and sex of the sibling. It was observed that normal sibling’s self perceptions of competence revealed an area of increased vulnerability for siblings of a handicapped child in the 4 to 7 year old age group only, as they perceived lower levels of cognitive competence.

Cleveland and Miller (1977) conducted a mail survey to obtain information on the long range influences that a child with a disability would have on family members.
Cleveland and Miller analyzed 90 subjects of adult siblings and focused particularly on their life commitments and career choices. Oldest female siblings reported having significantly more responsibility for the child with a disability. The older siblings also tended to enter the helping professions more often and sought professional counseling for personal problems. The authors also found that the adult siblings perceived the presence of the child with a disability as affecting their social relationships because in the course of almost daily contact with the child, they placed less emphasis on close friendships, marriage & family and community membership.

Two studies one by Lobato, Barbour, Hall & Miller (1987) and other by Mc Hale and Gamble (1989) studied the needs and adjustment of siblings of handicapped children in preschool and school age siblings who were older than their brothers and sisters with disabilities, respectively. Both studies used comparison groups, measures of self concept and measures of psychological stress. The results revealed that for both age groups, the siblings of children with disabilities had poorer adjustment scores as compared to those whose siblings did not have disability.

Sibling’s perceptions of his parent’s attitudes regarding the disabled child can indeed be a powerful influence on his adjustment. In a study, by Coldwell and Guze (1960), of the adjustment of parents and siblings, 32 families were investigated. One half of which had a child
with a disability living in the home and one half living in an institution. They found that generally, the two groups were similar in their adjustment. One area in which the two groups were clearly different was in the sibling's perception of the ideal living arrangement for the child with mental retardation. One group felt that the home was the appropriate place for the child, while the other group felt that the institution was the best living situation. The sibling's responses were consistent with, whether their brother or sister was at home or institutionalized. Holt (1968) also conducted personal interviews with parents in the homes of 201 families having children with mental retardation. He noted that 5% of the parents reported feelings of embarrassment and shame on the part of the children without a disability toward their sibling with mental retardation.

Grossman (1972) found that one of the strongest factor affecting the sibling’s acceptance of the child with a disability is the feelings of the parents, particularly the mother. Graliker et. al. (1962) found that siblings of children without disabilities showed less disturbance in home, school and social activities, when both the parents had the same positive attitude towards their retarded child. Mc Hale et. al. (1984) also noted that siblings are better adjusted when their parents are more accepting of the condition of the disabled child. Lobato (1990) observed that
a marriage with good communication leads to good psychological adjustment for the children. He saw both good communication and closeness, acting as critical buffers between the siblings and the stresses of having a brother or sister with a disability.

The psychological adjustment of siblings of children with mental disabilities has been a primary focus of the research through the last three decades. Many investigators have attempted to measure sibling's psychological distress (e.g. resentment, embarrassment, shame) or deviant behaviours (e.g. antisocial, neurotic) that resulted from having a brother or sister with a disability. The investigations by British researcher Gath (1972, 1973, 1974) of school-age siblings of children, assessed the effect of growing up with a handicapped child. These siblings were rated by parents and teachers for the children's deviant behaviours as measured by the Behavioural Rating Scale given by Rutter, Tizard and Whitman (1970). Gath (1972) compared siblings of children with Cleftpalates, Down Syndrome, or no disability, did not show any differences in behavioural problems, but the subsequent study (Gath 1973, 1974) suggested that sisters of children with Down Syndrome had more behavioural problems. Further, it was also observed that sisters from a large family and more than 3 years older than the child with Down Syndrome, were at greatest risk for behavioural difficulties.
Another British investigator (Carr, 1988), who had been following siblings with Down syndrome matched control siblings, and their families since the children with Down Syndrome were born. Data were collected from the mothers. The siblings who had down syndromed brother or sister had fewer behavioural problems than did the control siblings. Kendell and Calmann (1964) found that siblings suffered emotional deprivation in 38% of the families having handicapped children. Whereas Intosh (1973) and Andrew (1976) reported this to be 22% and 25% respectively. Disturbances reported in the siblings in these studies are like excessive attention seeking behaviour, head banging and school absence etc.

Several authors have found that older female siblings are most adversely affected by the presence of a child with disability. Corroborating to this fact Wilson et. al. (1989) carried out a semi-structured home interview of 24 siblings in the age group of 9-13 years, all of whom had a younger sibling with severe disabilities. He found that caregiving, (teaching, dressing, feeding, baby-sitting or disciplining) to be a regular and significant feature of the sibling's relationship. In this descriptive study, siblings reported that they interacted with the child on a daily basis and were "Conversant" regarding the school activities of the child. In another study Mc Hale and Harrris (1992), in an effort to look at the extent and nature of sibling
interactions rather than their affective quality, found that children (age 8 - 14 yrs) with younger disabled siblings, particularly girls, spent more time in care giving activities. In contrast, children who have siblings without disabilities spent more time performing chores together. In general siblings of mentally retarded children have greater caregiving responsibilities than other children (Mc Hale & Gamble, 1989; Stoneman et. al., 1988; 1991).

In addition to caregiving responsibilities some characteristics of the family also appear to be important factors contributing to sibling’s adjustment. Taylor (1974) has suggested that siblings of disabled children from larger families are generally better adjusted than those from smaller families. It seems natural that in families with two children where one child has a disability, parents are more likely to rest all their hopes and expectations on the other sibling. In larger families however, these hopes and desires can be distributed to several children and thus, prevent the pressure from resting on the one child. Dyson (1989) also found that the greater the number of children in the family, the better the psychological adjustment of the siblings. Mc Hale et. al., (1984) agreed that children from larger families are better adjusted, provided the families have adequate financial resources.

Family socioeconomic status can also affect sibling’s adjustment toward a child with a disability. Mc Hale et. al., (1984) found that siblings from middle class
families generally had a range of positive and negative feelings that were predictable from their parent’s attitudes. Stoneman, Brody, Davis and Crapps, (1988) also found that in families with greater income, siblings participated more in social activities as well as spent more time with friends. They also found that more educated parents placed fewer care giving responsibilities on older siblings and facilitated more social activities.

Mc Hale and Gamble (1987) found that mothers who were more involved in religious activities used more coping strategies for dealing with the stress of having a child with a disability. The religious involvement of the mother was also related to higher self esteem and fewer depression and anxiety symptoms in the siblings.

**Self concept of siblings of handicapped children**

The relationship between siblings is one of the most powerful long-lasting human relationships, characterized by a wide range of emotional responses that can quickly change from warm to hostile and back again (Dunn & Kendrick, 1982). Dimont & Glazer, (1990) hypothesized that siblings of handicapped children would have poorer self concepts and more school difficulties than siblings of non-handicapped children. The study further hypothesized that siblings of mentally retarded children would have poorer self concepts and more school difficulties than siblings of learning disabled children. To test the hypotheses, the study
compared child ratings of self concept on the self concept scale given by Harris (1988) using a sample of 196 siblings dividing into three groups. The groups included 33 siblings of mentally retarded children, 44 siblings of learning disabled children and 119 siblings of nonhandicapped children.

Lobato, Barbour, Hall and Miller (1987) investigated the preschool siblings of both handicapped and non-handicapped children. They were administered a test Pictorial Scale of Perceived Competence and Social Acceptance developed by Harter and Pike (1983). The test included four self report subscales (cognitive competence, physical competence, peer acceptance and maternal acceptance). No differences between the groups were found for any of the four measures. The sibling's feelings of self competence did not appear to be affected by having a brother or sister with a disability. Dyson and Fewell (1989) compared the self concepts of school age 37 siblings who have brothers or sisters with a disability to a control group who had a sibling without a disability. These groups were matched by gender, geographical region, social economic status and age. They also found no differences in the levels of self concept between the two groups and no significant effects for gender, birth order SES or type of disability. Dyson (1989) and Ferrari (1984) also concluded that siblings of handicapped children were comparable to siblings of
nonhandicapped children in measure of self concept, behaviour problems and social competencies Dyson (1989) did find differences along psychological dimensions such as aggression and hyperactivity and great variations within each group of siblings.

In another study by Dyson, Edgar and Crnic (1989) examined 110 families, with the help of questionnaire, one half of whom had a child with a disability and a control group of families with children having no disabilities. In the families having a handicapped child, they found that a combination of factors, such as parental attitude, social support and family psychological environment, predicted the self concept, presence or absence of behaviour problems and social competence of the older siblings. The same combination of factors was predictive only of social competence in the families where there were no children with disabilities. These siblings were also negatively affected (had lower self concepts) by parental stress related to the condition of the sibling with the disability.

Mates's (1982) study of 32 children with a autism found that, as a group, their siblings displayed higher-than average levels of self concept.

Some corroboration of potential deleterious effects on siblings of mentally retarded children can be observed from an extensive study conducted by Grossman (1972). In her exploratory study, she interviewed college students whose siblings had varying degrees of mental retardation. Her data
revealed that about one-half of the group she interviewed had an ignorant attitude towards the feelings of their retarded brother or sister. Siblings also had an apprehension about the fitness of their own children. Grossman also found that some siblings felt guilty for being in good health while, at the same time, they felt neglected because of their parent's preoccupation with the child who had a disability.

Farber (1960) and Jenne (1963), specifically investigated sibling's feelings and the conditions that affected the amount of role tension siblings felt. He defined role tension as subjective feelings of frustration, tension or anxiety. Fowle's (1968) findings confirmed that sibling's role tension was higher when the child with mental disabilities lived at home and that older sisters had greater role tension than did older brothers.

Featherstone (1980) pointed out that in the wake of disability, young children may be concerned about "catching" the disability. Marion (1981) substantiates Featherstone's observations by adding that younger normal siblings may have anxieties that they will become blind or deaf in the future. Sourkes (1987) reported that the fear of taking ill with cancer runs high among siblings. Healthy children of siblings who have congenital heart disease worry that they too, may have holes in their hearts or that they are defective in some manner.
In interviews of 339 families, Breslau, Weitzman and Messenger (1981) found conflicting results. However, they did discern a marked trend towards aggressive behaviour and confused thinking in normal siblings. Seligman (1983) also found that teasing puts many siblings in a double mind. For example parents may demand the sibling to protect the child with a disability, while playmates encourage him to shun the child, thus leading to confused feelings in the sibling (both anger and love) towards the child with a disability.

Moreover to justify the gratification of one’s own needs, normal siblings develop fantasies to explain the retardation. Featherstone (1980) concluded that a handicapped brother or sister evokes powerful fantasies that are sometimes apparent when observing normal siblings at play, perhaps creating a drama of some sort. San Martino and Newman (1974) also speculated that fantasies about lack of control of one’s aggressive feelings provoke potentially distressing indentification with the outbursts of the retarded sibling.

With regard to anger, Bank and Kahn (1982) addressed the issue of this emotion in relation to siblings of emotionally disturbed children. Featherstone (1980) noted that anger may arise in relation to numerous conditions in a home with a disabled child. Siblings of children with disabilities experience greater degrees of anger than other siblings (Seligman 1983).
Alienation of siblings of handicapped children

Normal siblings can become alienated from their own family members, when they are fearful or anxious about discussing their handicapped brother or sister because the subject is felt not to be acceptable for conversation. Featherstone (1980) observed that the presence of a disabled child in the family inhibits communication. She believes that the lack of communication within a family over a child’s disabling condition contributes to the loneliness normal siblings experience. Siblings may sense that certain topics are taboo and that "ugly" feelings are to remain hidden, they are thereby forced into a peculiar kind of loneliness – a sense of detachment from those one typically feels closest to. Trevino (1979) believes that family secrets or implicit rules forbidding the discussion of a problem force siblings to pretend that circumstances are other than they are. For some parents, discussing their disabled child with their nondisabled one is as threatening as a discussion of sex.

Pearlman and Scott (1981) observed that what is communicated to children should be based on a child’s age and ability to comprehend and assimilate. They believe that parents should be aware of certain key words in their communication with children. Mc Hale and Gamble (1987) found that siblings tend to keep their worries and problems to themselves, which makes it difficult for parents of others
to know about their private concerns. Keever (1983) observed that siblings may fear loss of contact with their parents and therefore keep their thoughts and feelings to themselves. Parents report that the family’s isolation grows as the normal sibling matures physically, but not mentally or socially (Lobato, 1990).

Wentworth (1974) reported that nondisabled siblings want their parents to be honest with them above all else. Wentworth believed the nondisabled siblings need to know what caused the disability, how severe the disability is and what the prognosis is. He urges parents to answer enquiries as truthfully as possible according to the sibling’s age and level of comprehension.

Breslau et. al. (1981) found that in comparison with the control group normal siblings were not more psychologically impaired, yet a few subscale differences were observed. Siblings of handicapped children had significantly lower scores on "alienation" than the control group, indicating fewer withdrawal behaviours, yet were higher in "self structure" mental problems there by suggesting somewhat mixed feelings of alienation.

Peer reactions may also alienate siblings from their social group. Siblings may feel isolated from peers and in some cases, may be rejected by their friends (Meyer, Vadasy and Fewell, 1985). Breslau and Prabucki (1987) also found an increased risk of depression symptoms (but not of clinical levels of diagnosed major depression) and social
isolation in their study of siblings of children with congenital disabilities and chronic illness. The normal siblings may feel an increased alienation in the school environment. Michaelis (1980), a special educator, opined that parents should be alert to the possibility that school personnel may treat the normal sibling as if he or she was also handicapped. If school personnel relate to the sibling in such a way, it is quite likely that the students will also do the same, thereby increasing the sibling's sense of difference and alienation.

Altruistic behaviour of siblings of handicapped children

Presence of handicapped sibling does have an effect on altruistic behaviour of normal siblings. This effect is more pronounced depending upon age and sex of normal sibling. Grossman (1972) found a number of positive outcomes. She reported that about one half of college students interviewed described the presence of a child with a disability as a positive, interrogative experience in their family. These siblings showed increased tolerance for differences as well as higher levels of empathy and altruism. Grossman pointed out that the "humanness" of persons with mental retardation, as viewed by siblings, was influenced by the severity of the retardation, the extent to which the mother seemed to accept the child, and the amount of time the sibling played with the brother or sister with a disability.
In another study Zetlin (1986) used participation observation methods to study the sibling relationships of 35 adults with mild retardation. She identified many kinds of sibling relationships based on the affective quality of the relationships, frequency of contact and level of involvement. One of the relationship identified is that of assumed surrogate parental roles by siblings. Begun (1989) also studied the relationships between adolescent and adult females and their sibling with retardation. She found that these relationships were generally described as positive. Zatlow’s (1982) strong emotional feelings about her brother, who was autism, are evident in her writings. She shared a loving relationship with him. Birchenall (1979) quoted a study by Holt (1969) which suggested that some working class girls may become socialized into an auxiliary mother role.

Cleveland and Miller (1977) found in their studies, normal siblings internalize helping norms and turn their career endeavours toward the improvement of humanity or at least toward life goals that require dedication and sacrifice. Basic life goals of nondisabled siblings may be affected when a disabled child is present in the family. A child’s career decision may be shaped by having interacted with and cared for a less-able brother or sister. The continuous act of caring for disabled youngster especially in a loving family, may become internalized to the extent
that it influences career decision in the direction of the helping professions. Cleveland and Miller (1977) also pointed out that female siblings tended to choose helping careers more often than male siblings.

Ills (1979) reported that her subjects exhibited compassion, tolerance and empathy characteristics valued in the helping professions. Indeed, skrtic, Summers, Brotherson and Turnbull (1984) speculated that a sibling’s identification with a disabled brother or sister and a desire to understand his or her problems provide the impetus to choose a career in education or in the human services. However, Israelite (1985), in a small scale study of siblings of hearing impaired children, found that subjects indicated their desire to pursue careers that are unrelated to the human service professions.

In his family of ten siblings, including an autistic brother, Laureys (1984) reported that a brother is an art therapist, a sister is in special education, a brother is in a wood working business, a sister is a graphic artist, a brother is studying business management, a sister is studying language and drama, a sister is studying journalism and literature, a brother is a high school star wrestler who has not yet chosen a career, and he himself is a lobbyist in government. Above study shows there is no adverse affect on career goals.

Based on the literature discussed previously the following hypotheses are framed for the present study.
i) Adjustment (total) and health and home adjustment will be lower for the siblings of handicapped children & the adjustment for other subvariables namely submissiveness, emotionality, hostility will be higher as compared to the siblings of normal children.

ii) Adjustment (total) is expected to be negatively related with alienation (total).

iii) Self concept of the siblings of handicapped children will be lower as compared to the siblings of normal children.

iv) Self concept is expected to be positively related with altruism.

v) Self concept is expected to be negatively related with alienation (total).

vi) Siblings of handicapped children will be higher on alienation (total) and its subvariables - powerlessness, self estrangement, meaninglessness, normlessness, isolation as compared to the siblings of normal children.

vii) Alienation (total) is expected to be negatively related with altruism.

viii) Siblings of handicapped children will be more altruistic as compared to the siblings of normal children.

ix) Altruism is expected to be positively related with adjustment (total).