

## BEHAVIOURAL PROBLEMS AMONG SIBLINGS OF CHILDREN WITH DISABILITIES

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### ABSTRACT

When a child is born with a disability or diagnosed with a disability, the whole family is impacted, especially the primary caretakers, parents and their siblings. The Objective of the present study was to find out behavioural problems among the siblings of children with disabilities. The investigator conducted a normative survey. The sample of the study was siblings of children with disabilities (autism, mental retardation, hearing impairment and visual impairment). The total sample size was 120 and 30 from each of the disabilities from Kerala state. The tool used were Child Behaviour Check List for Ages 6-18 Malayalam (Achenbach.T.M, 2010) and Personal Data sheet. The data were analyzed with the descriptive statistics, t-test and ANOVA statistical techniques. The findings of the study reveals that Type of disability and Boarding place of disabled is a significant factor in sibling's behavioural problem. The result of the study will help families with disabled children, professionals in this field and policy makers in order to overcome this problem.

Key words: Behavioural problems, Siblings and disabilities.

### Introduction

Disability is perceived differently by different people. As time and culture varies tone and tenor of Global disability also changes. When a child is born with a disability or diagnosed with a disability, the whole family is impacted, especially the primary caretakers, parents and their siblings. Fortunately or unfortunately parents of the disabled are compelled to spend more time to look after disabled and naturally the supervision for non-disabled children will be in fewer rates. Majority of family resources, parental attention and services are directed towards disabled. So siblings of disabled experiences lack of parental attention, isolation, lack of knowledge about disability, difficulty coping with their experience and financial difficulty. Resch et al. (2010) argue that families of children with disabilities, regardless of type of

disability, experience higher financial crisis. Children with disabilities generally require more attention because they may have additional needs when compared to non-disabled children (Van Pelt, 2007). Significant loss of parental attention to the non-disabled child may affect sibling relation.

Brotherhood is a position which holds a bit more responsibility since brothers and sisters are playmate first, as they mature they take new roles – friend, companion, enemy, teacher, competitors, role model etc. Siblings of disabled often experience social & emotional isolation and have to cope with many difficult situations like bullying. As a result, siblings of disabled experience feelings of jealousy, lack of self esteem, under academic performance and behavioural and emotional problems.

As a solution to all problems of having disabled, many parents choose institutionalisation for their disabled children and some care their children in their own homes. An investigation found that 50% of parents who institutionalized disabled children did so out of a concern for the detrimental effect the disabled child could have on siblings (Illinois Department of Public Health, 1965). The siblings of home-reared retarded children had considerably more tension than the siblings of institutionalized children (Fowle, 1973). This means that the situation of a sibling with disability in a family creates a lot of problems to the non-disabled siblings and can become a causative factor for behavioural problems.

### **Need and Significance of the study**

According to world Health Organisation's, Report on Disability 15% of the world population is disabled (WHO, 2011). People perceive disability in different ways. When a child is born with a disability or diagnosed with a disability, the whole family is impacted. Increased time and energy required to care the disabled child significantly reduces the time and energy available to other family members, especially non-disabled siblings. Disability impact on family teaches siblings of disabled "life is not fair". As a result of the bitter experiences, siblings experience difficulty in focusing attention, listening, follow directions and aggressiveness etc. If siblings of disabled possess behavioural problems it enhances the gravity of emotional casualty of family members. By understanding the behavioural problems in siblings of disabled, stake holders may take initiative to enhance the mental health and well-being of siblings of disabled.

The present study is a pioneer effort to compare the behavioural problems among siblings of children with different disabilities (Autism, Mental retardation, Visual impairment and Hearing impairment). The study also through light by compare the behavioural problems of siblings of institutionalized and non-institutionalized disabled children. The result of the present study will help families with disabled children, professionals in this field, and policy makers to find out solutions for this problem. Hence it is a felt need to undertake the study on behavioural problems of sibling of children with disability in the family.

### **Statement of the Problem**

A child is the future expectation of a society. Childhood is very important in the development of each child. So, investigations on behavioural problems of school age group is very important.

The situation of disabled in a family creates lots of impact on family members. The aim of the study is to study the behavioural problems of siblings of children with disabilities. Hence the problem can be stated as “Behavioural Problems among Siblings of Children with Disabilities.”

## **Operational Definition of Key terms**

### **Behavioural problems**

Behavioural problems are the behaviours of a child or person which does not match the expectations of persons and society or socially undesirable behaviours.

In this study behavioural problems are categorized into following areas

Anxious/ Depressed, Withdrawn. Somatic complaints, Social problems, Thought problems, Attention problems. Rule breaking behaviour and Aggressive behaviour.

### **Siblings**

One of two or more individuals having one common parent(Merriam-webster)

### **Disability**

A physical, mental, cognitive or developmental condition that impairs, interferes with, or limit a person’s ability to engage in certain tasks or action or participate in typical daily activities and interactions (Merriam-webster.2021).

Present study disabilities considered are Autism, Mental Retardation, Hearing Impairment, and Visual Impairment.

## **Objectives of the Study**

1. To study the behavioural problems of siblings of children with respect to type of disabilities (Autism, Mental retardation, Visual impairment, Hearing impairment).
2. To study the behavioural problems of siblings of children with institutionalised and non-institutionalised children with disabilities.
3. To study the interaction effect of behavioural problems of siblings of children with respect to type and severity (mild, moderate, severe) of disability.

## **Variables in the study**

The variable in the study is the “Behavioural problems” of siblings of children with disabilities. This variable was studied with respect to type of disabilities (Autism, Mental retardation, Visual impairment, Hearing impairment), boarding place of institutionalised and non-institutionalised and severity (mild, moderate, severe) of disability.

## **Hypotheses of the Study**

1. There exists no significant difference in behavioural problems of siblings of children with respect to type of disabilities (Autism, Mental retardation, Visual impairment, Hearing impairment).
2. There exists no significant difference in behavioural problems of siblings of institutionalized and non-institutionalized children with disabilities.
3. There exists no significant difference in behavioural problems of siblings of children with respect to type and severity of disability.

## **Methodology**

Normative survey method was adopted in the study. Population of the study is siblings of children with disabilities in Kerala state.

Sample of the study is 120 siblings of children with disabilities collected from each of the disabilities from Kerala state. Random sampling technique was adopted for the selection of samples.

### Tools for data collection

Child Behaviour Check List for Ages 6-18 (2010, Malayalam) constructed and validated by Achenbach, T.M and Personal Data Sheet were used to collect the data.

### Statistical Techniques

The descriptive statistics, t-test and ANOVA statistical techniques were used for the analysis of data.

### Analysis of data

#### Descriptive statistics

The scores obtained for behavioural problems were subjected to descriptive statistics. The major statistical constants such as mean, median, standard deviation, skewness and kurtosis of the variables were calculated and are shown in table 1.

**Table 1**

*Measures of central tendencies, dispersion, skewness and kurtosis for the behavioural problems of total sample.*

Variable	Mean	Median	Mode	Standard Deviation	Skewness	Kurtosis
Behavioural problems	53.60	52.00	49.00	6.22	0.97	0.58

The table1 shows that mean and standard deviation of the distribution are 53.60 and 6.22 and median and mode are 52 and 49 respectively.

The skewness calculated for the total score is 0.97; it is a positively skewed distribution. It means that the score are massed at the high end of the scale and are spread out more gradually towards the lower end. The kurtosis measures the tail (outlier) characteristics of the distribution. The kurtosis value from the data is 0.58. The kurtosis value is greater than 0.263. So, the distribution is platy kurtic.

The total sample is categorized on the basis of calculated T score from the manual of CBCL as normal Range, borderline - clinical range and clinical range and are shown in table 2.

**Table2**

*Categorisation of total sample based on distribution of scores on T scores of Behavioural problems*

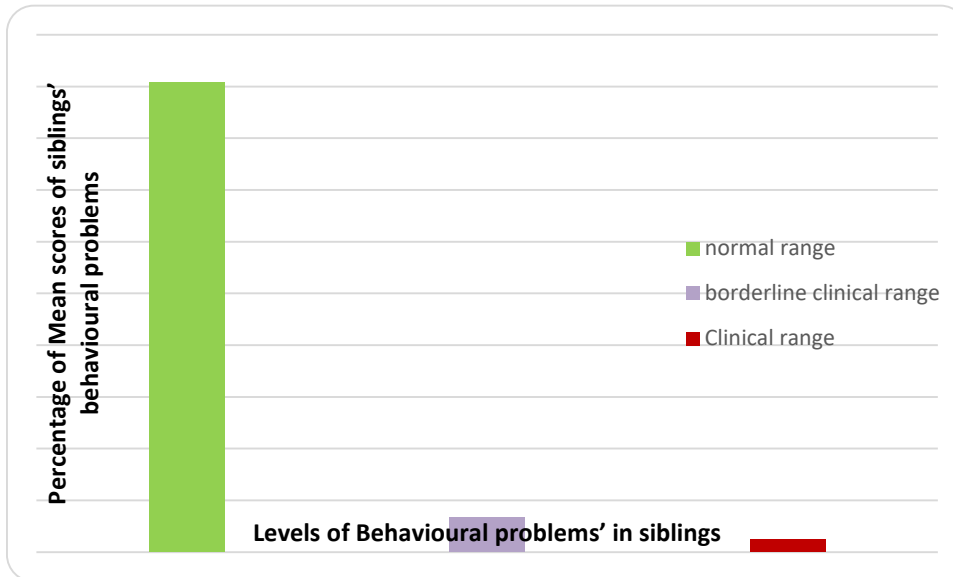
Level of Behavioural problems	Range	N	%
Normal Range	Below 64	109	90.8

Borderline clinical range	64-69	8	6.7
Clinical range	70 and above	3	2.5

From the table2, it is obvious that 2.5% of the total sample of siblings of disabled have clinical level behavioural problems. 6.7% of have the total sample of siblings of disabled borderline clinical range of behavioural problems and 90.8% of the total sample of siblings of disabled have normal range behavioural problems. Thus it can be interpreted that majority of siblings of disabled have normal range of behavioural problems. It reflects that only 9.2% of sibling of disabled under borderline or clinical range of behaviour.

**Figure 1**

*Percentage of siblings' behavioural problems with respect to level of behavioural problems*



The mean and standard deviation for the behavioural problem scores of siblings of disabled children were given in the table 3.

**Table3**

*Mean, Standard deviation and total behavioural problems of siblings of children with respect to type and severity of disability*

Disability	Severity	N	Mean	S D
Autism	Mild	6	57.83	7.68
	Moderate	15	55.87	6.64
	Severe	9	57.56	6.07
	Total	30	56.77	6.52
	Moderate	16	51.25	2.60

Visual Impairment	Severe	14	50.92	4.45
	Total	30	51.10	3.52
Mental Retardation	Mild	9	47.56	2.19
	Moderate	15	51.13	3.66
	Severe	5	53.60	3.36
	Profound	1	51.00	
	Total	30	50.47	3.73
Hearing Impairment	Severe	10	56.60	8.44
	Profound	20	55.80	7.27
	Total	30	56.07	7.54

The table 3 shows that mean and standard deviation of Mild, moderate, severe and profound level of severity among siblings of disabled. The table revealed that siblings of Autistic and hearing impaired have more behavioural problem mean scores than other disabilities.

## Testing the Hypotheses

### Hypothesis 1

There exists no significant difference in behavioural problems of siblings of children with respect to type of disabilities (Autism, Mental retardation, Visual impairment, Hearing impairment).

The data were analysed with the help of ANOVA and the results are given in table 4

**Table 4**

*ANOVA result of behavioural problems of children with respect to type of disability*

Source of Variance	df	SS	MSS	F value	p value
Between group	3	964.90	321.63	10.52**	
Within group	11	3641.36	31.39		0.001
	6				
Total	11	4606.26			
	9				

\*\*p<0.01

From the table 4, it can be seen that the F-value is 10.52, which is significant at 0.01 level. So the null hypothesis is rejected. It indicates that there is significant difference in mean scores of behavioural problems of siblings of disabled with respect to type of disabilities like Autism, Mental retardation, Visual impairment, Hearing impairment. In order to know which group mean scores of behavioural problems is significantly higher than other, the data were further analysed with the help of LSD and the results are given in table 5.

**Table 5**

*Least significant difference (Post hoc test) for pair wise comparison of mean values of behavioural problems of siblings of disabled with respect to type of disability*

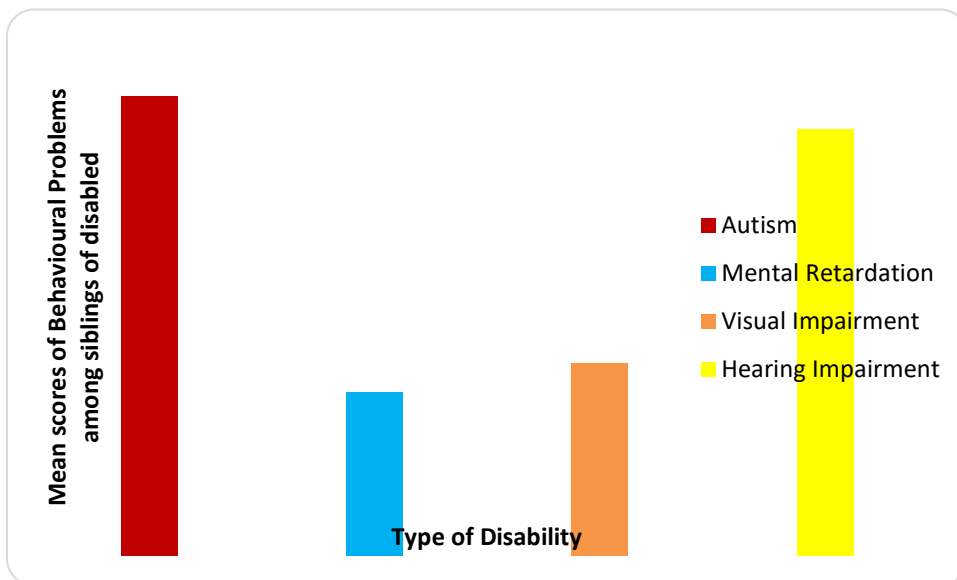
Sl.No	Pairs	Mean value	Mean difference	Level of significance
1	Autism	56.77	5.67**	0.010
	Visual Impairment	51.10		
2	Autism	56.77	6.30**	0.010
	Mental Retardation	50.47		
3	Autism	56.77	0.70	0.061
	Hearing Impairment	56.07		
4	Visual Impairment	51.10	0.63	0.053
	Mental Retardation	50.47		
5	Visual Impairment	51.10	-4.97**	0.010
	Hearing Impairment	56.07		
6	Mental Retardation	50.47	-5.60**	0.010
	Hearing Impairment	56.07		

\*\*p<0.01

The Table 5 reveals that the mean value of pairs of groups ‘Autism-Visual Impairment’, ‘Autism-Mental Retardation’, ‘Visual Impairment-Hearing Impairment’ and ‘Mental Retardation-Hearing Impairment’ are found to be significant at 0.01 level. It reveals that means score of siblings of Autistic and Hearing Impairment are found to have significantly higher Behavioural problems in comparison with mental retardation and visual impairment

**Figure 2**

*Showing Mean scores of behavioural problems among Siblings of disabled with respect to Type of disability.*



### Hypothesis 2

There exists no significant difference in behavioural problems of siblings of institutionalized and non-institutionalized with disability.

The hypothesis was tested by using the t-test. The details are shown in table 6.

**Table 6**

*Mean, Standard deviation and t-value of total behavioural problems of siblings of Institutionalized and Non-institutionalized disabled children.*

Boarding Place of disabled	N	Mean	Standard deviation	t-value	p value
Institutionalized	33	51.76	4.36	-2.43*	0.043
Non-institutionalized	87	54.30	6.69		

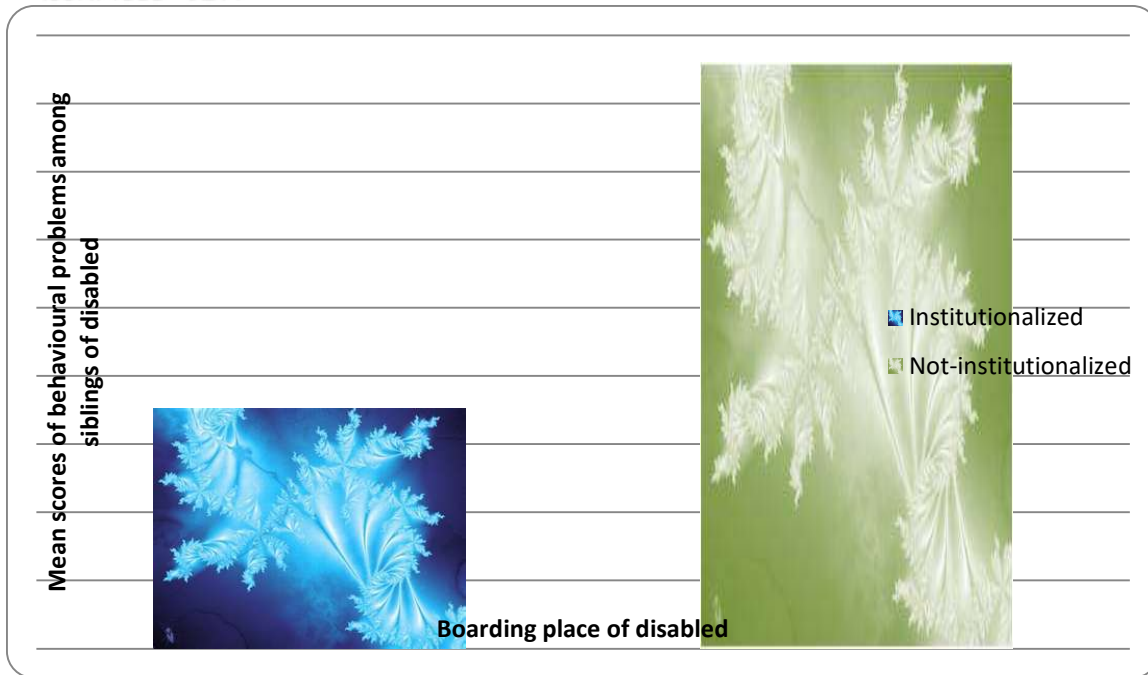
\*p<0.05

From the table 6, the hypothesis was rejected. It indicates that the difference between two group studied is significant. It is inferred that the siblings of Non-institutionalised children have significantly higher behavioural problems when compared with siblings of Institutionalised children.

### Figure 3

*Siblings mean behavioural problem scores with respect to boarding place of disabled.*





**Hypothesis 3**

There exists no significant difference in behavioural problems of siblings of children with respect to type and severity of disability.

The hypothesis was tested by using two way ANOVA test and the values are shown in table 7

**Table 7**

*Summary of two way ANOVA for behavioural problems of siblings of children with disability with respect to type and severity and interaction effect*

Source	Type III sum of Squares	df	Mean Square	F value	p value
Corrected Model	1127.33 <sup>a</sup>	10	112.73	3.53	0.051
Intercept	262640.56	1	262640.56	8.22	0.000
Disability	976.58	3	325.54	10.19**	0.000
Severity	65.19	3	21.73	0.68	0.562
Disability *Severity	92.63	4	23.16	0.73	0.571
Error	3481.47	109	31.94		
Total	349364.00	120			
Corrected Total	4608.80	119			

\*\*p<0.01

The table 7 shows that the type of disability has a significant role in behavioural problems, but severity was not a significant factor in behavioural problems. The combine or interaction effect is not a significant factor in behavioural problems among siblings of children with disabilities.

### Findings of the study

- The study revealed that there is a significant difference in the behavioural problems of siblings with respect to type of disability. Siblings of Autistic and hearing impaired have more behavioural problems score compared to mentally retarded and visually impaired.
- Behavioural problem scores of siblings of institutionalized disabled are lower than non-institutionalised.
- The study revealed that the type of disability has a significant role in behavioural problems and a combined effect of severity and disability is not a significant factor in siblings behavioural problems.

### Discussion

It was found that type of Disability is a significant factor in Behavioural problems of siblings of disabled and severity of disability is not a significant factor in siblings' behavioural problems. Also it was found that less behavioural problems among siblings of institutionalised than non-institutionalised.

According to Caliendo et al.(2020), Healthy siblings of children with disabilities are one of the groups most at risk for consequences in psychological health and well-being. This also compare emotional-behavioral disorders in healthy siblings of children with autism spectrum disorder and in healthy siblings of children with typical development and revealed that siblings of children with Autism spectrum disorders have more emotional and behavioural problems. Shojaee, S., & Alizadeh, H. (2019) provides strong evidence that siblings of children with SI are significantly at a higher risk of psychological problems.

In the case of institutionalised disabled family members' having less stress than non – institutionalised. (Breslau et al., 1981; Darling, 1987; Lavigne & Ryan, 1979). Going through the literature one can find that there are many factors, which causes psychological functioning of siblings was related to family psychological factors such as parental stress, family social support and family functioning. Breslau, Weitzman and Messenger (1981) revealed that the handicapped child's disability level had no significant effect upon the siblings mean scores on psychiatric inventory.

### Implications of the study

The study brings out the extent of behavioural problems in siblings of disabled community since they are a group who are neglected from everybody's view of attention. The findings regarding the behavioural problems of the siblings of disabled can be useful to the social workers, educational professional, psychologists and policy makers to take appropriate strategies to improve the quality of life of siblings of children with disabilities.

The study of institutionalizes disabled considered as a first step in peeping into the family problems of disabled. Institutionalization reduce the behavioural problems in sibling's means there exist behavioural problems due to disabled person's presence in family. For overcoming this appropriate family counselling programmes and rehabilitation programmes for siblings and parents can be provided.

Parents and siblings support groups can be formed and through this may have more access to information about disability, and to share their experience with other people and hearing other people's how to handle various situations,

It will be more functional to create social network which may facilitate healthy psychological adjustment. Existing knowledge about the group helps to create effective remediation action, thus reduce the consequences of disability in siblings and to overcome and minimising their behavioural problems. Even though are not in clinical range but high to smooth functioning of a family and so helpful to reduce through proper guidance and can lead a smooth life in inclusive society with own family members.

### Recommendations

The study reveals that institutionalization of disabled reduces behavioural problem, but it is not the proper way to come over from the problems. The result obtained will rethink all the rehabilitation workers and advocates of inclusive societies to take proper programmes to overcome the difficulties of family members. Meetings and seminars should be conducted to facilitate the inclusion and improve inter personal relationship between family members. Government should take necessary policies for proper empowerment programmes for each disabled group. As an advocate of inclusion, it is not good to promote institutionalisation but can facilitate training programs for family members' and updated knowledge about rehabilitation facilities and may reduce behavioural problems among siblings of disabled.

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