

Perceptions and Problems of other Siblings in a Family Having Mentally Retarded Children

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Abstract: Children as well as adults need a warm affectionate relationship with small circles of intimate associates. In infancy, the relationship and bonding between parent and child are vital to future, normal physical psychological and social development. (Brisbane, 1965; Cruick shank,1963). In siblings a competitive struggle that often develops between siblings for the affection of their parents. In some instances families of mentally retarded child have give up every semblance of normal family organization and life style life literally resolves around the retarded child, and the formal individual personal lives of the other family members are denied and social life is sacrificed. With this, view an attempt was made to study the relations and problems of other siblings in a family having mentally retarded children. A sample of 161 siblings of age group 14- 20yrs randomly selected from 200 families having a child with mental retardation. The data was obtained from RASS and MORE CBR projects in chittoor district of Andhra Pradesh. The sample consists of both male (N=77) and female(N=84) siblings. A designed sibling relations and problem inventory(SR&PI) was designed to assess the relations and the problems that are challenged by other siblings in a family having mentally retarded child. This inventory (SR&PI) comprised of two parts. Part one dealt with relations of siblings and part two about siblings problems. The findings of the study was often attributed to the fact that an enormous degree off responsibility for the care of the child with disability was typically assigned to older sisters. This responsibility for care giving was, in turn, believed to deprived girls of the opportunity to engage in age appropriate activities .on other hand female siblings are forced to have highest relations with their MR sibling than those of male sibling in a family.

Key words: *mentally retarded sibling, normal sibling, Relation ships, disability, perceptions*

I. I.INTRODUCTION:

Companion ship and support between brothers and sisters out lives that between parent and child. This is true of any family. Siblings are the natural support systems which can be strengthened and utilized depending upon the socio cultural up and of the given society. The sibling relationship is likely to last longer than any other relationship in one's lifetime and plays an integral part in the lives of families. Yet, in comparison to the wealth of studies on parent-child relationships, relatively little attention has been devoted to the role of siblings and their impact on one another's development. Siblings are viewed as an integral component of family systems (Brody GH.,1998 Howe N, Ross H, Recchia H .2011.) The arrival of a child with disabilities requires reorientation of the expectations parents once had, and it also requires developing new coping strategies from parents and normal siblings in a family. Overall, the studies are based on the experiences of parents of children with developmental disabilities, but few studies focus on the impact that such experience has on typically developing siblings (Fisman, Wolf, et al. 1996).Every individual who comes to this world has adjusted various situations in life. Siblings of mentally retarded individuals may also need to learn to adjust and adapt to the situation of having a brother /sister who is mentally retarded. Research observations suggested that some siblings may suffer adverse reactions, where as others do not. (Selingman and Darling. 1989; Trevino,1979.). Studies have also indicated that older Female siblings generally are known to more affected as they are expected to share the burden of caring for their mentally retarded brother /sister at the cost of their free time. (Cleveland &Miller,1977; Gath1974,Graliker et al 1962 ;Gross man,1972; Mc Hale et al, 1984). In the presence of their friends they may feel embarrassed especially if their brother /sister behaves in socially un acceptable ways and social adjustments (Cuskelly & Gunn, 2006; Dew, Baladin, & Llewellyn, 2008), altruism, resilience, and acceptance of diversity (Valtolina, 2004) and factors that have a negative impact on the well-being of siblings as stress (Núñez & Rodriguez, 2005; Stoneman, 2005), social isolation by peers and loneliness (Bagenholm &

Gillberg, 1991). Parents may put more pressure on normal sibling to over achieve in order to compensate the under achievement of the mentally retarded child. Studies have also reported that siblings are adversely affected by the presence of handicapped child these effect include greater anxiety, more conflicts with parents and lower sociability (Farber,1960;Fowle,1968; Gross man, 1972).siblings may experience guilt (Sanmartino & new Man1974) anger (Breslau, Witzman & Messenger,1981)have more behavioral problems(Gath,1973) and may have the problems of psychological adjustments(Apley, Barbour& west Macott, 1967;Tew & Lawerance,1973) In presence of brothers/sisters with disability, this special bond can be characterized by positive or negative aspects: in fact, researches addressed the analysis of quality of life in families with disabled children in relation to both **factors** that positively influence the growth of young people with disability and their siblings such as coping strategies (Yeh-Chen, 2000), Findings showed the complexity of the situation of siblings with disabled brothers and sisters in function of the type of disability (Ponce, 2007). For example, Kaminsky and Dewey (2001) found that siblings reported less intimacy, nurturance, and less pro-social behavior toward their brothers or sisters with autism than the siblings of children with Down syndrome and of typically developed children. In addition, as reported by Rodrigue, Geffken and Morgan (1993), siblings of children with Down syndrome showed better adjustment than siblings of children with autism even though both groups reported more psychological maladjustment than the siblings of developmentally typical children.

Because of the special needs of the retarded child parents tend to consider that their mentally retarded child needs them more. However, it is important to understand that every child, weather retarded or non-retarded have their individual needs which parent need to understand and meet. If those need are not met normal siblings may start feeling neglected, left out at times start feeling jealous of their mentally retarded brother or sister. This may, interfere the relationship of between the mentally retarded child and other siblings as also between the parent and other siblings and give rise to behavior or emotional problems in them. Children tend to adjust better if they don't experience feelings of rejection, blame or favoritism by their parents (Opperman, Alant, 2003).However, other studies reveal the negative impact that such experiences can have on families, or variables that jeopardize the adjustment of typically developing siblings.

In India we do not have social security support systems provided by the government which may be available in developed countries hence all the more reason to build on and strengthen the natural support resources. Siblings are considered as natural future guardians of mentally retarded individuals. The earlier the siblings are sensitized to the need of the mentally retarded brother or sister the better it is. Parents can help build up better relationship between their mentally retarded child and siblings by informing them truly about the condition of their mentally retarded brother /sister, encouraging them to play share and care for each other . The aim of this study was to assess the relationship and problems of siblings in families with mental retarded brother/sister.

II. METHODOLOGY

II.1Sample:

A sample of 161 siblings of age group 14-20yrs randomly selected from 200 families having a child with mentally retarded. The data was obtained from RASS and MORE CBR projects in chittoor district of Andhra Pradesh. The sample consists of both male (N=77) and female (N=84) siblings.

II.2 Tools used:

The sibling relations and problem inventory (SR&PI) was designed to assess the relations and the problems that are challenged by other siblings in a family having mentally retarded child. This inventory (SR&PI) comprised of two parts , I and II. Part- I comprised of 12 items related to other sibling's relations with mentally retarded brother /sister. The second parts dealt with problems of the other siblings with retarded child .it consist of 16 items. A pre-test was conducted for applicability. The higher the score the more was the sibling's problems and relations with mentally retarded brother/sister. A split half reliability coefficient was calculated for both parts -I =0.778 and part -II =0791

II.3 Procedure:

The designed siblings relation and problem inventory(SR&PI) was applied to the 161 other siblings having the mentally retarded brother /sister in a family with mild, moderate and severe levels of retardation. An interview method was adopted to procure the detailed information and data from them. Among 161 other siblings, 77 are males and 84 are female siblings

III. RESULTS AND DISCUSSIONS:

Table:III.1

SOCIO DEMOGRAPHIC DATA OF THE STUDY

S.no	Respondents	Group	Number
1	Other siblings	14-16yrs	56
		16-18yrs	84
		18-20yrs	21
2	Gender	Male	77
		Female	84
3	Education	8-10 class	47
		Intermediate	93
		Degree	19
4	Levels of retardation	Mild	70
		Moderato	40
		severe	90
5	Mentally retarded brother/sister	6-8yrs	50
		9-11yrs	40
		12-15yrs	110

The table III.1 above itself is a self explanatory with regarding the age of other siblings, gender, education, levels of mentally retarded sibling and age of the mentally retarded siblings in a family.

Table:III.2

COMPARISON OF MALE AND FEMALE SIBLINGS PROBLEMS IN A FAMILY HAVING MENTALLY RETARDED BROTHER/ SISTER

Gender of the siblings	N	Mean	S.D	T-value
Male	77	20.81	3.68	6.88185**
Female	84	24.58	4.43	

****Significant @ 1% level**

The above table- III.2 result illustrated the male and female sibling’s problems with mentally retarded brother/sister. Out of sample 161 siblings 77 was males and 84 was female’s t-test was employed to ascertain the significance. The mean values of female siblings was relatively higher as compared to the male siblings and the resultant T-value 6.88185** was significant at 0.01level. Hence, it is understood from the present study female siblings in this area are bound or bonded more of cultural traditions and customs, parents impose more responsibilities on female child than male child in a family and accord with super power to the healthy and intelligent male child. The gender superiority is more predominantly noticed in many villages and towns in chittoor district. In the case of families having female siblings with mentally retarded siblings, the situation of female sibling was worse and they were expected to share at times the total burden of the mentally retarded brother/sister at the cost of free time, play recreation like a bonded laborer or voice less prisoners. Studies have also indicated that elder female siblings are most adversely affected by the presence of handicapped child because of additional care and responsibilities (Cleaveland & Miller,1977; Gath,1974; Graliker et al.,1962; Grossman,1972;McHale et al.,1984, Jefferson, 2007). They faced lot of embarrassment within and outside the house in social circles some times, ignorantly some parents put quite unbearable burden and pressure on the normal female children to achieve what was lost for the mentally retarded siblings. Sometimes the parent looked down so much on the female siblings who were the sole custodians to their MRC.

Hence, recent observations revealed that some siblings might be suffering adverse mental pressure to rebel but no chance to realise their societal rights where as others siblings obeyed the commands of elders helplessly (Seligman & Darling,1989;Trevino,1979;). In classic earlier studies (Farber& Ryckman, 1965) in their comparative study revealed the institutionalized a child with retardation, to families who had kept the child lived differed by sibling gender. Older sisters at home families experienced greater role tension than older sisters in placed families. Simeonsson & Bailey (1986) reported that sex of non-disabled brother and sister played a significant part in care taking. Female siblings tend to be more subjected to caretaking behavior than

were the male siblings and thus more prone to psychological maladjustments. Other investigators however, have found that gender and birth order have been implicated most often with older girls, said to be at the greatest risk from adverse consequences (Grossman, 1972;seilingman,1983) . Manor-Binyamin Abu-Ajaj (2012) have shown that brothers and sisters of disabled children are at compatibility problems and have low self-esteem than nondisabled children. Faber (2010) has been demonstrated adaptability problems in brother and sisters of disabled children. These findings were often attributed to the fact that an enormous degree off responsibility for the care of the child with disability was typically assigned to older sisters. This responsibility for care giving was, in turn, believed to deprived girls of the opportunity to engage in age appropriate activities and peer relationships.

Table: III.3
COMPARISON OF MALE AND FEMALE SIBLINGS RELEATIONS IN A FAMILY HAVING MENTALLY RETARDED BROTHER/SISTER

Gender	N	Mean	S.D	T-Value
Male	77	16.13	3.197	7.938**
Female	84	20.19	3.291	

** Significant @1% level

It is under stood from the present study table-III.3 results, the mean values obtained for female sibling was higher than those of male siblings, the obtained t-value is (t=7.938**)was significant at 0.01 level. Hence it is clear that, female siblings in a family have higher relations with mentally retarded brother /sister than the male counter parts, this may be because in Indian culture , female child in a family is asked to perform house hold work and attend the needs and demand of the other family members patiently. So that it would in turn help her to perform her duties and responsibilities well in their in-laws family after her marriage. In the present study, there is no wonder that the female child in a family has the responsibility of care and management of mentally retarded child on her shoulders and it provided them to have better interactions and relations with their mentally retarded siblings without crossing the gate. Numerous consistent studies have shown that disabled sibling can be followed by empathy and sensitivity of family towards each other, independence, altruism and compassion, better understanding of individual differences, high confidence, high responsibility, more patience, leadership skills and more coherent of family (Pitten Cate & Loots ,2000; Dyson & Edgard,1996 ; Johensy, 2000)..on the other hand majority male siblings will be away from home and have little involvement in care and management of MR sibling and the other thing was ,that they did not accept the responsibility of their MR sibling. Thus , it provided to have low intimacy, interaction and relations with their MR brother /sister. These results are similar to Orsmond & Seltzer (2000) found that healthy brother has more limited relations with mental retarded sister.Hence, it was understood from present study, female siblings are forced to have highest relations with their MR sibling than those of male sibling in a family. But ,very few of the researchers reveled the positive effects that have been observed and included the increased compassion, tolerance , appreciation for ones own good health, inspiration for personal growth, more acceptance of individual differences, awareness of the consequences of prejudice, knowledge about handicapping conditions and certainly about one's future and carrier goals and increased social competence (Cleveland &Miller,1977;Itzkowitz, 1990;Meyer,1993;Wilson,Blacher &Baker,1989).

IV. CONCLUSION:

Siblings do get affected in many ways because of having a mentally retarded brother /sister. The affect may generate number of special needs in siblings. In present study, findings were often attributed to the facts that an enormous degree for the care of the child with disability was typically assigned to female siblings. This responsibility for care giving was in turn, believed to deprive girls of opportunity to engage in age appropriate activities and peer relationships. On the other hand female siblings have good interactions with MR siblings, though they were not worded or phrased critically due to it's many remote and back word areas but the area was not inert in sensitivities, moral support, values, relationships and responsibilities as perceived by investigator over 5year of study and observation. In our country like India where there is dearth of formal support services, intervention efforts emphasis on may lay emphasis on strengthening the informal sources of support. Siblings are the great natural to the family. Intervention programmes should place a major emphasis in building such natural support systems which would help the family to function positively

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