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A SURVEY OF SIBLING ATTITUDES TOWARD THE RETARDED CHILD

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ABSTRACT

The attitudes of siblings of the retarded child are a concern to the parents of a family with a retardate. Despite the need for information on the subject, limited research has been directed to this query in the minds of parents of retarded children. This survey attempted to evaluate the feelings and attitudes of the siblings toward their retardate and toward the family problem itself.

An explanatory letter with questionnaires was mailed to 535 families with retardates in the Houston area. The questionnaires covered phases of possible tension or resentment toward the handicapped child, and were to be completed privately by the children in each family. The response was 35 $\frac{1}{2}$ % including those families that could not participate because of lack of siblings or immaturity of siblings.

The sample used consisted of 195 young people with a retarded brother or sister. The normal siblings ranged in age from eight through thirty-six years, with one to nine siblings per family. The retardates ranged from one year through thirty-five years of age.

The great breadth of the sample made it possible to analyze groups composed of preteens, teens, adults, males, females, in addition to sibs younger than the retardates, and sibs with the retardate in an institution. The study also attempted to determine if degree of retardation had any effect upon the normal sibling's feelings.

Despite the numerous approaches to the subject, the results were basically similar. Most normal brothers and sisters of retarded children have a genuine affection, an open acceptance, and a real concern for their

limited sibling. Furthermore, the majority were not uncomfortable about the family problem and did not feel that it threatened their interpersonal relationships with peers.

There were differences among the groups, however. The general pattern of acceptance seemed to parallel the maturation of the individual. The degree of acceptance improved from the preteen to the adult group. The male sib appeared to be a little more critical of the effects of the problem -- a reaction probably due to his cultural role and an involvement that did not equal that of a sister. The younger sibs demonstrated more awareness of public reactions to oddities of appearance, but they did not show any unusual difficulties in their adjustment. In some areas, their percentage of favorable reactions was higher than the total sample. The acceptance of a child with a retardate in an institution appeared to be slightly lower than those with the limited child at home. This difference maybe a result of the fact that some of these children have not had the opportunity to adjust to the problem on a day to day basis.

The minor differences that existed under these special circumstances, however, were not as significant as the similarities of the groups and the general response of love and acceptance for the handicapped child. These young people felt that retardation was not an overwhelming tragedy and they had learned to take the situation very much in stride.

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CHAPTER I

THE PROBLEM

Introduction

During the past generation, the family with a retardate has brought the retarded child out of the dark hiding places where formerly he was confined, and introduced him to the public and to the community life. As a result, society's attitude has gradually altered. Educators, sociologists, and psychologists have made outstanding efforts to evaluate his potentials, to understand his needs, and to assist in his adjustment. In a like manner, his parents have been scrutinized, and subsequently given a great deal of assistance with their special problems. However, despite speculation on the part of professionals and parents, the relationship of the retarded child to his siblings has not been as carefully documented.

Statement of the Problem

The purpose of this study was to objectively evaluate the feelings and attitudes of siblings toward the retardate, and to attempt an evaluation of the normal child's adjustment to this family problem.

Importance of the Study

One of the major concerns of parents of a retarded child, when planning his future, is the possible effects his life has upon the other normal siblings (Caldwell and Guze, 1960). Most parents are aware of their responsibility to all members of the family and are desirous of creating, in the home, an atmosphere for the development and growth of

all of the children. When assisting in the future planning for the retardate, friends, relatives, and professional people, as well, are prone to emphasize possible detrimental effects upon the siblings if the child remains as a member of the family unit. These assumptions seem to be based on shrewd guesses rather than research and accumulated data. To make such assumptions without valid information is a disservice to the family and every member of the family.

Furthermore, because of the lack of institutional facilities, limited family funds, and local educational opportunities, an increased percentage of the retarded members of the population explosion are retained in the family environment and endowed with lives geared to their needs in the framework of everyday society. But the question in the parents' minds as to the well-being of all the children remains unanswered or neglected. This study was an attempt to investigate attitudes and feelings of the normal children in the family and to give some insight into their concept of the family problem.

Definition of Terms Used

Retardate. The retardate of this study included all children or adults who had a mental capacity, regardless of cause, that was inadequate to function in a normal public school classroom. In addition, these children were acknowledged by their parents as having some limitations in their mental abilities.

CHAPTER II

REVIEW OF THE LITERATURE

Despite the fact that many clinicians have formulated personal opinions from their counseling of parents and families of retardates, very little objective research has been done relating to the feelings and attitudes of siblings of the retarded child.

Farber (1959) in a study of the effects of the severely retarded child upon family integration presented conclusions concerning sibling attitudes. Farber studied 240 families employing open end questions in interview with the mothers. He evaluated the role tension of the normal siblings by the mothers' description of the children. Farber drew the following conclusions:

1. Sex of the child and social status of the family had little influence on the adjustment of the normal siblings.
2. The higher degree of dependence of the retarded child the more adverse was the effect on the adjustment of the normal siblings.
3. When the retarded child was young, the relationship with other children of the same age tended to be on an equalitarian or playmate basis.
4. Among older siblings, especially sisters, the normal child tended to assume a disproportionate amount of the responsibility for the care of the retardate, and to develop a tense role relationship with the mother. Consequently, sisters of a retarded child in an institution had a better home adjustment.

5. Brothers of a retarded sibling at home indicated fewer signs of maladjustment than did brothers whose retarded sibling was in an institution.

Farber concluded that the sex difference in adjustment patterns resulted from the difference in family roles. With the retarded child at home, the daughter was expected to assume a surrogate role as an aide to the mother, while the son was expected to stay out of the way and give as little trouble as possible. With the retarded child institutionalized, the daughter would be relieved of her responsibilities while new demands as to performance and expectations now would be made of the son.

In an interview study with 21 teenagers, Graliker, Fishler, and Koch (1962) found "the acceptance of the mentally retarded sibling as one of the family as universal." Their results suggested that the teenagers, on the whole, led normal lives with adequate social outlets and positive relationships with their peers. In addition, the young peoples' relationships within the home were good, and the presence of a young retarded child in the home did not seem to have an adverse effect upon the teenage siblings. The researchers concluded that "an appreciation for and understanding of the mentally retarded child can best develop by exposure of both the problem itself and the attitudes instilled by the parents during the teenager's formative years."

The retarded children in the study were all under the age of six years and lived at home except two, who had been living away from home less than a year. Concurrent with the study, the family was assisted in adjustment to the problem by the cooperative efforts of a social worker, psychologists, pediatrician, and public health nurse. This professional

aid was evaluated as a worthwhile contribution to the adjustment of the young people.

Unable to substantiate Farber's study, the investigators suggested that the difference in results may be explained partially by the fact that the teenagers themselves evaluated personal tension in contrast to Farber's use of the mother's rating of tension in the normal child.

In nine months of group counseling with ten teenage siblings, Schreiber and Feeley (1965) found that although young people's attitudes were not always consistent, "it was not the degree or kind of retardation in his sibling which seemed to affect the adolescent's life or happiness as much as the way he felt about himself and his retarded brother or sister, and the way in which he learned to live with the fact of having a retarded sibling."

The two counselors concluded that the primary requirement of the normal child is educational, in order that they can cope with the realities of their particular family problem. "In some families where the parents have dealt with the situation constructively, such young people have developed greater maturity, tolerance, patience, and responsibility than is common among children of their age."

Caldwell and Guze (1960) employed extensive research methods in their study of the adjustment of siblings to the institutionalized and non-institutionalized retarded child. Thirty-two families were involved in the study and the children were matched as to age, sex, position in the family and degree of retardation. Family characteristics were matched as to number of children, socio-economic status, and I.Q. level of the siblings. The investigators used the Children's Manifest

Anxiety Scale and a brief vocabulary test followed by a lengthy structured interview. The interview was conducted with open end questions and directed to an understanding of the sibling's adjustment to the situation rather than the personal adjustment of the sibling. Contrary to what was expected, the siblings that had a child in an institution showed a slightly greater number of symptoms of anxiety, but the difference was not large enough to be statistically reliable. The investigators found the two groups to be more alike than different.

Most significant to Caldwell and Guze was the fact that both groups mirrored the parental attitude toward institutionalization. "This finding suggests that adolescents and pre-adolescents who have had the experience of a retarded child in the family are generally adaptable and that they can mold their value systems ...to conform to the family status quo." They stated that the type of living arrangement made for the retarded sibling is not as crucial a factor in the adjustment of the normal children as the consensus of parental opinion.

Maria Egg (1964) concluded from her experience with retardates that the attitude of the brothers and sisters toward the handicapped child was greatly influenced by the attitude of the parents. "If the parents have really accepted the infirm child with all his limitations, the brothers and sisters are more likely to accept him." She stated that if the parents were not tense about the situation that the sibs also would be able to accept the condition in a most natural fashion. She added, "We cannot shield the healthy siblings from their fate; they must take this upon themselves, and they will grow and mature with it and through it."

According to Egg, the children's adjustment was greatly affected by the position of the handicapped child in the family. If the child was younger, adjustment to the situation was much simpler. He was the baby and everyone more readily accepted his limitations. But if the handicapped child was older, it was more difficult for the other children to develop a good relationship with him. "The most difficult time comes when the normal child gradually "by-passes" the handicapped child -- perhaps not so much in age and size as skills, ability to think and general mental maturity." At this time, the normal child would have difficulty accepting the retardate's possible social inadequacies and the inequality of demands and expectations expressed by the parents.

Nevertheless, Dr. Egg concluded that as the teenager developed his own judgment, the parents will "find it beautiful to watch their maturing children lovingly assume responsibility for a retarded brother or sister. In well-adjusted families, this is not the exception; happily, it is the rule."

Limitations of Previous Studies

Farber has presented the largest sample of families studied in his research of the family under the stress of retardation. However, the validity of his remarks concerning sibling reactions and sibling tension was questioned because his conclusions were predicated upon the opinion of the mother. The other studies cited sought the active participation of the normal child himself, thereby eliminated the criticism leveled at Farber. These studies, however, are also limited by the number involved in the sample. Nevertheless, Caldwell and Guze have made a valuable contribution with their very selective sample and the variety of measures utilized in

their research.

This current study attempted to augment present information relative to sibling reactions by increasing the sample and by analyzing an evaluation of the situation made by the young people themselves.

CHAPTER III

THE COLLECTION OF THE DATA

Group Studied

The young people in the sample were brothers and sisters of retardates in the Houston area. The families involved were on the mailing lists of the Houston Association for Retarded Children at some time from 1962 through 1966. Because of the mobility of our modern society, the old lists were updated with the latest Southwestern Bell Telephone directory. Since the membership lists of the society also included the names of professional people and interested friends, every attempt was made to eliminate this group from the mailing.

There were 535 families in the Houston area that were contacted by explanatory letter and questionnaires. There was a $35\frac{1}{2}$ percent response. This percentage included those who acknowledged receipt of the letter but who were unable to participate because there were no siblings or the siblings were too immature. The interest expressed by young parents left little doubt as to the need for such research.

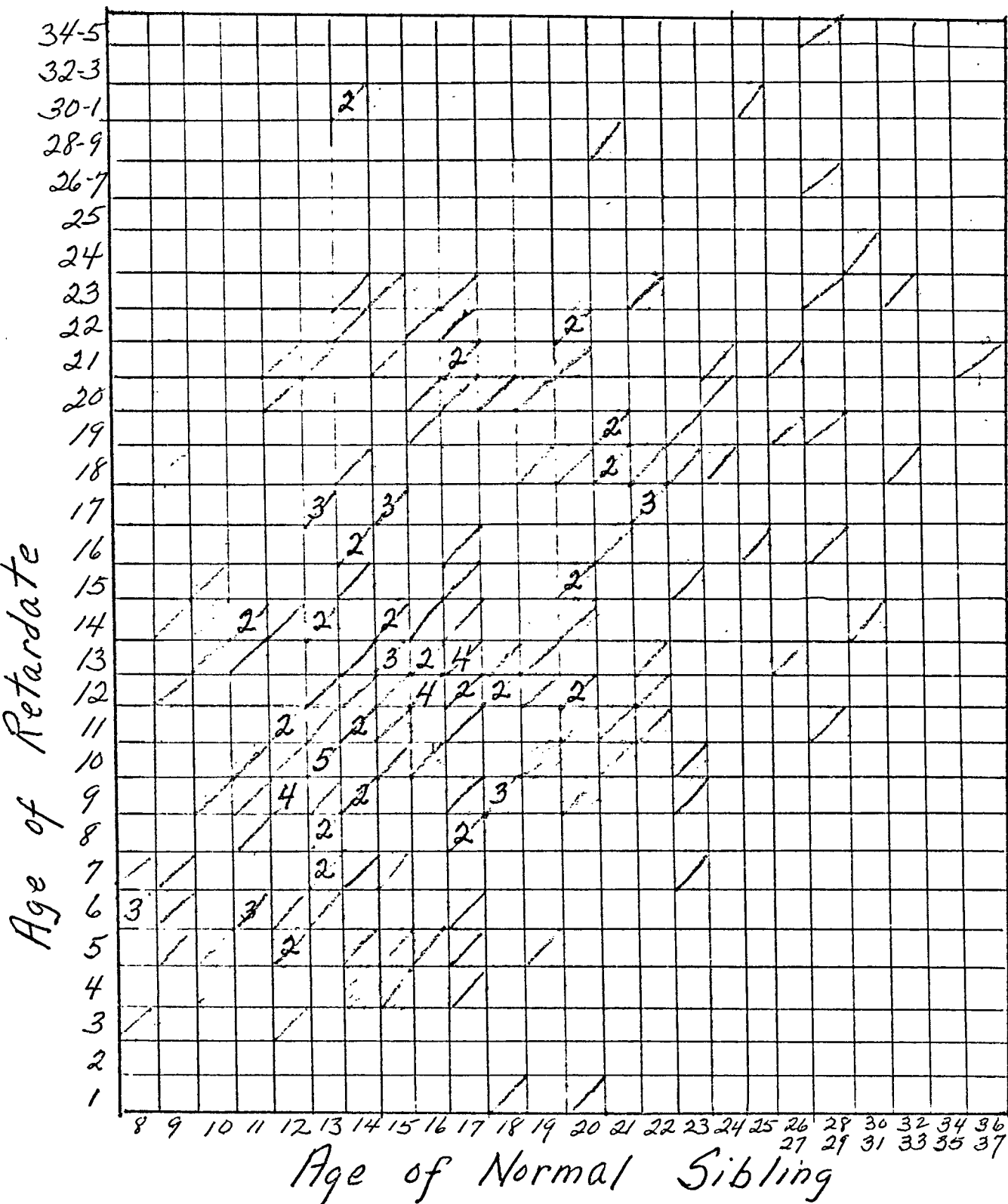
Returned questionnaires totaled 200 with siblings ranging in age from eight to thirty-six years, and the number of sibs per family varied from one to nine. The age of retardates involved ranged from one to thirty-five years. Table I, page 10, shows the distribution of ages of retardates and siblings in the sample studied.

Procedure

In an attempt to evaluate sibling attitudes, a two page

TABLE I

DISTRIBUTION OF AGES OF RETARDATEES AND SIBLINGS IN SAMPLE



NOTE: Numbers in the blocks indicate more than one retardate at that age level.

questionnaire was devised with additional space for individual comment if desired. To limit, as much as possible, any reading handicaps, the wording of the questionnaire was checked with Thorndike's list of 20,000 words. All words used were in the first 9,000 with the exception of "retarded" which was in the first 11,000 and was considered to be part of the vocabulary of these children because of their special family problem (Thorndike, 1932).

Accompanying the questionnaire was a covering letter explaining the purpose of the study and making an explicit appeal to the parents that the children be permitted to give their answers unaided by any member of the family. The letter contained words among the first 12,000 in Thorndike's list with the exception of "retardation" and "questionnaire", which were considered to be in the vocabulary of those families receiving the communication.

With the exception of a few families who were known to have a large number of siblings, each letter included two questionnaires and instructions to obtain more if needed. Included in the correspondence was a self-addressed stamped envelope to encourage as much cooperation as possible.

Of the 200 questionnaires returned, five were rejected in the preteen group because the children's responses had been recorded by the parents.

CHAPTER IV

ANALYSIS OF THE DATA

Subdivisions of the Sample

For a detailed analysis of responses, the total sample of 195 siblings was divided into various subgroups. The large range in ages of the normal children suggested divisions by age groups which became preteens, from eight through twelve years, teens from thirteen through nineteen years, and adults from age twenty and older. In addition, in a search for reaction patterns discussed by earlier researchers, the sample was also divided into male and female groupings, siblings who were younger than the retardates, and siblings who had a retardate in an institution.

Responses of the Total Sample, Preteens, Teens, and Adults

Attitudes and feelings of normal siblings are tabulated in Table II, pages 13, 14, 15. The general pattern displayed is acceptance and love of the retarded child by his brothers and sisters. This feeling is shared by the majority of all siblings regardless of age, sex, and living arrangements of the retardate. There are some differences among the various groups but their similarities are greater than their differences.

In the total sample approximately two-thirds of the retardates were judged by their siblings as mildly retarded and four times as many lived at home as in an institution. Slightly over half of the children attended special education classes in the public school system; an

TABLE II

SIBLING REACTIONS TO QUESTIONNAIRE PRESENTED IN NUMBERS,
AND PERCENTAGES BASED ON NUMBER MAKING RESPONSE

Type of Group Number of Subjects	PRETEENS 41		TEENS 99		ADULTS 55		TOTAL 195	
	No.	%	No.	%	No.	%	No.	%
Sex of Normal Child:								
Male	15	36.6	40	40.4	26	47.3	81	41.5
Female	26	63.4	59	59.6	29	52.7	114	58.5
Scholastic Ability:								
Below Average	1	2.4					1	.5
Average	25	61.	63	63.6	27	52.	115	60.0
Above Average	15	36.6	36	36.4	25	48.	76	39.6
Condition of sibling:								
Mildly Retarded	27	65.8	68	68.5	33	60.	128	65.5
Severely Retarded	10	23.4	26	26.2	19	34.6	55	28.2
Moderately Retarded	4	9.8	5	5.5	3	5.4	12	6.2
Sibling Lives at:								
Home	32	78.	80	80.8	45	81.8	157	80.5
Institution	9	22.	19	19.2	10	18.2	38	19.5
Attends:								
Special Ed. Class	19	57.6	43	53.7	20	43.5	82	51.5
RCOCenter	6	18.2	20	25.2	4	8.7	30	18.9
Child Care Center	3	9.1	1	1.2	1	2.2	5	3.1
Sheltered Workshop			6	7.6	5	10.9	11	7.
Employed in Community	2	6.1	1	1.2	4	8.7	7	4.4
None	3	9.1	9	11.4	12	26.	24	15.1
Know Cause of Handicap:								
Yes	23	59.	55	55.6	40	72.7	118	61.2
No	16	41.	44	44.4	15	27.3	75	38.8
Feelings Influenced by:								
His Condition	13	26.	46	28.9	23	19.8	82	25.3
His Personality	21	42.	59	37.	32	27.6	112	34.4
Other Relatives			4	2.5	3	2.6	7	2.2
My Parents	11	22.	35	22.	39	33.6	85	26.2
Friends			3	1.9	3	2.6	6	1.8
Professional People	1	2.	2	1.3	7	6.	10	3.
Reading	2	4.	9	5.7	7	6.	18	5.6
Movies & TV	2	4.	1	.6	1	.9	4	1.3
None					1	.9	1	.3
I've Been Ashamed:								
Yes	18	43.9	37	37.8	19	34.6	74	37.8
No	22	53.6	61	61.2	36	65.4	119	61.
Sometimes	1	2.4	1	1.			2	1.2
I've Been Proud:								
Yes	37	90.2	90	91.8	53	98.2	180	93.3
No	4	9.8	8	8.2	1	1.8	13	6.7
Sometimes								

TABLE II (continued)

	PRETEENS		TEENS		ADULTS		TOTAL	
	No.	%	No.	%	No.	%	No.	%
Family is Hampered:								
Yes	8	20.5	24	24.2	13	24.1	45	23.4
No	27	69.2	70	70.7	40	74.	137	71.5
Sometimes	4	10.3	5	5.1	1	.9	10	5.2
Goes on Outings:								
Yes	36	87.8	91	91.9	52	94.5	179	91.8
No	1	2.4	5	5.1	3	5.5	9	4.6
Sometimes	4	9.8	3	3.			7	3.6
Embarrassed in Public:								
Yes	6	14.6	18	18.2	2	3.6	26	13.3
No	30	73.2	78	78.8	52	94.6	160	82.2
Sometimes	5	12.2	3	3.	1	1.8	9	4.6
People Stare:								
Yes	14	34.2	20	20.1	7	12.7	41	21.
No	24	58.5	77	77.9	45	81.8	146	74.8
Sometimes	3	7.3	2	2.	3	5.5	8	4.2
Limits Friends at Home:								
Yes	5	12.2	13	13.3	5	9.1	23	11.9
No	34	83.	84	85.7	50	90.	168	86.5
Sometimes	2	4.9	1	1.			3	1.6
Threat to Dating:								
Yes			7	7.1	1	1.8	8	4.2
No	39	100.	90	91.9	54	98.2	183	95.4
Sometimes			1	1.			1	.5
Tell My Friends:								
Yes	20	47.6	45	44.1	45	81.8	110	55.2
No	6	14.3	3	2.9	3	5.5	12	6.
When Necessary	16	38.1	54	53.	7	12.7	77	38.8
Description to Friends:								
Retarded	15	36.6	54	55.1	27	49.2	96	49.5
Brain Damaged	4	9.8	6	6.1	5	9.1	15	7.7
Handicapped	3	7.3	5	5.1	7	12.7	15	7.7
Vague	9	22.	16	16.3	12	21.7	37	19.2
None	10	24.4	17	17.4	4	7.3	31	16.
Family Discussed Plans:								
Yes	14	38.9	61	62.2	44	81.5	119	63.3
No	22	61.1	37	37.8	10	18.5	69	36.7
I Agree:								
Yes	12	85.8	54	93.1	37	86.1	103	89.6
No			3	5.2	6	13.9	9	7.8
Sometimes	2	14.3	1	1.7			3	2.6
Sib Should be at Home:								
Yes	31	45.6	71	45.2	15	28.8	117	43.
No	5	7.4	10	6.4	2	3.8	17	6.2
When Infant	3	4.4	10	6.4	3	5.8	16	5.9
Long as Possible	24	35.3	56	35.7	26	50.	106	39.
While Parents Live	5	7.4	10	6.4	6	11.5	16	5.9

TABLE II (continued)

	PRETEENS		TEENS		ADULTS		TOTAL	
	No.	%	No.	%	No.	%	No.	%
Better Off in Institution:								
Yes	6	15.	22	22.7	12	21.8	40	21.
No	34	85.	75	77.3	41	74.6	150	78.
Don't Know					2	3.6	2	1.
My Responsibility:								
Yes	39	95.2	80	81.6	51	92.7	170	87.6
No	2	4.9	15	15.3	3	5.5	20	10.3
Sometimes			3	3.1	1	1.8	4	2.1
Community Employment:								
Yes	25	63.5	56	56.6	22	39.3	103	52.8
No	14	35.	38	38.4	31	55.4	83	42.6
Maybe			3	3.	2	3.6	5	2.6
Don't Know	1	2.5	2	2.	1	1.8	4	2.
Properly Disciplined:								
Yes	32	78.	75	77.4	39	70.9	146	75.6
No	9	22.	20	20.6	13	23.6	42	21.8
Sometimes			2	2.	3	5.5	5	2.6
Too Much of Mother's Time:								
Yes	9	23.	17	17.4	9	16.4	35	18.2
No	30	77.	79	80.6	45	81.8	154	80.2
Sometimes			2	2.	1	1.8	3	1.6
Too Much of Father's Time:								
Yes	2	5.	3	3.1	1	2.	6	3.2
No	38	95.	94	97.	48	98.	180	96.8
Too Much of My Time:								
Yes	4	10.	3	3.1			7	3.7
No	36	90.	93	96.	54	100.	183	95.8
Sometimes			1	1.			1	.5
I Help by:								
Playing	39	48.	75	39.2	36	39.6	150	41.5
Feeding	7	8.6	12	6.3	8	8.8	27	7.5
Dressing	10	12.4	25	13.1	13	14.6	48	13.2
Bathing	9	11.1	18	9.4	8	8.8	34	9.3
Baby Sitting	16	19.8	61	32.	26	28.6	103	28.3
Source of Conflict:								
Yes	8	19.5	9	9.5	7	13.	24	12.6
No	33	80.5	84	89.3	44	81.5	161	84.8
Sometimes			2	2.1	3	5.5	5	2.6
Most Difficult Adjustment:								
Blind	14	24.6	39	35.8	16	26.6	69	30.7
Deaf	17	29.8	11	10.1	6	10.	34	15.
Retarded	9	15.8	33	30.2	24	40.	66	29.1
Crippled	14	24.6	21	19.3	10	16.7	45	19.4
Don't Know	1	1.8	2	1.8			3	1.3
All	2	3.5	1	.9	3	5.	6	2.6
None			3	2.7	1	1.7	4	1.8

additional twenty-six percent are occupied in classes or employment at facilities provided by the Harris County Center for the Retarded. According to the responses, however, fifteen percent of the retarded population are at home without any outside stimulation or activity.

The general group felt that the child's personality, the parents, and the child's condition, in that order, were the main factors that influenced their feelings about their retarded sibling. The pre-teens and the teenagers, however, gave his condition precedent over the effect of the parents. This switch might be due to the fact that these young people are at a stage where appearance and personality are important factors in their judgment of all people.

A retarded child does not bring shame to his siblings according to sixty percent of the group, and ninety percent had experienced pride in their handicapped brother or sister. Apparently the children are just as thrilled over a minor accomplishment of their limited sibling as they are over a major accomplishment of a normal sibling.

Approximately seventy percent of all age groups did not feel that the family activities were hampered by the retardate and about ninety percent of the group said the handicapped child went with the family on outings. One young adult commented that the retarded girl was usually the one responsible for the family having activities together.

Only thirteen percent of the total group said they were embarrassed to be seen in public with the retarded child. The subgroups varied on this statement. Ninety-four percent of the young adults, seventy-eight percent of the teenagers, and seventy-three percent of the preteens were not embarrassed in public. The statement concerning

people staring also brought a difference of opinion among the age levels. Thirty-four percent of the preteens, twenty percent of the teens, and only twelve percent of the adults were conscious of people staring at them. Of the total group, seventy-five percent were not aware of others staring.

Eighty-six percent of the group did not feel that their retardate influenced their desire to bring their peers into the home. This percentage varied from eighty-three for preteens to ninety for adults. In addition, the retarded child is not a threat to dating or future marriage according to ninety-five percent of the brothers and sisters. Many of the adults, some already married, were amused by the question in light of their current social activities.

Only twelve of the normal children in the sample did not discuss the retarded child with friends, although thirty-eight percent mentioned the subject only when they considered it necessary. As in some previous examples, the adults displayed an even greater degree of adjustment in their openness with friends concerning their handicapped sib. Half the total group used the word "retarded" in describing their sibling, but about a third are vague or give no explanation at all. Slightly more than one third of the preteen group use the word "retarded", but fifty-five percent of the teen group are comfortable about using the term.

From the past few examples, the conclusion is that the preteen group are not yet quite as comfortable in the situation as the older children. Further along in the questionnaire, however, this same group displayed even more affection and concern for their limited sibling than the older groups. This attitude probably resulted because family ties

are often stronger during this developmental period.

Two-thirds of the families with this special problem have discussed plans for the future care of the retardate. Group percentages were eighty percent for young adults, sixty percent for teens, and approximately one-third of the preteens. If the families have discussed the problems of the future, the siblings are overwhelmingly in support of those plans. Almost ninety percent of the general group support the family program.

Forty-three percent of the responses relative to a retardate living at home said, "Yes," but this answer was often qualified by "when an infant," "as long as possible," or "while the parents lived." Only six percent answered that the child should not spend some period in the home. Apparently this question reflected the family timing as to when or if institutionalization had taken place, because in the following statement twenty-one percent supported institutionalization. Twenty percent of the retardates of the sample are institutionalized. Obviously the siblings are in accord with the family planning on this vital point.

Although only four percent of the retarded population sampled are currently employed in the community, about fifty percent of their brothers and sisters feel that there will be employment in the future. This difference would indicate either an over optimism or a hope for increased employment of the handicapped. Over sixty percent of the preteens could see their retarded sib employed, while only forty percent of the adults were as hopeful.

Faced with the possibility of the parents no longer able to

care for the retardate, eighty-seven percent of the siblings accepted the responsibility for the child. Ninety-five percent of the preteens, eighty-one percent of the teenagers, and ninety-two percent of the adults wanted the responsibility.

Concerning the child's behavior in the home, seventy-five percent of the group felt that the retardate was properly disciplined and very few felt that he was a burden to the mother, father, or the sibling himself. This statement was made despite the fact that, with a few exceptions, the normal children assisted in the care of the retarded child. Members of all groups helped by bathing, feeding, and dressing the handicapped child, but the largest percentage of responses were for playing and baby sitting. Furthermore, the retarded child is not considered a source of conflict in the home according to eighty-five percent of the sample group.

The normal children of the total group equated blindness with retardation as a difficult handicap for family adjustment. In the subgroups, teenagers felt blindness was more difficult, but adults gave greater weight to retardation.

Comparison of Male and Female Responses

The total sample was composed of forty percent males with fewer number participating in the preteen group and a larger number from the adult group.

Seventy-five percent of the teenage males have retardates in the home compared to about eighty-five percent of the teenage females. Table III, page 20 and 21, illustrates the differences in attitude and adjustment of the two sexes.

TABLE III

COMPARISON OF MALE AND FEMALE RESPONSES,
PERCENTAGES BASED ON NUMBER ANSWERING QUESTION

Type of Group Number of Subjects	MALES				FEMALES			
	Teens 40		Total 81		Teens 59		Total 114	
	No.	%	No.	%	No.	%	No.	%
Condition of Retardate:								
Mild	28	70.	55	67.8	39	67.3	71	62.3
Severe	11	27.5	21	25.9	14	24.1	34	29.9
Moderate	1	2.5	5	6.2	5	8.6	9	7.8
Lives at:								
Home	30	75.	63	77.8	50	84.7	95	82.6
Institution	10	25.	18	22.2	9	15.3	20	17.4
Feelings Influenced by:								
Condition	21	33.4	47	34.8	25	26.8	40	21.4
Personality	24	38.2	41	30.4	34	36.2	70	37.4
Parents	12	19.	32	23.7	23	24.4	54	28.9
Others	6	9.5	15	11.1	12	12.8	23	12.3
I've Been Ashamed:								
Yes	15	37.5	34	42.	22	37.4	41	35.9
No	25	62.5	47	58.	37	62.6	72	63.2
Sometimes							1	.9
I've Been Proud:								
Yes	33	84.6	70	88.5	57	96.6	110	96.5
No	6	15.4	9	11.4	2	3.4	4	3.5
Family is Hampered:								
Yes	12	30.	22	27.5	12	20.8	22	20.
No	25	62.5	52	65.	45	77.5	84	76.4
Sometimes	3	7.5	6	7.5	1	1.7	4	3.6
Goes on Outings:								
Yes	38	97.5	76	95.	52	88.1	102	89.
No	1	2.5	2	2.5	5	8.5	8	7.5
Sometimes			2	2.5	2	3.4	4	3.5
I am Embarrassed:								
Yes	10	26.4	16	19.8	8	13.5	10	8.8
No	28	73.7	62	76.5	51	86.5	98	86.
Sometimes			1	1.2			6	5.2
People Stare:								
Yes	8	20.5	19	23.8	13	22.	25	22.1
No	31	79.5	58	72.5	46	78.	87	77.
Sometimes			3	3.7			1	.9
Limits Friends at Home:								
Yes	7	17.5	11	13.6	6	10.2	11	10.
No	33	82.5	69	85.2	51	86.4	98	88.2
Sometimes			1	1.2	1	3.4	2	1.8
Threat to Dating:								
Yes	7	17.5	8	10.				
No	31	78.5	70	87.5	59	100.	114	100.
Sometimes	1	2.5	1	1.2				
Don't Know	1	2.5	1	1.2				

TABLE III (continued)

	MALES				FEMALES			
	Teens		Total		Teens		Total	
	No.	%	No.	%	No.	%	No.	%
Tell my Friends:								
Yes	14	35.	38	47.	31	50.8	71	60.3
No	1	2.5	5	6.2	1	1.6	6	5.8
When Necessary	25	62.5	38	47.	29	47.6	41	34.9
Description to Friends:								
Retarded	20	50.	33	44.	34	57.6	65	57.
Brain Damaged	1	2.5	5	6.8	4	6.8	8	7.1
Handicapped	2	5.	3	4.	5	8.5	12	10.5
Vague	7	17.5	16	21.3	10	16.9	21	19.3
None	10	25.	18	24.	6	10.2	8	7.1
Sib Should be at Home:								
Yes	27	46.5	57	47.8	42	43.4	83	42.8
No	5	8.6	6	5.	4	4.1	9	4.6
When Infant	2	3.4	4	3.4	9	9.3	12	6.2
Long as Possible	22	38.	45	37.8	33	34.	63	32.5
While Parents Live	2	3.4	7	5.9	9	9.3	17	8.6
Better Off in Institution:								
Yes	10	25.6	18	22.8	12	20.7	23	20.6
No	29	74.5	61	77.2	46	79.3	89	79.5
My Responsibility:								
Yes	29	74.4	66	83.5	51	88.	105	92.2
No	8	20.6	11	14.	7	12.	8	7.
Sometimes	2	5.	2	2.5			1	.8
Properly Disciplined:								
Yes	29	74.3	62	77.5	48	84.2	85	78.
No	9	23.1	15	18.7	8	14.	22	20.2
Sometimes	1	2.5	3	3.8	1	1.8	2	1.8
Too Much of Mother's Time:								
Yes	7	18.	16	20.2	10	16.9	19	16.8
No	30	77.	60	76.	49	83.1	92	81.5
Sometimes	2	5.1	3	3.8			2	1.7
Too Much of Father's Time:								
Yes	2	5.3	5	6.7	1	1.6	2	1.8
No	36	94.7	70	93.3	58	98.4	106	97.3
Sometimes							1	.9
Too Much of My Time:								
Yes	2	5.3	4	5.	1	1.7	3	2.7
No	36	94.7	75	95.	57	98.3	108	96.5
Sometimes							1	.8
I Help By:								
Playing	32	43.8	64	45.7	43	35.8	84	36.4
Feeding	4	5.5	9	6.4	10	8.3	21	9.2
Dressing	7	9.6	15	10.7	19	15.8	34	14.8
Bathing	5	6.9	8	5.7	13	10.8	29	12.6
Baby Sitting	25	34.2	44	31.4	35	29.2	62	27.
Source of Conflict:								
Yes	4	10.5	10	13.	4	6.8	13	11.7
No	33	86.8	64	83.2	54	92.5	97	87.4
Sometimes	1	2.6	3	3.9	1	1.7	1	.9

The males selected condition, personality, and parents as the proper order of influences on their feelings, while the females selected personality, parents, and condition, in that order. Although teenage boys and girls had similiar feelings about the matter, in the total sample, more boys are ashamed of their sibling than the girls. By the same token, more of the girls experienced pride in their handicapped brother or sister.

Despite the fact that more boys stated that the retardate is included in family outings, more males than females felt that the retardate limited family activities.

In regard to dating and marriage, none of the girls felt that the retardate would be a problem, but eight boys, or ten percent, felt their limited sib would be a social threat.

Sixty percent of the girls talked to their friends about their retarded sibling. Forty-seven percent of the boys did. Ninety-two percent of the girls accepted the responsibility of their sibling; eighty-three percent of the boys did. The males were also more critical of the time their father and they themselves spent with the retarded child. Both the brothers and sisters assisted with the retardate, although the boys spent seventy-five percent of their time playing or baby sitting while sixty-five percent of the girls' helping time is spent in these two activities. The load may be heavier on the female side, but the males also shared in the feeding, dressing, and bathing of their handicapped sibling.

Nevertheless, throughout the questionnaire the males did not identify with the retardate to the same degree as the female child. Her

acceptance of the situation was greater than that of her brother. The pattern for the majority of both the sexes, however, is an acceptance and affection for the limited child.

Reactions of Siblings With Retardate in an Institution

Of the total sample of 195 young people, thirty-eight, or almost twenty percent, had a retarded sibling living in an institution. Once again a majority of this group displayed love and acceptance of their handicapped family member. The results of their responses are listed in Table IV, page 24.

A comparison of Table II, pages 13, 14, and 15 with Table IV showed that this group's degree of acceptance is not as great as those children in the total sample. Eighty-seven percent of the children with institutionalized siblings have been proud of the retardate compared to ninety-three percent of the total sample.

About one-third of the institutional group felt the family was hampered in its activities compared to one-quarter of the total group. Also, more were embarrassed and more were conscious of people staring. In addition, fewer felt free to bring friends home. Of the total group only eleven percent were affected while in the institutional group about one-quarter were.

However, the institutional group used the word "retarded" more frequently than the total group and eighty-two percent of the families had discussed future plans compared to sixty-three percent of the general sample.

Eighty percent of this group felt that institutional life was

TABLE IV

REACTIONS OF SIBLINGS WITH RETARDATE IN AN INSTITUTION
PERCENTAGES BASED ON NUMBER OF RESPONSES

Number of Subjects		38			
Questions	No.	%	Questions	No.	%
Condition of Retardate:			I Agree:		
Mild	18	46.2	Yes	27	87.
Severe	18	46.2	No	3	9.7
Moderate	3	7.7	Sometimes	1	3.2
Feelings Influenced by:			Sib Should Be at Home:		
Condition	17	28.8	Yes	13	23.6
Personality	18	30.5	No	12	21.8
Parents	17	28.8	When Infant	12	21.8
Others	7	11.9	Long as Possible	18	32.7
I've Been Ashamed:			While Parents Live		
Yes	16	41.	Better Off in Institution:		
No	23	59.	Yes	30	81.1
I've Been Proud:			No	7	18.9
Yes	34	87.2	My Responsibility:		
No	5	12.8	Yes	32	84.2
Family is Hampered:			No	6	15.7
Yes	13	35.2	Community Employment:		
No	21	56.8	Yes	10	26.4
Sometimes	3	8.1	No	27	71.
Goes on Outings:			Don't Know	1	2.6
Yes	34	87.2	Properly Disciplined:		
No	4	10.2	Yes	26	70.3
Sometimes	1	2.6	No	11	29.7
I am Embarrassed:			Too Much of Mother's Time:		
Yes	7	18.4	Yes	11	29.7
No	28	73.7	No	24	64.8
Sometimes	3	7.9	Sometimes	2	5.4
People Stare:			Too Much of Father's Time:		
Yes	14	35.9	Yes	1	2.7
No	24	61.5	No	35	94.6
Sometimes	1	2.6	Sometimes	1	2.7
Limits Friends at Home:			Too Much of My Time:		
Yes	9	23.1	Yes	1	2.7
No	29	74.4	No	36	97.3
Sometimes	1	2.6	I Help By:		
Threat to Dating:			Playing	27	45.
Yes	3	7.7	Feeding	23	5.
No	36	92.3	Dressing	6	10.
Tell My Friends:			Bathing	3	5.
Yes	24	57.2	Baby sitting	21	35.
No	3	7.1	Source of Conflict:		
When Necessary	15	35.7	Yes	8	21.6
Description to Friends:			No	29	78.4
Retarded	23	59.	Most Difficult Adjustment:		
Brain Damaged	2	5.1	Blind	5	12.8
Vague	6	15.4	Deaf	10	25.6
None	8	20.5	Retarded	18	46.1
Family Discussed Plans:			Crippled	5	12.8
Yes	32	82.	All	1	2.6
No	7	18.			

best for their sibling, but eighty percent also felt that the retardate should spend some stage of his life at home.

As might be expected, little more than one-quarter of the institutional group expected their sibling to be employed in the community, in contrast with over half of the total group who held this opinion. Apparently sibs see institutional life as a terminal arrangement, and do not expect the training received at the institution to be applied later in outside employment.

Compared to only eighteen percent in the total group, twenty-nine percent of this group felt that the handicapped child took too much of the mother's time. The normal brothers and sisters spent eighty percent of their helping time either playing or baby sitting with the retardate.

The institutional group indicated that the retardate was more of a source of conflict in the home than the general group felt him to be. The institutional group also felt that retardation was the most difficult handicap for family adjustment.

Reaction of Siblings Younger Than The Retardates

There were fifty-two siblings younger than the retardates, or twenty-seven percent of the sample. The analysis of their responses is presented in Table V, page 26. A comparison of this group with the general sample, Table II, pages 13, 14, and 15, showed that a little more than one-third of this group have siblings in institutions, a larger number than the twenty percent for the total group.

The feelings of these children were influenced first by the child's condition, then by the parents, and finally by the personality of

TABLE V

RESPONSES OF SIBLINGS YOUNGER THAN RETARDATE
PERCENTAGES BASED ON NUMBER OF ANSWERS

Number of Subjects 52					
Questions	No	%	Questions	No.	%
Condition of Retardate:			Family Discussed Plans:		
Mild	34	65.3	Yes	30	57.7
Severe	16	30.8	No	22	42.3
Moderate	2	3.9	I Agree:		
Lives at:			Yes	28	100.
Home	34	65.3	No		
Institution	18	34.7	Sib Should be at Home:		
Feelings Influenced by:			Yes	29	44.7
Condition	22	35.5	No	7	10.8
Personality	16	25.8	When Infant	4	6.2
Parents	18	29.	Long as Possible	22	33.9
Other	6	9.7	While Parents Live	3	4.6
I've Been Ashamed:			Better Off in Institution:		
Yes	22	42.3	Yes	14	28
No	30	57.6	No	35	70
I've Been Proud:			Don't Know	1	2.
Yes	44	86.3	My Responsibility:		
No	7	13.7	Yes	40	80.
Family is Hampered:			No	8	16.
Yes	10	19.6	Maybe	2	4
No	40	78.5	Community Employment:		
Sometimes	1	2.	Yes	25	49.
Goes on Outing:			No	24	47.
Yes	47	90.3	Maybe	2	3.9
No	4	7.7	Too Much of Mother's Time:		
Sometimes	1	1.9	Yes	4	7.9
I am Embarrassed:			No	45	88.2
Yes	9	17.3	Sometimes	2	3.9
No	37	71.2	Too Much of Father's Time:		
Sometimes	6	11.5	Yes	2	4.1
People Stare:			No	47	96.
Yes	16	31.2	Too Much of My Time:		
No	33	64.7	Yes		
Sometimes	2	3.9	No	50	98.
Limits Friends at Home:			Sometimes	1	2.
Yes	5	9.8	I Help By:		
No	46	90.2	Playing	29	54.7
Threat to Dating:			Feeding	5	9.4
Yes	2	3.9	Dressing	4	7.5
No	48	92.4	Bathing	2	3.8
Sometimes	1	1.9	Baby Sitting	13	24.5
Don't Know	1	1.9	Source of Conflict:		
Tell My Friends			Yes	4	8.3
Yes	31	58.5	No	42	87.5
No	2	3.8	Sometimes	2	4.2
When Necessary	20	37.8	Most Difficult Adjustment:		
Description to Friends:			Blind	24	42.8
Retarded	26	50.	Deaf	8	14.3
Brain Damaged	3	5.8	Retarded	12	21.4
Handicapped	4	7.7	Crippled	10	17.9
Vague	10	19.2	All	2	3.6
None	9	17.3			

of the handicapped child.

Slightly more of this group have been ashamed of their sibs although more than half claimed, "No." Fewer than the total sample expressed pride, but the percentage was still high, eighty-six percent.

This pattern continued throughout the questionnaire with a few exceptions. Younger sibs were even less hesitant to bring friends home. Ninety percent did not feel that the retardate affected their desire to have friends visit. In this group, one hundred percent agreed with the family plans concerning the limited child's future. As with the institutional group, the percentage of younger normals who felt that the retardate would be better off in an institution was lower than the actual percentage already institutionalized.

In addition, an even lower percentage of these children felt that the retardate was the source of conflict within the home. There seemed to be little indication that this group had any additional difficulty in adjusting to the family problem. The younger group strongly indicated that they considered blindness the most difficult handicap for the family's adjustment.

The Effect of Different Degrees of Retardation

Not every normal child in the total sample displayed the affection and acceptance that was typical of the large majority of the group. Questions were selected in which eighty-six percent of the sample agreed that there was no particular problem. The retardates of the dissenters were then tabulated to determine if degree of retardation had any effect upon the normal child's attitude. The children that took exception to the majority opinion were not the same group with each

question. The results of that analysis is presented in Table VI, page 29.

In the total sample, only six percent of retardates were judged moderately retarded by the normal sibs. In the questions selected, the moderately retarded varied from ten to thirty-three percent.

The severely retarded composed twenty-eight percent of the total group. In the selected questions, the severely retarded ranged from twenty percent in the discussion of embarrassment to forty-six percent relative to pride in the retardates. The mildly retarded composed sixty-five percent of the total sample; in the critical questions, the percentage ranged from thirty-three to seventy-five.

The areas where the severely retarded appeared to threaten the normal child were: in the matter of pride, dating, sibling responsibility, and the use of father's time. The child who was judged moderately retarded by his sibling seemed to be a threat in all questions selected.

TABLE VI

DEGREE OF RETARDATION WHEN SIBLING HAS REACTION
CONTRARY TO 86% OF SAMPLE

	No.	%
In Total Sample:		
Mild	128	65.5
Severe	55	28.2
Moderate	12	6.2
I've Never Been Proud:		
Mild	5	38.3
Severe	6	46.3
Moderate	2	15.4
I Am Embarrassed:		
Mild	17	68.
Severe	5	20.
Moderate	3	12.
Limits Friends at Home:		
Mild	14	60.8
Severe	6	26.2
Moderate	3	13.
Threat to Dating:		
Mild	5	62.6
Severe	3	37.4
Moderate		
I Don't Tell My Friends:		
Mild	9	75.
Severe	3	25.
Moderate		
Not My Responsibility:		
Mild	11	55.
Severe	7	35.
Moderate	2	10.
Too Much of Father's Time		
Mild	2	33.3
Severe	2	33.3
Moderate	2	33.3
Too Much of My Time		
Mild	4	57.3
Severe	2	28.3
Moderate	1	14.3
Source of Conflict:		
Mild	13	54.2
Severe	7	29.2
Moderate	4	16.6

CHAPTER V

COMMENTS FROM SIBLINGS

Despite the length of the questionnaire, many of the young people added comments to the questions, wrote statements on the back of the sheets, or added additional pages for opinions. The following excerpts are an attempt to select representative remarks from the material offered.

Preteens

A twelve year old girl wrote about her six year old brother in an institution:

I love my brother and any other child like him. I don't like to hear people using the terms like when someone says to someone, "O, you retarded ape" or something like that, it makes me very mad. I also don't think that people should feel sorry for the family and child.

Another twelve year old girl with a nine year old, severely retarded sister commented:

I feel that my sister is spoiled very much, and I often resent it. But I love her very dearly and nothing can ever change that. I am not proud of having a retarded sister, but I am often proud of her achievements.

Commenting about the development of her fifteen year old sister who is institutionalized, a ten year old girl wrote:

I feel that my sister is learning more than she would have if she had not been at home with her family. She is much happier though now that she is in an institution but still loves to come home on a visit.

A nine year old girl, relating to her young sister, wrote:

I would like to say that I will always love her and will always be kind and helpful and good to her.

A twelve year old boy wrote about his eleven year old brother:

I tell my friends that my brother is handicap and can't learn like other children.

A nine year old girl commented about her eighteen year old, mildly retarded sister in an institution:

She is sometimes fun, and mostly boring.

A six year old brother was critized by his eleven year old sister:

I think he takes up too much of mother's time because she can't go places sometimes because of him.

The twelve year old sister of a five year old, mildly retarded boy wrote:

I tell them he is retarded, that he goes to a school and is learning well. They all understand and none of them look down on me.

When asked to explain what he told his friends about his sister, an eight year old boy's remarks were short and to the point:

She is different from us.

A twelve year old girl who has a three year old sister at home wrote:

I think a retarded child is wonderful...When I help regular children, I just think it's fun. But when helping a retarded child I feel I have helped alot more, but if it doesn't help them, it sure helps me.

Writing about his six year old sister, an eleven year old male said:

She is an angel and when she gets to heaven she will be perfect.

A nine year old girl with a seven year old sister who was mildly retarded, showed more resentment toward a three year old sister than toward the handicapped sibling:

My younger sister is the pest. She is such a baby but she is three.

Teens

An eighteen year old girl wrote about her eight year old sister:

I treat the subject with honesty and frankness. I am not ashamed of her and feel no reason to be ashamed.

The following was written by a sixteen year old girl who has a five year old brother living at home:

In evaluating one's feelings about any handicapped loved one, I believe Christian values and attitudes cannot be dismissed. When my brother was born my personal relationship with God had already been established, and I know that the strength of this helped me and my family.

A seventeen year old sister wrote that she did not agree with her family's plans to have the child institutionalized:

I feel that he is not that bad off and he should be able to live a good life and not be left in an institution.

Writing about his twelve year old brother who is institutionalized, a seventeen year old boy said:

My brother doesn't receive proper discipline at home because my parents seem to think that mental retardation is an excuse for any kind of conduct. He is a Mongoloid, and while he has a very low I.Q., he can be taught to do simple tasks.

Another twelve year old Mongoloid was described by his sixteen year old brother:

My little brother may not be able to hold his own in the realm of learning, but he is an over-flowing pot of sunshine and love. Sometimes I get tired of him when he is bugging me while I'm doing something else, or when he gets bossy.

My brother is a great little guy that is alot of fun to goof around with....I truly love my little brother. Many times other boys my age, when I was younger, would make fun of him and I felt like breaking their necks.

A nine year old, mildly retarded girl brought this reaction from her fourteen year old sister:

I don't think her being retarded effects my life at all. If boys are afraid to date me because of my sister, then I wouldn't want to date him either. As to explaining my sister to my acquaintances, I don't do it for pity, but so they'll understand her and won't pity her. She has such a personality that I would never be ashamed of her, but I like to show her off to my friends and everyone that meets her likes her.

A sixteen year old girl wrote about her twenty-two year old sister at home:

I ask her opinion on some of the things I wear etc. and I feel this gives her a feeling of being wanted.

This is a description a fourteen year old boy gave of his thirty year old sister who works in a sheltered workshop:

Our sister is smart and helps more around the house than any of us. She is smart enough to take care of herself. She pays room and board and does her part.

Another fourteen year old boy who has a twenty-two year old sister in an institution:

I think that having a retarded sister has made me feel lucky to be not handicapped. And I think it has helped our family life to have a retarded sister.

A seventeen year old girl commented about her younger sister who is living at home:

She can be sweet as candy at times and nasty at others just as a normal sister. I feel she has kept our family more close than it normally would have been. I don't think she has affected me in any drastic way.

Writing about his younger sister in an institution, an eighteen year old boy said:

Even tho I think a retarded child would be better off in an institution for him, I also think his parents should see him often and continue to show him he is loved.

A seventeen year old girl with two retarded sisters, one older and one younger wrote:

Nothing is too difficult for a family to adjust to.

A twenty-three year old woman, now institutionalized, lived at home until she was about fifteen. Her fifteen year old sister wrote:

She can read, write, and do simple arithmetic....I do feel she is better off at _____ because they have more patience and have taught her responsibility. She has a job that makes her feel useful and she does it well too. She also has lots of friends there. She likes to come home, but she seems to enjoy school.

Another sister, two years older, commented:

The school gives her a special job so that she feels needed, which is very important.

An eighteen year old, married sister, living at home at the time of his birth, wrote the following about a one year old, severely retarded brother:

He was the only boy my mother and father had. It was a terrible blow to all of us....Our family doctor told us that the baby would be a complete vegetable and advised us to put him in an institution. He said bringing the baby home would split our family up. We took his advice ...and it was the most horrible time I will ever remember. ...We finally...brought the baby home. He has drawn our family closer instead of tearing it apart....He is getting the love and attention now that all babies need and should have.

A boy of fifteen confessed that he teased his seventeen year old, institutionalized sister because:

She is sometimes babied and I try to get her to act like us and play with her.

A seventeen year old boy gave this credit to his younger brother:

He is retarded but is constantly moving ahead in life's challenge.

A nineteen year old sister of a twenty-one year old male commented:

One does (feel people are staring) at first but you become accustomed to it. People can't help but stare when they see retarded or handicapped people.

Her following remarks were related to bringing friends home:

This is one point I feel strongly about. A retarded child should not be hidden and kept from people.

Adults

A twenty-nine year old woman wrote about her twenty-seven year old brother who was raised at home and who now resides in a halfway house in the community:

My life was greatly enriched by having a handicapped brother. This was wholly due to my parents' attitude. Our family situation taught me tolerance, patience, and understanding. ...Because of my parents' example, I better learned to accept and face problems that appeared in my life.... Because of my brother's example I was better able to make the most of my ability...Having a retarded brother taught me humility....I'd say that the childhood of my brother was not nearly so difficult to face as his adulthood. But he is, in a small way, a contributing member of a community. Thanks to his upbringing he makes the most of his life — I only hope that I do as well.

The following comments about a twenty-two year old retardate were written by her thirty-six year old, married sister:

From the time my parents were told that they had a retarded child my sister was spoiled and pampered. She was not taught any simple household tasks...or given any responsibilities suitable to her abilities. She was always allowed to have anything she desired...and do anything she liked. ...As a result of this course of action, she was inactive and unhappy.

A twenty-three year old sailor, writing about his younger brother at home said:

He is spoiled, he shows more potential when forced to do for himself.

A twenty-six year old, ex-Peace Corp volunteer commented about early home life with his younger sister:

It was just an unwritten accepted law that things would go smoother if my friends and I remained away from the

situation at home...this was when I was younger. Nowadays, I explain the situation right off the bat. ...Fortunately she has a good sense of humor, writes great letters and has quite a vocabulary. She is fun to be around. Always has a smile and loves to help out.

A twenty-two year old male described his reactions to his seventeen year old brother living at home:

Love and care to me, are the two most important facts in helping a retarded child to gain a more fulfilled life....My brother has kept me closer to my family than anything else in this world....My understanding of him has brought me so much closer to human enjoyment that personally, I feel that my outlook toward others inflicted with this handicap or any other retardment has been greatly influenced by him.

A twenty-one year old girl wrote the following about her brain injured brother who is eighteen years old:

He has taken over my mother's whole life. She has none of her own. My parents have waited too long to find any kind of institution or home for him. No place will accept a multi-handicapped lad and then try and teach him.

.....

A lot of denominations at least try to accept these unfortunate youngsters but the church we attend has requested that we not bring him to church. I think this is wrong. Christ meant church for everyone. This brother of mine will see God much quicker than will that pastor.

When asked to select a handicap she considered the most difficult to adjust to, a twenty-five year old girl stated:

I feel that LACK of love, in any of these stated cases, would be much worse than any mentioned. In any case!

A twenty-eight year old male made this statement about his nineteen year old, severely retarded brother:

He will always have a home as long as I live.

A college student in a family of five children wrote this remark about his ten year old sister:

And though at the age of six months we were told she would never be anything but a vegetable, she has progressed at a remarkable rate. She now reads above her physical age level.I am reluctant to admit a favorite in the family but if I was pressed I would have to say that it was she.

A twenty-eight year old male wrote about his nineteen year old, severely retarded brother at home:

His condition has definitely had some harmful effects on the whole family, but I believe that perhaps we have had some experiences others missed for lack of a "special" person. Naturally, I would prefer that he was a normal nineteen year old brother....I know his condition disappoints my parents terribly also.

A twenty-eight year old female wrote about her sister who is twenty-three, severely retarded and living at home:

Our retarded sister is special to us but is treated and disciplined as a normal child....She is a good girl and does her duties at home well. Washes and dries dishes, cleans and vacuums the house etc....She has the mentality of about a five year old child.

A twenty-one year old woman made this observations about her brother, seven years older than she:

My brother is a borderline case....He knows he is retarded and this is the pity. He is almost normal yet he knows he can never achieve normalcy....This problem could be solved if he would accept...what his capabilities are -- but he just can't do this--....I certainly love my brother and I would do anything to see him happy and to see a smile on his face -- I feel an overwhelming obligation toward him.

A married college senior wrote about her younger sister:

My husband and all my dates have accepted it --especially my husband who loves her as much as I do.

A young married father wrote about a younger brother's former residence in an institution:

No one is better off in an institution when he could be at home.

A twenty-two year old female commented about her seventeen year old educable sibling:

I have never resented my sister, and I feel that this is due to the way my parents have handled the situation.... I'm beginning to feel that she would be better off in an institution now that she is getting older.

A twenty-seven year old female wrote the following about her eleven year old brother:

He is a Mongoloid....I have been amazed at his accomplishments and personality development under special supervision and instruction. My friends enjoy hearing about his "successes" and cute sayings.

A twenty year old female discussed her feelings about her fourteen year old, severely retarded brother in an institution:

I feel our family has adjusted well to a retarded child but feel that a retarded child is the hardest problem to adjust to, mostly because you realize that, in plain terms, he will never be normal -- ever. This is hard to take. I don't often speak of my brother to others, not because I am ashamed of him but because he is so close to my inner self that it is hard to talk about.

CHAPTER VI

SUMMING UP

Summary

Parental concern for the welfare of all the children in the family has created a need for the evaluation of the attitudes of the normal sibling toward the retarded child. The purpose of this survey was to give some insight to the parents and to those people who might counsel parents about their problem.

The sample used was composed of 195 siblings of retarded children whose families resided in the Houston area. The young people involved ranged in ages from eight through thirty-six years, with one to nine siblings per family. The retardates ranged from one year through thirty-five years of age.

An analysis was made of the attitudes of the preteen, teen, adult, male, female, younger siblings and sibs who have a retarded brother or sister in an institution. There was also an attempt to determine if degree of retardation had an effect upon sibling attitudes.

Regardless of how the data was approached, the result was basically the same. The majority of the normal brothers and sisters of the retarded child had a genuine affection and a real concern for their handicapped sibling. They were not uncomfortable in the situation and did not consider the problem of retardation one that was threatening to them in their interpersonal relationships with peers, parents, or other family members.

Conclusions

In this cross sectional study, a comparison of the attitudes of the different age groups suggested that young people faced with retardation develop a greater acceptance and more refined adjustment as they mature. The highest degree of acceptance was demonstrated by the adult group. The adolescents, in turn, showed a more refined adjustment than the pre-teens. This comparison suggested that the total acceptance of retardation may be a gradual process that evolves with the maturing of the individual. Adjustment to this problem may parallel other growth developments during maturation when the individual's judgment gradually becomes a personalized entity.

The analysis also suggested that the child with a retardate in an institution may possibly have a little more difficult time in adjusting to the problems associated with retardation. A family with the handicapped child at home has an opportunity to discuss and to react to facets of the problem on a day to day basis. Family members, by necessity, learn to cope. The family with a child in an institution does not have the day to day exposure to the retardate that seemed to facilitate the final adjustment to the problem. Furthermore, if the institutionalized child visits in the home, his presence may be a disruptive influence. It is possible that more resentment can be generated during these short visits than during a full year of daily living.

The institutionalized group indicated that the retardate is more of a source of conflict in the home than the general group felt him to be. This fact suggested that possibly more parents of this group have not adjusted yet to the problem, and consequently have not created an

atmosphere in which the young people of the family can accept the situation in a natural fashion.

The siblings who were younger than the retardates may be more conscious of the oddities of the retardate's appearance, but they tended to demonstrate that the family adjustment had taken place before their time or when they were very young. The family attitude was established and the young child followed the example set. This group did not indicate any particular or serious difficulties in their acceptance, affection, or adjustment to the retardate.

There was a difference in brothers' and sisters' reactions to the retarded sibling. In today's living, both brother and sister assist in the care of the retardate. Nevertheless, the sister probably assumes a greater role in helping with the limited child. Farber has suggested that under such circumstances resentment and tension develop. It appears that actually greater love and understanding develop.

A possible increase in interpersonal contact, however, does not seem to be an adequate explanation. Possibly the largest contributing factor to the sex difference is a general cultural pattern concerning the male and female role. The difference in contributions to family living is but one facet of that cultural pattern. The male child, in accepting the male role of our culture, tends to lead less of a personalized life and to relate less to the family members. His activities and interests turn away from the home at an earlier age than the female. As a result, he is more detached about his handicapped sibling, more critical of the home and its mode of operation.

The data on degree of retardation indicated that degree did

affect the normal sibling. For some reason, the child described by his brother or sister as moderately retarded had more of a detrimental effect than either the mildly or severely handicapped child. The category of moderately retarded was not offered in the questionnaire but was spontaneously selected by the young people themselves.

Recommendations

With four times as many retardates living at home as in institutions, the services in the community become of first importance. The results of the survey showed that an outstanding contribution is made by the special education classes of the public schools and the diversified facilities of the Harris County Center for the Retarded. Nevertheless, fifteen percent of the sample population were not participating in any activity outside the home. The saturation point has not been reached in opportunities for the retardate, particularly the adult.

What affect does community services have in assisting families with their adjustment? Future researchers may possibly be interested in the comparison of family attitudes in communities with and without services for the retardate.

In addition, the question is raised why did such a large number of the young people who spontaneously used the term "moderately retarded" indicate difficulty in acceptance of the limited child?

In noting that children with institutionalized retardates considered the living situation terminal, and that they had little hope of community employment for their sib, one became aware of the lack of information and the lack of development of the concept of halfway houses.

The parents of retardates should recognize the tremendous sense of responsibility the normal brothers and sisters have toward the handicapped child. In view of this fact, parents might acknowledge the need to discuss plans as early as possible and to include the normal children in their planning for the retardate's future.

From this study, and other writings, there can be little doubt of the effect that parents have in determining the children's attitudes toward the limited child. An additional factor evolves — the influence of the handicapped child's personality upon sibling attitudes. This personality development is greatly affected by the limited child's training, discipline, and opportunities for development. Apparently, in making every effort possible to develop the retarded child to his potential, the parents also serve the purpose of assisting the normal child with his adjustment.

Limitations of the Study

This writer is well aware of the many shortcomings of the survey just completed. There was confusion among the young people in attempting to categorize the degree of retardation of their sibling as either mild or severe. The situation was not improved by omitting the category of moderately retarded, which would have been an acceptable diagnosis for many.

In answering some of the questions, many young people would have been more comfortable if the alternatives of "sometime" or "maybe" had been offered as well as "yes" and "no."

The question concerning the cause of the limited child's condition is ambiguous. It was an attempt to determine how well informed

the normal child might be. However, since some causes of retardation are still unknown or vague, the child often gave a well informed answer when he checked, "No, I do not know the cause of the condition."

It also would have been helpful to know at what age the institutionalized children left the family home.

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APPENDIX

Houston, Texas
October 1, 1966

Dear Family,

Those of us with a retarded child have a special problem that we have attempted to solve in a variety of ways. Many of us have benefited from help and advice from various different sources. Nevertheless, all of us realize that any solution must first begin within the family.

During my studies as a graduate student at the University of Houston, I have discovered a lack of research directed to an understanding of the feelings of normal brothers and sisters of the retarded child. Much has been said about how the normal children feel, but it becomes obvious that we don't really know how they feel. I have chosen for my master's thesis in psychology a study of the reaction of normal brothers and sisters to the retarded child. This survey has been approved by the chairman of my thesis committee, Dr. Frank Stovall of the University of Houston psychology department.

Obviously, the project is worthless if we do not get a completely honest reaction. Consequently, please ask your children to fill out the questionnaire privately, without your aid or over-the-shoulder scrutiny. They are not to sign the questionnaire. Their opinions are extremely important to me, their names are not. Please explain to your children that too much is said about how they feel, and not enough is actually known about their feelings. This is their personal opportunity to set the record straight.

I shall greatly appreciate your family's assistance in my study and in bringing one more ray of light to helping all families who share the special problem of retardation. If you need more questionnaires, please call me at my home, . Thank you for participating in my research study. If you are interested in the results, they will be available in the library of the Harris County Center for the Retarded early in 1967.

Most sincerely,

MARY B. FALON

APPROVED:

Dr. Frank L. Stovall, Advisor

QUESTIONNAIRE

Your age ____ Sex ____ Number of children in the family * ____

Age of retarded brother or sister ____ Sex ____

I am a ____ below average, ____ average, ____ above average student in school.

I enjoy the following hobbies:

Father's occupation _____ Mother's occupation _____

Please check the correct response to the following: (If necessary, check more than one.)

1. My brother (or sister) is ____ mildly, ____ severely retarded.
2. My brother (or sister) lives ____ at home, ____ with other relatives,
____ with foster parents, ____ at a special school or residence.
3. He (or she) attends ____ special education classes, ____ a child care center,
____ classes at the Retarded Children's Opportunity Center,
____ sheltered workshop, ____ is employed in the community
____ none of these.
4. Do you know the cause of your brother's (or sister's) handicap? ____ yes,
____ no
5. My feelings about my brother (or sister) have been influenced most by
____ his condition, ____ his personality, ____ my parents,
____ other relatives, ____ my friends, ____ doctors or professional
people, ____ reading, ____ movies or TV.
6. Have you ever been ashamed of your brother (or sister)? ____ yes, ____ no.
7. Have you ever been proud of your brother (or sister)? ____ yes, ____ no
8. I feel that our family activities are hampered by my brother (or sister).
____ yes, ____ no
9. My brother (or sister) goes with the family on outings. ____ yes, ____ no
10. I am embarrassed to be seen with him (or her) in public. ____ yes, ____ no
11. I have the feeling that people are always staring at us. ____ yes, ____ no
12. My desire to bring friends home is influenced by my brothers (or sister's)
presence there. ____ yes, ____ no.

13. Do you feel that your brother (or sister) is a possible threat to your dating or later marriage? ____ yes, ____ no
14. I tell my friends about my brother (or sister). ____ yes, ____ no, ____ only when it is necessary
15. How do you describe or explain your brother (or sister) to your friends?
16. Our family has discussed future plans for my brother (or sister). ____ yes, ____ no
17. I personally agree with those plans. ____ yes, ____ no
18. I am in favor of a retarded child living at home. ____ yes, ____ no, ____ when an infant, ____ as long as possible, ____ while the parents are living.
19. I believe my brother (or sister) would be better off in an institution. ____ yes, ____ no
20. I feel that it is my responsibility to take care of my brother (or sister) after my parents are gone. ____ yes, ____ no
21. I think my brother (or sister) will eventually be able to work on a job in the community. ____ yes, ____ no
22. Do you feel that your retarded brother (or sister) is properly disciplined in the home? ____ yes, ____ no
23. Do you feel that he (or she) takes too much of your mother's time? ____ yes, ____ no
24. Too much of your father's time? ____ yes, ____ no
25. Too much of your time? ____ yes, ____ no
26. In what way do you help with your brother or sister? ____ play with him, ____ feed him, ____ dress him, ____ bathe him, ____ baby sit.
27. If there is a conflict in the home, it is often caused by our handicapped child. ____ yes, ____ no
28. I think the most difficult handicap for a family to adjust to would be when one of the family is ____ blind, ____ deaf, ____ retarded, ____ crippled.

Any comments you would like to make: Please use back of page.