

**Title:** Mother, Father, and Adolescent Perspectives: Sibling Relationship Quality of Individuals with ASD, ID, or TD

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**Introduction:** Sibling relationships are often characterized as being one of the strongest lifelong human connections (Pollard, Barry, Freedman, & Kotchick, 2013). For families of youth with an intellectual or developmental disorder, the literature is inconsistent as to whether these relationships are truly adversely impacted as a result of the disability (Kovshoff, Cebula, Tsai, & Hastings, 2017). Some of the variability may be due to various correlates included in analyses (e.g., behaviors problems), as well as the age at which sibling relationships were examined (Buist, Deković, & Prinzie, 2013; Orsmond, Kuo, & Seltzer, 2009). For example, there may be specific factors related to puberty or the level of sibling engagement in adolescence (compared to childhood) that influence reports of relationship quality. In the current study, the first aim was to characterize the sibling relationship, using four dimensions, and to test whether a diagnosis of autism spectrum disorder (ASD) or intellectual disability (ID) had a unique effect on the relationship during adolescence. Further, an interesting aspect of the sibling dyad is the shared genetic makeup and environment (Tsao, Davenport, & Schmiege, 2012), leading researchers to examine the extent to which members within the same family unit agree on the nature of their relationship. Yet, more information on this topic is needed. Thus, the second aim of this study was to assess parent-adolescent agreement regarding the quality of the sibling relationships. Findings may elucidate whether discrepancies in research findings may also be due to differing family perspectives.

**Method:** As part of the longitudinal Collaborative Family Study (CFS), data were collected from families of youth with ASD, ID, or typical development (TD;  $n=84$ ). For the purposes of this study, typically developing sibling participants of youth with ASD or ID were combined into one group ( $n=76$ ). The Sibling Relationship Questionnaire (SRQ) was completed by participating mothers, fathers, and siblings of adolescents with ASD/ID or TD. The sibling who completed the questionnaire was the one whom the target adolescent interacted with the most or who was closest in age (Furman & Buhrmester, 1985). Subscale scores were calculated for the SRQ: Warmth/Closeness, Relative Status/Power, Conflict, and Rivalry. Bivariate correlations were performed to examine agreement between family ratings (mother, father, and sibling) on the SRQ. Multivariate analyses of covariance (MANCOVAs) were conducted to test diagnostic differences in SRQ subscale scores, controlling for externalizing and internalizing behaviors exhibited by the target child as reported by the mother, as measured by the Achenbach Scales (Achenbach & Rescorla, 2001).

**Results:** Results of the MANCOVA revealed that there was a significant main effect of diagnostic status on SRQ subscale scores based on the sibling's reports ( $F(4, 59)=6.06, p<.001, \text{Wilk's } \Lambda=.71, \text{partial } \eta^2=.29$ ). Diagnostic status had a statistically significant effect on subscales of Relative Status/Power ( $F(1, 62)=9.75, p<.01, \text{partial } \eta^2=.14$ ) and Conflict ( $F(1, 62)=9.65, p<.01, \text{partial } \eta^2=.14$ ). Mean scores for Relative Status/Power were significantly higher in the ASD/ID group ( $M=1.01, SE=.18$ ) than the TD group ( $M=.12, SE=.20$ ), whereas scores for Conflict were significantly higher in the TD group ( $M=3.27, SE=.13$ ) than the ASD/ID group ( $M=2.70, SE=.12$ ). Externalizing behavior was a significant covariate in the model ( $p<.05$ ). Agreement between mothers and fathers on sibling relationship quality was moderate to strong. Significant, positive associations were found on all four subscales: Warmth/Closeness ( $r=.77, p<.001$ ), Relative Status/Power ( $r=.45, p<.001$ ), Conflict ( $r=.43, p<.001$ ), and Rivalry ( $r=.52, p<.001$ ). Agreement between parents and typically developing siblings was less consistent: Results of correlations between mothers and siblings indicated significant, positive associations on Warmth/Closeness ( $r=.53, p<.001$ ) and Conflict ( $r=.48, p<.001$ ). Correlations between fathers and siblings resulted in a significant, positive association on Warmth/Closeness ( $r=.42, p<.05$ ) only.

**Discussion:** When investigating whether sibling relationship quality differed by diagnosis, findings suggested that parents may perceive sibling relationships of adolescents with ASD or ID as more normative than expected. On the contrary, siblings of adolescents with ASD or ID perceived a status or power imbalance within their sibling relationship, compared to those with TD. For example, some siblings of youth with ASD/ID reported having a caretaking role, which could influence the perceived power that one sibling has over another. Adolescent siblings of TD youth perceived their power within the family as equal, which could create more conflict or competition for resources or parental attention. Mothers and fathers tended to be in agreement when reporting about the quality of the sibling relationship, indicating that both parents perceived their children's relationship similarly. However, discrepancies existed when comparing parent and sibling reports, specifically on measures of imbalance, competitiveness, and (between fathers and siblings) conflict in the relationship. This highlights the importance of obtaining sibling self-reports when characterizing the sibling relationship in adolescent years. From a methodological perspective, this provides some evidence that the raters used in studies of siblings may contribute to the variability reported in the literature.

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