

Impact of Parental and Contextual Factors on Differential Treatment of Siblings in the Families

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ABSTRACT Despite a powerful social norm that parents should treat offspring equally, beginning in early childhood and continuing through adulthood, parents often differentiate among their children in such domains as affection, privileges, and discipline. The current study examined whether parental and contextual risk factors contribute to mothers and fathers' differential treatment when accounting for sibling dyad characteristics in five domains (privileges, chores, affection, discipline, and temporal involvement). One hundred and twenty families with equal number of the four sibling sex constellations (girl-boy, boy-boy, girl-girl and boy-girl) were studied. Even where equal treatment was normative a substantial proportion of parents reported differential treatment. Children's reports about the parental differential treatment were taken through a standardized scale. Parental differential treatment was more in opposite sibling sex dyads as compared to same sibling sex dyads. Parents favoured more to older siblings in domains of privileges and allocation of household chores. Parents favoured younger siblings in domains of affection and temporal involvement. Mothers were more differential in treatment as compared to fathers. Paternal differential treatment was seen in temporal involvement as fathers spend more time with sons than daughters. Parental differential treatment patterns were significantly related to parental and contextual variables.

INTRODUCTION

Twenty-six years ago, Plomin and Daniels (1987) alerted developmental psychologists to the fact that children within the same family often turn out quite differently and that sharing the same rearing environment does not lead to sibling similarity. This began a wave of research to pinpoint child specific aspects of the environment linked to sibling differences in outcome, and parental differential treatment (PDT) has emerged as a consistent factor related to children's adjustment (Turkheimer and Waldron 2000). Parental differential treatment (PDT) of siblings, a component of the non- shared family environment is defined as how parents treat the two children in relation to one another (Feinberg and Hetherington 2001).

Treating children differently may reflect appropriate, sensitive parenting (Kowal and Kramer 1997), as happens when parents adjust their behavior to each child's needs and characteristics. Therefore, PDT is expected and seen to be normative when it is equitable and related to children's own characteristics such as age and temperamental differences (Brody et al. 1992) or special needs (McHale and Pawletko 1992).

However, the extant evidence on PDT is consistent in showing that PDT is a negative phenomenon for the disfavored child. For example,

PDT has been related to children's self-esteem (McHale et al. 2000), adjustment (Dunn et al. 1990; Feinberg and Hetherington 2001; McHale and Pawletko 1992) and negative emotionality (Brody et al. 1992). There have been very few studies, however, examining risk factors for PDT. Therefore, it is important for risk factors to be identified.

The present study was, therefore, an effort to delineate the contribution of different factors towards the parental differential treatment in siblings. Such information will alert professionals and parents to the circumstances that may trigger PDT and benefit parents who are concerned about their differential treatment, especially in the context of societal expectations of equal treatment. Information on PDT could be included as part of workshops or parent education literature focused on enhancing parenting skills and/or dealing with sibling rivalry. Parent educators could sensitize parents to what characteristics of offspring dispose parents to differential treatment. In conjunction with enhanced parent understanding of the circumstances and implications of differential treatment, parenting programs could be broadened to foster communication between parents and offspring about off-springs perceptions of and parents' reasoning about differential treatment through role plays and group discussions.

Objectives of the Present Study

1. To identify parental differential treatment in four sibling sex constellations.
2. To study parental and contextual factors in relation to parental differential treatment.

METHODOLOGY

Locale of Study

The present study was conducted in Hisar city of Haryana state.

Sample

Sample consisted of 120 families with at least two children from the two parent families, falling in age group 10-17 years. Approximately equal number of the four sibling sex constellations (30 boy-boy, 30 boy-girl, 30 girl-boy, and 30 girl-girl) was recruited. Hence, total of 120 pairs of siblings were selected. The parents of selected siblings also constituted the sample for obtaining information on selected variables. Thereby, the total sample of 240 children and 240 parents (120 mothers and 120 fathers) was the sample for the present study.

Tools Used

A five point rating scale adapted from the Sibling Inventory of Differential Experiences

(SIDE) developed by Daniels and Plomin (1985) was used to study parental differential treatment in different sibling dyads. Siblings rated five domains of differential treatment (for example, privileges, chores, affection, discipline and temporal involvement) using this rating scale (1= younger sibling a lot more; 2=younger sibling a little more; 3=treat both children equally; 4= older sibling a little more; 5= older sibling a lot more) for both mothers and fathers separately. For studying parental and contextual variables various standardized tests were used.

Procedure of Data Collection

Selected families were contacted and date and time of visits was fixed as per their convenience. Home visits were conducted to collect data on selected variables from siblings.

RESULTS

Mean scores of maternal and paternal differential treatment in domains of privileges, household chores, affection, discipline and temporal involvement were compared using one-way ANOVA for four sibling sex dyads (boy-boy; boy-girl; girl-boy and girl-girl pairs). Table 1 depicts the result of ANOVA analysis and follow up Duncan range test carried out for finding the differences in PDT between the four sibling sex dyads.

Table 1: Comparison of PDT among four sibling sex constellations

Domains of differential treatment	Sibling sex constellations				'F' value (p<.05)
	Boy-Boy (n=30)	Boy-girl (n=30)	Girl-Boy (n=30)	Girl-Girl (n=30)	
1. Privileges					
Maternal	2.13 ^b ±0.80	2.33 ^{ab} ±0.65	-3.20 ^a ±0.55	2.17 ^b ±0.94	34.14*
Paternal	1.66 ^b ±0.49	2.20 ^{ab} ±0.59	-2.60 ^a ±0.65	2.06 ^{ab} ±0.62	22.46*
2. Household Chores					
Maternal	2.33 ^b ±0.72	-2.80 ^a ±0.54 ^{ab}	3.83 ^a ±0.52	2.47 ^b ±0.43	32.74*
Paternal	1.47 ^b ±0.59	-2.07 ^{ab} ±0.94	2.53 ^a ±0.88	1.60 ^b ±0.35	20.96*
3. Affection					
Maternal	-1.13 ^b ±0.29	2.13 ^a ±0.86	-2.50 ^a ±0.79	-1.26 ^b ±0.55	30.66*
Paternal	-1.00 ^b ±1.29	-1.20 ^b ±0.45	1.60 ^a ±0.52	-1.20 ^b ±0.82	3.88*
4. Discipline					
Maternal	1.33 ^c ±0.52	2.56 ^{ab} ±0.79	-3.07 ^a ±0.85	2.00 ^b ±1.54	44.09*
Paternal	1.73 ^b ±0.98	2.33 ^{ab} ±0.49	-3.07 ^a ±0.61	1.93 ^b ±1.33	32.37*
5. Temporal Involvement					
Maternal	-1.03 ^b ±0.54	-2.26 ^b ±0.33	2.87 ^a ±0.76	-0.80 ^c ±0.68	29.33*
Paternal	-0.96 ^b ±0.66	1.53 ^a ±0.91	-1.60 ^a ±0.82	-0.93 ^b ±0.45	25.93*

Note: Means in the same row that do not share superscripts differ at p<0.05 using Duncan Multiple difference comparison

Note: - mean score shows younger sibling treated with more of specified PDT domain.

+ mean score shows older sibling treated with more of specified PDT domain

Differential Privileges: In case of four sibling dyads, girl-boy dyad scored significantly higher mean scores on both maternal ($M=3.20$) and paternal ($M=2.60$) differential treatment followed by boy-girl dyad [$M=2.33$] and [$M=2.20$] respectively. Further, from the differential PDT mean scores, it was observed that older siblings were favoured in the allocation of privileges against younger siblings except in girl-boy dyads where mothers and fathers allocated more privileges to younger boys compared to older girls.

Differential Household Chores: Turning to the allocation of household tasks, significant differences in mean scores of maternal and paternal differential treatment of four sibling sex dyads were observed. Except boy-girl dyad, both mothers and fathers allocate more chores to older child as compared to younger child in the family which was similar to the findings for privileges. Duncan follow up test revealed that in all the four dyads, older sisters in girl-boy ($M=3.83$) dyad reported highest maternal differential treatment in allocation of household tasks.

Affection: As noted, the analyses focusing on maternal differential affection mean scores were relatively more in mixed gender dyads, that is, girl-boy ($M=2.50$) and boy-girl ($M=2.13$) as compared to same sibling dyads, that is, boy-boy ($M=1.13$) and girl-girl pairs ($M=1.26$). Except boy-girl dyads, mother provided more affection to younger siblings as compared to older siblings, that is, in boy-girl dyads; boys received more affection from mothers as compared to daughters. Paternal differential affection revealed some interesting findings as fathers showed more affection to daughter in both boy-girl dyads well as girl-boy dyads as compared to sons. Mothers were found to be more differential in their treatment of the two siblings as compared to fathers.

Discipline: Comparatively maternal and paternal differential discipline mean scores were relatively higher in opposite sex dyads, that is, for girl-boy ($M=3.07$); ($M=3.07$) and for boy-girl ($M=2.56$); ($M=2.53$) as compared to same sex dyads, that is, for girl-girl ($M=2.00$); ($M=1.93$) and for boy-boy ($M=1.33$); ($M=1.73$) respectively. In general both mothers and fathers modal response was to discipline older child more as compared to younger child and parents were stricter with boys as compared to girls.

Temporal Involvement: Comparing the four sibling dyads' mean scores in this domain, it was evident that adolescents from girl-boy dyads faced significantly higher differential maternal ($M=2.87$) and paternal ($M=1.60$) treatment followed by adolescents from boy-girl dyads ($M=2.26$) and ($M=1.53$) which was followed by boy-girl dyads ($M=0.80$) and ($M=0.93$) respectively. Mothers spent more time with daughters in boy-girl and girl-boy dyads. Mothers also spent more time with younger, second born siblings, regardless of sex. Fathers spent more time with first and second born sons than with the daughters.

Parental and Contextual Correlates of PDT

In order to explore associations between parental and contextual variables and PDT, Pearson correlations were conducted and results were presented in Tables 2 and 3. For the parental variables, a very different pattern emerged for fathers and mothers. Emotionality, a temperament quality was significantly correlated with father differential treatment (FDT) in domains of household chores, affection and temporal involvement. This means that fathers who were temperamentally more emotional were more differential in their treatment of children in the family. Highly active fathers were found to be less differential in their treatment of two siblings in the domains of affection as temperamental quality; activity was negatively significantly correlated with paternal differential affection. Sociability was negatively significantly correlated with maternal and paternal differential treatment in domain of household chores. This showed that more sociable parents were less differential in their treatment of siblings in this domain. Further sociability was negatively significantly correlated with paternal differential affection. This depicted that more sociable fathers were less differential in their treatment. Impulsivity was found significantly correlated with paternal differential affection. More impulsive fathers were more differential in their treatment.

Malaise was found to be significantly correlated with parental differential treatment in domains of household chores and affection and paternal differential temporal involvement with children. This reflected that parents who were at risk of depression were more differential in their treatment.

Table 2: Correlations between parental variables and different domains of PDT

Parental variables	Differential privileges		Differential household chores		Differential affection		Differential discipline		Differential temporal involvement	
	Mothers	Fathers	Mothers	Fathers	Mothers	Fathers	Mothers	Fathers	Mothers	Fathers
1. Temperamental Qualities										
Emotionality	0.00	0.12	0.15	0.17*	0.11	0.33*	0.00	0.11	0.01	0.18*
Activity	0.00	-0.07	0.13	-0.15	0.06	-0.26*	-0.01	-0.08	-0.02	-0.10
Sociability	-0.03	-0.10	-0.17*	-0.22*	-0.10	-0.31*	-0.02	-0.10	-0.01	-0.14
Impulsivity	0.08	0.04	0.13	0.12	0.09	0.28*	0.07	0.03	0.07	0.07
2. Malaise	0.04	0.08	0.18*	0.24*	0.18*	0.34*	0.03	0.06	0.04	0.21*
3. Emotional Intelligence	-0.01	-0.04	-0.18*	-0.17*	-0.14	-0.31*	0.00	-0.03	0.02	-0.14

* $p < .05$ **Table 3: Correlations between Contextual Variables and Different Domains of PDT**

Contextual variables	Differential privileges		Differential household chores		Differential affection		Differential discipline		Differential temporal involvement	
	Mothers	Fathers	Mothers	Fathers	Mothers	Fathers	Mothers	Fathers	Mothers	Fathers
1. Parents' Education	-0.05	-0.03	-0.18*	-0.17*	-0.12	-0.17*	-0.04	-0.02	-0.07	-0.10
2. Marital happiness	0.03	0.02	-0.22*	0.21*	-0.15	-0.31*	-0.01	0.00	-0.02	-0.14
3. CHAOS	0.03	0.01	0.18*	0.16	0.12	0.30*	0.04	0.03	0.02	0.14

* $p < .05$

Finally, emotional intelligence was found negatively significantly correlated with PDT in domains of household chores and FDT in domain of affection. It was interpreted in the manner that emotionally intelligent parents were less differential in nature.

Considering next, contextual variables, it was reflected from Table 3 that parents' education and marital happiness were significantly correlated with PDT in domain of household chores and FDT in domain of affection. These results are interpreted to mean that parents who are educated and happily married were less differential in treatment of siblings. In addition household chaos was significantly linked to maternal differential household chores and paternal differential affection. This means that household chaos was particularly stressful for mothers and fathers.

DISCUSSION

A body of research and theory suggests that parents' differential treatment of siblings is a central dynamic in family life (Brody et al. 1992). The present study adds to this literature by documenting the family patterns and correlates of differential treatment in two-parent fami-

lies. Importantly, our findings showed that gender typed treatment of offspring required both a set of values that disposed parents toward particular parenting strategies as well the opportunity to enact those values that is the presence of both a daughter and a son.

Results revealed that both parents were reported to be more affectionate to young child in the family and the reason may be that younger adolescents display more affectionate behaviours towards parents that are then reciprocated.

The findings for privileges and chores were consistent with early writings about sibling constellation and with recent discussions about the special status and responsibilities that are the prerogative of firstborns. The data suggested that PDT in the domain of privileges and allocation of chores may be driven by parents ideas about the status and responsibilities of firstborn (for example, to set an example, to be a role model for younger siblings). In addition, differential treatment in these domains may derive from parents' ideas regarding their children's maturity, with older adolescents receiving both more freedoms and more responsibilities. Although chores and privileges were the prerogative of older siblings in the sample as a whole (Tucker et al. 2003), older brother with younger sisters

performed relatively fewer chores and older sisters with younger brothers were granted relatively fewer privileges.

Children's reported that both parents discipline the older child more often than the younger child. Differential discipline on the part of mothers and fathers does not necessarily reflect parental favouritism. Indeed, parents appear to be making discipline decisions to some extent that coincide with the developmental level of the children. In this case, parents were directing more discipline efforts to the stronger, more able, older sibling. Not only did parents discipline children differently, but families in which the older child was receiving more discipline appeared to have more optimal family outcomes, indicating that disciplining an older and stronger adolescent sibling may result in better family system functioning than in those families where parents discipline children equally regardless of the child's developmental level.

In case of differential temporal involvement, adolescents' sex was a significant factor, with mothers specializing in time with daughters and fathers in time with sons. As has been argued by other investigators (Harris and Morgan 1991; Tucker et al. 2003) and in accordance with social learning theory, parents sex typed involvement with their offspring may be linked to parents beliefs that they have more in common with or are more responsible for the socialization of their same sex children. Offspring also may be more inclined to seek out their same sex children.

For parental differential affection, these results seen to refute the earlier findings that fathers interact preferentially with sons (Belsky 1984) and are in line with the findings by some researchers (Trama 2011). This seems all the more plausible in the present time. Although preferential treatment was given to sons in the earlier years, especially in the Indian cultural context, today, the scenario has somewhat changed. Daughters are considered to be as significant as sons by the parents, and this is especially so in the middle to upper middle class Indian families. This plausibly explains as to why, by and large, parental affection and warmth was unrelated to the child's gender.

Replicating previous studies, some evidence for links between parental factors and PDT were found (Atzaba-Poria and Pike 2008). Correlations revealed that paternal and maternal tem-

peramental qualities like emotionality and impulsivity were negatively correlated with different domains of PDT. As higher emotionality and impulsivity were the signs of neuroticism in the personality of individual, also these temperamental qualities are related to stress; therefore such parents would be more likely to treat children differently. As parenting stress has been found to be strongly tied to parental psychological health and well-being (Deater-Deckard 2005), the researchers examined parental malaise and their relationship to PDT and found malaise as a significant factor for PDT. Specifically, prolonged feelings of sadness and despair, loss of appetite and enjoyment, lethargy, and thoughts about suicide are indicative of psychological mental state problems. These symptoms, although not always meriting a diagnosis of psychopathology per se, remain influential in parenting stress and coping processes. Parents' reporting higher levels of malaise were more likely to treat their children differently.

The study also examined three contextual variables: socio-economic status, marital happiness and household chaos. These variables were chosen as they can limit parenting resources. Socio-economic status and marital happiness were predictive of the PDT. Lower SES is typically characterized by elevated stress. Under such stress parents "may become less consciously or intentionally equitable and more driven by preferences or child characteristics in their childrearing efforts". Results reflected lower levels of PDT when parents reported elevated levels of marital happiness. Previous research has found that conflictual marriages set the stage for PDT. That is, when mothers and fathers fail to resolve their conflicts, they may misuse their relationship with their children as part of their conflict. This idea can be seen when parents create an alliance with one child, excluding others, thereby increasing differential treatment (Kitzmann 2000). Using the CHAOS, the present research has demonstrated that household characteristics such as regularity, routines, noise and over crowding also play an important role for fathers' and mothers' parenting behaviour.

CONCLUSION

In the face of social norms for equal treatment, this study provided evidence that moth-

ers and fathers often treat their adolescent offspring differentially. In families, mothers and fathers both were more affectionate to the younger siblings in same-sex dyads. But mothers were more affectionate towards boys either younger or older in opposite-sex dyads than girls, whereas, fathers were relatively more affectionate and towards girls irrespective of their order of birth. Regarding the display of allocation of privileges, assigning household responsibilities and disciplining older siblings received most favourable treatment from both mothers and fathers in the same-sex dyads and that their patterns were related to parental and contextual variables.

RECOMMENDATIONS

- Families don't tend to talk about differential treatment of siblings. It is important for families to talk about these issues and for mothers and fathers to really listen to what their kids are telling them about their actions is affecting them.
- The present findings demonstrated that relationships between individuals in the family are part of a larger system. The family system is affected by contextual factors as well as individual characteristics of family members, pointing to the value of attending to all family members.
- Gender-typed patterns of differential treatment were reported across opposite-sex sibling dyads, reflecting gender-discrimination towards girls in the families. Parents must develop the attitude that children should be valued equally, regardless of their gender and functional contributions to the family.

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