Social Competence and Parental Differential Treatment Across Sibling Dyads

Helena Karnilowicz, Meenakshi Palaniappan, Shannon McCarthy, Taryn Larribas, Margaret Gross, Shirley McGuire, University of San Francisco Nancy L. Segal, California State University Fullerton

Introduction

- Parental differential treatment (PDT) is defined as unequal treatment of siblings that can take place across an array of domains.
- **PDT has been lin**ked to siblings' externalizing and internalizing symptoms, sibling relationship quality, and self-worth (Shebloski, Conger, & Widaman, 2005).
- However, this relationship may be moderated by siblings' perceptions of the fairness of their differential treatment (Kowal et al., 2002).
- Children often justify parents' preferential treatment by noting differences between themselves and their sibling, such as age and personality (Kowal & Kramer, 1977).
- Indeed, studies have shown that PDT varies as a function of genetic relatedness between siblings (Pike et al., 2000).
- Thus, siblings who are genetically similar and same-aged could perceive differential parental play as unfair, which may influence their sense of social competence.
- The purpose of the current study is to examine the relationship between PDT in the area of play and siblings' social competence using a novel, behavioral genetic design.

Research Questions

Do siblings' reports of social competence differ by Parental Differential Treatment in time spent with parents?

Do siblings' reports of social competence differ by dyad type, suggesting possible genetic and age correlates?

Participants

Participants 252 dyads:

- 54 MZ twin pairs
- 86 DZ twin pairs (52 same-sex; 34 opposite-sex)
- 43 VT twin pairs (16 same-sex; 27 opposite-sex)
- 69 Full sibling pairs (36 same-sex; 33 opposite-sex)
- Aged 8-12 (M = 9.6, SD = 1.4).
- The families were predominantly middle class, with 63% of European ancestry.
- The children were interviewed about their family relationships by trained testers as part of a threehour home interview.
- Pairs with children who experienced birth difficulties that may affect behavioral development were excluded.

Criteria for Virtual Twins:

- Both unrelated siblings must be reared together before I year of age.
- Must be enrolled in the same grade at the time of testing.
- May attend separate classrooms or separate schools.

Design					
	MZ twins	DZ twins	Full Sibling pairs	VT pairs	
Genetic Relatedness (Zygosity)	I00%	50%	50%	0%	
Sex Composition	Same Only	Same & Opposite	Same & Opposite	Same & Opposite	
Age Differences	Ο	0	X = 26.9 months	X = 3.7 months	



Funding

Twins, Adoptees, Peers, and Sibling (TAPS) Study University of San Francisco and California State University, Fullerton

Funded by: The National Institute of Mental Health (Roi MH63351)

Measures

Parental Differential Treatment in Play

Parents completed a 3 item subscale assessing three different dimensions of parental differential treatment of the two siblings. The item correlations between the 3 dimensions range from .25 to .45.

For this study, we focused on PDT in the area of play, which was the following: In general do you treat sibling 1 and sibling 2 equally with respect to time and activities for play? I

- treat them: I = Very Equally
 - 2 =Somewhat the same
 - 3 = Somewhat differently
 - 4 = Very Unequally

Social Competence

Siblings completed the Social Competence subscale of the Perceived Peer Competence measure (Harter, 1982). Internal reliabilities for the Social Competence subscale were .69 and .67 for sibling 1 and 2, respectively.

Instructions were as follows:

For each question below, first pick the sentence that best describes you. For example, are you more like kids who would like to play outdoors, or are you more like kids who like to watch T.V.? Then, decide if the sentence is really true for you or only sort of true for you.

Results

•	A mixed 2 reporter (sibling 1 vs. 2) x 2 PDT (same
	treatment vs. different treatment) x 4 dyad type
	ANOVA was conducted to test the research
	questions.

- The results showed a significant trend for the relation between PDT and siblings' social competence, F(I, 234) = 2.93, p = .088.
- Results were not significant for the PDT x Dyad Interaction, however siblings 'social competence means were in the expected direction, suggesting genetic and age effects.

perceptions of the fairness of parental preferential treatment and their socioemotional well-being. Journal of Family Psychology, 16, 297-306 differential treatment. *Child Development, 61,* 113–126. analysis of differential experiences of adolescent siblings across three years. Social Development, 9, 96-114. among differential parenting, perceived partiality, and self-worth: A three-wave longitudinal study. Journal of Family Psychology, 19,

Kowal, A., Krull, J. C., Kramer, L., & Crick, N. R. (2002). Children's Kowal, A., & Kramer, L. (1997). Children's understanding of parental Pike, A., Manke, B., Reiss, D. & Plomin, R. (2000). A genetic Shebloski, B., Conger, K. J., & Widaman, K. F. (2005). Reciprocal links



PDT Play x Dyad Type



The relationship between PDT and Social Competence suggests that differential parental involvement in play may reflect or result in differences in siblings' social competence.

Although the PDT x Dyad Interaction was not

significant, siblings' social competence means demonstrate support for the influence of genetic and age similarity in moderating negative outcomes.

 MZ twins' social competence means are relatively low when their parents report unequal time and involvement in play; however, very few parents of MZ twins report treating them differently.

Limitations

 Due to low statistical power, the interaction between PDT Play and Dyad type could not be fully examined.

References

633-642.