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Families' Experience of Intellectual Disability and the Level of Empathy in Adolescents

Abstract: The development of empathy is fostered by a properly functioning family whose aim is to satisfy the emotional needs of children, to encourage them to experience a wide range of emotions, as well as to offer opportunities to observe and participate in social interactions that develop emotional sensitivity. The lack of satisfaction with the internal family relations and particular patterns of interactions may hinder the development of positive emotional behavior, such as empathy, understanding, altruism, or compassion. It is interesting to explore, therefore, whether a mentally disabled sibling influences the level of cognitive empathy among young people. The author's own research employed the "Empathic Understanding of Others Questionnaire" designed by Węgliński [1987]. The study group consisted of 100 families, out of which 50 had a child with a mental disability.

Key words: empathy, sibling of a mentally disabled person, family with a disabled child.

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Empathy in psychological and pedagogical research – introduction

Empathy is defined as the ability to feel for others, understand, and share emotions. It comprises various components: physiological, cognitive, emotional, and behavioural [Zahn-Waxler et al. 1992].

According to Davis [1999], empathy happens when there is contact between the observer and the observed, with an ensuing reaction: cognitive, affective and/or behavioural, on the part of the observer. People's individual behaviours determine the ways they are perceived by others, which in turn affects these types of relationships which are possible in a given situation. Empathy can be regarded as a bridge between the feelings of the subject and of the persons coming into interactions [Czerniawska, Dolata 2005].

Similarly, French researchers Niedenthal, Krauth-Gruber and Ric [2016] define empathy as adopting the perspective of another person, that is, the process by which the observer puts him-/herself in the situation of the observed. At the same time, they stress that “this process requires that an individual when observing a person in a given affective state, should forgo their own perspective and attempted to ‘empathize’ with the subject's situation [Davis 2004]. In this role, they must immediately assess the situation in the same way as the subject would, and feel the same emotions” [Niedenthal et al. 2016, p. 231].

Węgliński [2010] writes about empathy in terms of the ability that motivates people to seek emotional intimacy and create bonds with others. This is done through emotional syntony, i.e. the ability to accord with other people in pleasant and unpleasant situations, and through understanding the position of the other person, feeling for their states of mind and feelings. Many authors point to the fact that it is necessary to supplement the concept of empathy by a regulatory aspect, communicative, which should be understood as the ability to communicate and mirror the feelings and emotions in the empathising person [Burleson 1982, Doherty 2009]. The affective aspect itself remains invisible until it is suitably attired in words-comfort-intended communication is a core aspect of empathy [Zdybel 2015]. It is not hard to see that empathy is a complex, multifaceted phenomenon, extremely hard to test as dependent on a series of context factors.

Tests have shown that the level of empathy in an individual determines their psycho-social functioning in the community. Here are some examples of such relations:

- a) The results of tests carried out by Polish researchers Marcysiak, Siek and Bielecki [1995] looking for correlation between the level of empathy and fear or aggression in adolescents have shown the existence of negative correlation between empathy and irritability. It appeared that the higher the level of empathy persons admitted, the less likely they were to manifest behaviours such as: anger, irritation, lack of patience, or inclination to worry others. On the other hand, positive correlation between empathic understanding and the sense of guilt has been confirmed. The greater the empathy in relation to another human being, the stronger the sense of guilt.
- b) Similar findings were recorded in the earlier Polish research [Jagielska-Zieleniewska 1978, Węgliński 1983, 1984], which confirmed the negative correlation between the level of empathy and the the level of aggressiveness, defined as antisocial behaviour, based on malevolence and ill will – physical, verbal, or social. According to Węgliński there is therefore, a positive correlation between the level of empathic understanding, and behaviours that are compatible with social standards and expectations.
- c) Molchanov [2014] in his research tried to determine the correlation between empathy and strategies of solving moral dilemmas, and the system of values during the period of adolescence; he also showed the relation between gender and the level of empathy, and the relationship between empathy and the place of living (big/small town). The subjects were adolescents between 13 and 21 years of age. In the studies, there were defined six strategies of solving moral dilemmas: the strategy of concern and care, justice, dependence on the context, the paradox of the context, doubt, and selfishness. Three major principles to be selected were: concern and care, justice, and the person's own benefits. The results have shown significant correlation between empathy and the strategies of solving moral dilemmas. It turned out that empathy correlated best with the strategy of care. It is the strategy of showing care in all sorts of moral dilemmas. The subjects were supposed to share such values as: kindness, charity, altruism, readiness to sacrifice oneself, as well as instrumental values, like trust in people, or feeling for people in need. For these subjects, respect and social approval were essential. The following four

strategies showed a moderate level of empathy. The strategy of justice, based on the principle of justice, gives priority to respecting other people's rights. For those subjects it was important to get their own benefits and be in the position of leadership. Self-esteem and self-regulation were higher than in other groups. The level of empathy was average, though. Subjects using the strategy dependent on the context exercised care in interaction with their peers, and justice in interactions with adults. For these subjects, the essential were: kindness, readiness to sacrifice and courage, but also their own benefits. The level of empathy in those subjects was higher than with the strategy of justice, and lower than with the strategy of care. Subjects exercising the strategy of concerns, presented characteristics such as: kindness, respect for others, honesty, they were also law-abiding and honest. Subjects using the strategy of context paradox were closer to the strategy based on justice rather than the one based on care. Significance was given to courage, autonomy and independence, their own benefits and the position of the leader were important for them. The lowest level of empathy was found in persons using the strategy of selfishness, oriented on satisfying one's own needs and benefits. The most important value for these people was caring for oneself, comfort, and leadership. The results of tests carried out by Molchanov [2014] have confirmed the existence of gender differences in levels of empathy. Girls presented a higher level of empathy than their peer boys. It also appeared that teenagers in smaller places tended to use strategies based on care and concern, thus presenting a higher level of empathy than their peers in large cities.

- d) Similar conclusions were found in the Polish context. Czerniawska and Dolata [2005] in their studies tried to assess the correlation between empathy and determination and the subjects' systems of values. The authors assumed that these two personality dispositions would show preference for different values. The tests involved 325 students aged 20-24. Empathy was tested by means of Wegliński's [1989] questionnaire to test Understanding Other People with Empathy; determination – by J.J. Ray's scale of determination D-26; and the preferred values by Rokeach's Scale of Values. Test results indicated that people with higher levels of empathy valued more interpersonal relations, and less the hedonistic values. Their values were reflected in the need for integration and harmonious relationships with others. Persons with higher levels of determination

appreciated more the values focused on oneself (intrapersonal) and indicating the significance of personal achievement.

- e) Empathetic people focused more on moral values, such as: being affectionate, helpful, attentive, or forgiving. To a lesser extent, they preferred the values focused on oneself and on personal benefits: being ambitious, independent, or talented. The reverse situation has been observed with regard to the other personality dimension that is determination. The stronger determination the subjects presented, the higher they ranked personal values, and the lower the moral values or these that affect interpersonal relationships [Czerniawska, Dolata 2005].

The family, as the context for development of empathetic disposition in individuals

It is the family that plays the crucial role in the process of shaping of the empathetic disposition, and learning the ways of their practical implementation – the properly functioning family in which there are positive patterns of emotional response, and children experience a sense of safety, support and love [Walecka-Matyja 2013]. The quality of the emotional climate in the family depends on the communicative competence of the family members, openness and constructive conflict resolution [Rostowska 2006]. In this context, it is worth asking, what are the conditions for developing the empathetic behaviours in a family with an intellectually disabled child. In subject literature there are two standpoints describing the functioning of the able-bodied children and teenagers together with a disabled brother or sister. Some of them indicate that the able bodied siblings may be exposed to increased levels of emotional problems or behavioural disorders. However, other researchers claim that the able-bodied siblings do not always come up against emotional or adaptation difficulties, but they can also develop effective ways of overcoming problems, or altruistic behaviour [Sidor 2005].

Research methodology

The aim of the research

The findings presented in the article constitute a part of a bigger research project on the psychological situation of the families with a disabled child.

The article discusses the preliminary analysis of the level of empathy among mentally able siblings of people with severe or profound mental disability. The aim of the research was to offer the answer to the following question: Do the levels of general empathy differ between people who have and who do not have a mentally disabled sibling?

Research tools

The data was collected with the use of a Polish tool – the Empathy Understanding Questionnaire (KRE) [Węgliński 1983a] that is often employed in scientific research. The questionnaire is univariate and it includes 33 statements about the thoughts and experiences regarding relations with others. The tool serves to measure empathy, whose components are both emotional and cognitive, and it attempts to point to the motivation behind the individual's helping behaviors directed towards the person one empathizes with. The author enumerated the following main emphatic tendencies: 1) sharing pleasant as well as difficult experiences with others, 2) emotional syntony, 3) sensitivity to the experiences of others, 4) readiness to sacrifice for others, 5) sympathizing with the experiences of others [Węgliński 1984]. The study subjects' scores range from 0 to 99 points; the higher the score, the higher level of empathy.

The reliability of KRE is $r_{tt} = 0.91$ [Węgliński 2010]. The stability of the questionnaire was assessed with the use of the triple testing method of the same group (52 students of vocational schools); after three months the stability was $r = 0.77$, and after ten months – $r = 0.66$ [Węgliński 1984]. The diagnostic accuracy is satisfactory: the correlation between the results achieved with the use of KRE and the Questionnaire Measure of Emotional Empathy by Mehrabian and Epstein [1972] was $r = 0.60$ [Węgliński 1989]. Moreover, the levels of empathy measured to date with the use of KRE reveal positive correlation with socially expected behaviors such as altruism, kindness, care; at the same time, negative correlation is observed in the case of egoistic or aggressive behaviors. Moreover, KRE differentiates the study subjects by sex and the level of social maladjustment [Węgliński 2010].

Characteristics of the study subjects

The study was conducted on a group of 211 people, out of which 100 mentally able people with younger siblings were selected for the analysis discussed in the article.

The study group was composed of brothers (25 people) and sisters (25 people) of people with mental disability; 60% of the younger siblings were diagnosed with moderate to severe, while 40% – with profound mental disability. All disabled lived with their families. For the subjects, the age range was 16 to 22 ($M=18.6$), 46% of the subjects (23 people) lived in the countryside or small cities, while the remaining ones (54%) in medium-sized or big cities. Of the subjects, 82% (41 people) were raised in two-parent families, and 96% (48 people) had only one brother or sister. Of the study group, 52% (30 people) were pupils or students, while 48% were professionally active. Finally, 16% of the subjects lived on their own.

The reference group consisted of the siblings (25 women and 25 men) who had mentally abled younger siblings. The age range was from 16 to 22 ($M=19.2$), 40% of the subjects (20 people) lived in the countryside or in a small town; 88% (44 people) were brought up in a two-parent family, and 84% (42 people) had only one brother or sister; 88% (44 people) of the reference group were students or pupils, and 12% were professionally active.

The study and the reference group were similar as far as the sex, age, place of residence and the family structure are concerned.

Procedure and statistical design and analysis

The research was conducted in the area of the Lublin and Podkarpackie Province. The contact with the siblings of the mentally disabled was established through five special centers for children and young people with mental retardation. The contact with the siblings of the mentally able was established through two high schools and two universities. The research was conducted individually. The subjects received a set of tools (five tools including the Empathy Understanding Questionnaire – KRE devised by Węgliński) and were asked to fill them in and send back to the provided address.

The study was conducted in accordance with the Helsinki Declaration of the World Medical Association [Williams 2008], which reflects the ethical principles for research involving humans. Participation in the study was voluntary, and the anonymity and ethical treatment of the data were guaranteed. All analyses were conducted using SPSS for Windows Version 24. Differences were considered significant at the level of $p < .05$.

The results, interpretation and the conclusions

The researchers generally adopt two approaches to describe the psychological situation of the siblings of the disabled people. Some of them claim that the presence of a disabled child has a positive influence on the able-bodied siblings – such a situation fosters the development of certain feelings, including tolerance, compassion, and better understanding of others in the mentally able siblings. What is more, they are able to appreciate their health and intellectual capabilities properly. On the other hand, the researchers claim that siblings may suffer from a high level of emotional problems, conduct disorders, low sense of family bonds, the anxiety regarding the existence of a sibling with disability, and finally they may have a sense of burden regarding looking after the disabled sibling [Kruk 1996, Borzyszkowska 1997, Żyta 2004, Sidor 2005, Twardowski 2005, Wojciechowska, Cierpka 2007]. What is the level of empathy among the siblings of people with and without disability?

The data (mean and standard deviation) regarding the level of general empathy of siblings of the mentally disabled people when compared with the people whose siblings have no disability is presented in Table 1. The differences in the average results between the study (A) and the reference group (B) were verified with the use of Independent Samples t Test.

The analysis of the empirical data in Table 1 revealed statistically significant differences between people who have a younger sibling with disability and those whose siblings develop properly ($p < .001$). The siblings of the people with severe and profound mental retardation are characterized by a considerably higher level of general empathy ($M=68.96$) than people in whose family there are no disabled children ($M=58.48$).

Table 1. The comparison of the average levels of general empathy among people whose siblings are mentally disabled and whose siblings have no disability

The level of general empathy	M	Sd	Min	Max	t	df	p
Siblings of people with mental disability (group A)	68.96	16.66	29.00	98.00	3.405	98	.001
Siblings of people without disability (group B)	58.48	12.39	30.00	94.00			

Source: own elaboration.

It means, therefore, that people who were raised together with a disabled sibling are better disposed, more trusting and kind to their surroundings than people brought up with a sibling without disability. They are more prone to sympathize with others, share both pleasant and difficult experiences, and they are ready to empathize with others, understand their conditions and experiences. Moreover, they are more willing to sacrifice for others. The studies conducted by Węgliński [2010] confirm that the general level of empathy measured with the KRE positively correlates with the observed socially expected behaviors, such as altruism, kindness, and care, while negatively with the egoistic or aggressive behaviors. The author's own research supports the findings of other researchers. According to the previous studies, siblings of a disabled child are more socially oriented and tolerant, they are more altruistic and more responsible than their peers. Moreover, the experience of "otherness" of their own sibling teach them to perceive the situation of others in a multidimensional context; in the adult life they might be characterized by exceptional maturity, tolerance, sensitivity, the ability to overcome difficulties, and by social involvement [Stoneman 1998, Pisula 2007, Palm 2011]. Moreover, the mentally able siblings emphasized the positive influence and experiences connected with having a disabled brother or sister. Discussing their feelings and memories, they pointed to high levels of empathy and altruism that resulted from growing up with a disabled sibling [Żyta 2010].

The discussion about the level of general empathy in people who have younger siblings (including mentally disabled siblings) can be enriched with the structure of the results that takes into account the sten scores (on the basis of the sten scores for girls and boys offered by Węgliński [2010]). The

data allowed for the determination of high (10–7 sten), medium (6–5 sten) and low scores (4–1 sten) that indicate high, average and low levels of general empathy among the study subjects. The data is presented in Table 2 and Diagram 1.

Table 2. The structure of the levels of general empathy among people with and without mentally disabled siblings (sten scores)

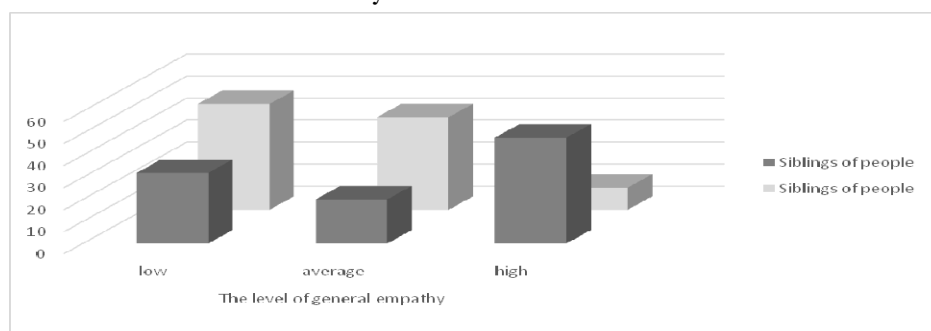
Stens	Siblings of people with mental disability (group A)		Siblings of people without disability (group B)	
	N	%	N	%
10	8	16.00	1	2.00
9	7	14.00	1	2.00
8	2	4.00	1	2.00
7	7	14.00	2	4.00
6	4	8.00	13	26.00
5	6	12.00	8	16.00
4	4	8.00	3	6.00
3	6	12.00	8	16.00
2	4	8.00	9	18.00
1	2	4.00	4	8.00
Total	50	100	50	100

Source: own elaboration.

The data presented in Table 2 indicates that women and men with high levels of general empathy constitute half of the study group (48%). However, 1/3 of the siblings of the mentally disabled (32%) exhibited extremely different results that indicate low levels of empathy. The remaining subjects from the group A (20%) received average scores, which translates into average levels of empathy. In the reference group (B), the majority of subjects displayed low (48%) and average (42%) levels of empathy; it can be concluded therefore that half of the people whose siblings are not disabled have

low levels of empathy. Subjects with high levels of empathy constituted the least numerous group (10%).

Diagram 1. The structure of the levels of general empathy among siblings of people with and without mental disability



Source: own elaboration.

The structure of the levels regarding general empathy in the compared groups differs depending on whether the study subjects grew up with a mentally disabled sibling (group A) or not (group B). First of all, half of the subjects whose siblings are mentally disabled exhibit high levels of general empathy, while half of the subjects whose siblings are not disabled – low levels of general empathy. Secondly, it can be seen that among those who have experienced living with disabled siblings there is a tendency towards more extreme attitudes: on the one hand, almost half of them display a high level of empathy; on the other hand, as many as a third demonstrate a low level of empathy. The results in the reference group were not as extreme, as the subjects displayed mostly low and average general empathy levels.

The group that seems particularly interesting from the perspective of special psychopedagogy is composed of subjects whose siblings are disabled and who exhibit low levels of empathy. This, in accordance with Węgliński's [2010] research, correlates positively with egoistic or aggressive behaviors. It may be concluded, therefore, that a disabled sibling does not determine a proper development of emotional competence. Studies conducted by other researchers confirm that the positive development of siblings is fostered by such factors as: personality of the parents, atmosphere in the family, the type and the level of the sibling's disability, external relations of the family, time

devoted to each child in the family, as well as the family's social and economic situation [Palm 2011]. The research conducted by Żyta [2004] indicated that the influence of the mentally disabled sibling on the psychosocial situation of their mentally able bothers and sisters depends to a large extent on the parenting style, atmosphere in the family, and integration of the family. Moreover, the studies pointed to the existence of two types of effects connected with the disabled siblings. Constituting the first type are the primary effects: household chores overload, less free time, role switching, as well as reactions to difficult behaviors. The secondary effects, in turn, include: difficult relations with the parents, anomalous contacts with the peers, as well as the ambivalent feelings regarding taking care of the disabled sibling in the future. The research conducted by Sidor [2005] confirmed the importance of the parents' attitude towards the child's disability for the proper relations between the siblings. The better relations between the siblings, the better the mentally able person functions in the family, school and professional environment, and the better their personality develops. The research conducted by Minczakiewicz [1995] revealed that the siblings of people with more severe mental disability oftentimes bear resentment, feel sad and stigmatized, and avoid contacts with their peers. Such families often isolate themselves from the outside world. Moreover, the studies carried out by Kruk [1996] revealed that able-bodied young people, seeing the amount of time devoted by their parents to the disabled sister or brother, may feel neglected and rejected. Oftentimes the healthy sibling declares understanding of the need for intense care, yet at the same time they experience the sense of harm and remorse and they are inhibited in the contacts with others [Borzyszkowska 1997, Twardowski 2011].

Conclusions

The comparative analysis of the levels of general empathy among siblings of mentally disabled people and young people whose siblings are mentally able allows for the formulation of the following conclusions:

1. Young people who have a younger mentally disabled sibling are characterized by significantly higher level of empathy than their peers whose brothers or sisters are not disabled.

2. The majority of the mentally disabled people's siblings exhibit either high level of empathy or low level of empathy.

The results may be treated as a starting point for a more in-depth study into the empathy development in children and teenagers in a broader context of the family's psychological situation. The exploration of this issue seems crucial not only in families with a disabled child, but also in families that do not experience any disability.

It should be emphasized that the development of empathy is fostered by a properly functioning family whose aim is to satisfy the emotional needs of children, to encourage them to experience a whole range of emotions, and to provide opportunities to observe and participate in social interactions that shape emotional sensitivity. Thanks to the closest members of the family, the children are not self-oriented, but they are attentive to the emotional needs of others [Plopa 2005].

Numerous studies have indicated that the members of happy families exhibit lower levels of anxiety, depression and loneliness when compared with the families whose members have worse relationships with one another. If teenagers observe parents who offer positive emotional models, especially towards the disabled family member, they develop the ability to record and to recreate the emotional climate of the family, including the development of pro-social behaviors such as empathy. The dissatisfaction with the family relations and given interactions models may affect the development of positive emotional behaviors, such as empathy, friendliness, altruism or compassion. Therefore regardless of the family type (with or without a disabled child), its structure (single-parent, two-parent, reconstructed), or other characteristics, the quality of the emotional climate of the family is crucial to the development of the emotional sensitivity of children.

Both inside and outside of the family, the adults' role is to encourage children to experience a wide range of emotions and offer them opportunities not only to observe, but also to actively participate in social situations that trigger emotions.

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