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Siblings of the mildly mentally handicapped

Courtney Sanders-Warmack

Clark Atlanta University

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Ten students were mailed postcards inviting them to participate in the study. The student's demographic data and background data were completed on-site by the researcher. The purpose of this study was to recognize the nonhandicapped sibling, and to examine stress as a factor influencing expressed attitudes towards the handicapped sibling. The research question for this study was: (1) Is there a difference in the levels of stress in siblings of handicapped children as indicated on the Child Anxiety Scale? The Null Hypothesis was: There is no difference in the level of stress as measured by the Child Anxiety Scale.

Results of this research study indicate that siblings of the handicapped show a significantly high level of stress as indicated on the Child Anxiety Scale.
SIBLINGS OF THE MILDLY MENTALLY HANDICAPPED

A THESIS
SUBMITTED TO THE FACULTY OF CLARK ATLANTA UNIVERSITY
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THE DEGREE OF EDUCATIONAL SPECIALIST

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COURTNEY SANDERS-WARMACK

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CHAPTER I

SIBLINGS OF THE HANDICAPPED

The birth of a child with a mental or physical handicap has a profound effect on the family. Each family's structure is redefined by the presence of a handicapped child (Post-Kammer & Nickolai, 1985). Research, however, rarely looks into the factors affecting the siblings of a handicapped child.

Siblings of the handicapped child are a concern of professionals and families interested in the field of education for exceptional children. The most auspicious developments in the field of special education are those of sibling self-help groups and siblings being presented as a troubled population (Edmundson, 1985).

The importance of recognizing siblings' needs arises when siblings realize their roles as surrogate parents and mini-caretakers (Fewell & Vadasy, 1986a). Early research reports devastating effects of handicapping conditions on siblings (Fewell & Vadasy, 1986).

Several developments indicate that siblings of handicapped children may also have special needs which have not been sufficiently recognized (Meyer, Vadasy & Fewell, 1986). For instance, Widerstrom (1986) states that there is a high incidence of emotional disturbance in nonhandicapped brothers and sisters of the handicapped. Widerstrom (1986) also contends that this emotional
disturbance may be due to siblings having to be responsible for effectively interacting with their handicapped brother or sister.

Stoneman and Brody (in Press) revealed that during daily activities and interactions in the home, the handicapped sibling most frequently assumes the role of teacher and manager. Siblings of the handicapped encounter major problems while living with a handicapped brother or sister. These major problems include stress, anxiety, and feelings of guilt directly related to the responsibilities siblings have as caregivers (Fewell & Vadasy, 1986).

Siblings of the handicapped harbor negative feelings about their handicapped sibling (Fewell & Vadasy, 1986). They are also unwittingly committed to the caretaking of their handicapped sibling (Featherstone, 1980). Siblings of the handicapped are maximumly involved; however, in the social and emotional development of his/her handicapped sibling (Fewell & Vadasy, 1986). Most importantly, siblings of the handicapped feel that they must become knowledgeable about the handicapped condition of his/her handicapped siblings (Powell & Ogle, 1985). This enables the nonhandicapped sibling to minimize his/her feelings of inadequacy and fear when interacting with his/her handicapped brother or sister (Powell & Ogle, 1985).

The literature suggests that siblings, whether they have brothers or sisters with mental retardation, cerebral palsy, epilepsy, autism, Down's Syndrome, or other
handicapping conditions, have similar experiences and similar needs (Featherstone, 1980). Siblings typically discuss the same general fears, problems and joys. The special concerns and unique needs of siblings are similar across handicapping conditions, economic, racial and cultural backgrounds (Meyer, Vadas, & Fewell, 1986).

Siblings of the handicapped are members of a unique family system. The immediate and future influence that the sibling with a handicapped sibling will have on a brother or sister will differ depending on a number of individual characteristics of the family system (Fewell & Vadas, 1986). Nonhandicapped siblings may have similar concerns, needs, and experiences, and the intensity and chronicity of those will vary from sibling to sibling (Powell & Ogle, 1985). The impact of a handicap on a sibling relationship is of significance because of the nature of the relationship. Siblings play various roles throughout their lives, serving well into adulthood (Crinic, Friedrich & Greenburg, 1983).

Siblings of the handicapped have their own special needs which must be recognized and met. Their ability to contribute to the growth, development, and happiness of their handicapped sibling is substantial (Bank & Kahn, 1982). The investment is large and they have the right to be recognized. Through recognition, educators and other professionals working in the field of special education would be able to learn more about the needs, concerns, and
factors influencing the lives of the nonhandicapped sibling (Post-Kammer & Nickolai, 1985). Therefore, professionals working in the field of special education should become interested in developing effective ways to support and guide this population of people who have been overlooked in the past.

**Statement of Purpose**

The purpose of this investigation was to recognize the nonhandicapped siblings, and to examine stress as a factor influencing expressed attitudes toward the handicapped sibling.

**Research Question**

The following research question was formulated by the researcher to guide the investigation:

Is there a difference in the levels of stress in siblings of handicapped children as indicated on the Child Anxiety Scale (Gillis, 1980)?

**Null Hypothesis**

Ho: There is no difference in the level of stress as measured by the Child Anxiety Scale.

**Definition of Terms**

**Disability.** Refers to a physical, emotional, or neurological deviation or discrepancy possessed by an individual. May constitute a handicap if the individual perceives the disability as such. Not all disabilities can truly be considered handicaps (Davis, 1986).
Mental Retardation. (Mildly Mentally Handicapped) A broad term that has been defined in a variety of ways according to different definition is that proposed by the American Association on Mental Deficiency (AAMD) in 1983. "Significantly subaverage general intellectual functioning resulting in or associated with concurrent impairments in adaptive behavior and manifested during the developmental period" (Classification in Mental Retardation, AAMD, Herbert Grossman, Ed., 1983). In the above definition, significantly subaverage is defined as "IQ of 70 or below on standardized measures of intelligence. This upper limit is intended as a guideline, it could be extended upward through IQ 75 or more, depending on the reliability of the intelligence test used."

Impairments in adaptive behavior is defined as "significant limitations in an individual's effectiveness in meeting the standards of maturation, learning, personal independence, and/or social responsibility that are expected for his or her age level and cultural group, as determined by scales." Developmental period is defined as "the period of time between conception and the 18th birthday" (Davis, 1986).

Sibling. One of the offspring of a pair of parents; a brother or sister without regard to sex (Davis, 1986).

Stress. A factor that induces bodily or mental tension and may be a factor in disease causation (G & C Merriam Co., 1964).
Limitations

Use of the results of the self-report questionnaire in this study may yield invalid responses from the participant due to his/her hesitation to answer items on the questionnaire truthfully (Gillis, 1980).

The population of this study was limited to siblings of the mildly mentally handicapped, grades K-5 from Atlanta to Metropolitan area. This exclusive sample may limit the extent to which the data can be generalized to the population at large.

The study was conducted by a graduate student working on her first directed research project. Due to the researcher's inexperience in completing a directed research project, information and analyses yielded from the study may not be as in depth or advanced literally when reviewed by an experienced researcher. Therefore, the study should be reviewed with these limitations in mind.

Population

The siblings of the mildly mentally handicapped and siblings of the nonhandicapped in Mobile, Alabama, and Detroit, Michigan, respectively were examined in this study. The total number of siblings studied was twenty; the students numbered ten and ten. In addition to considerations regarding the close proximity and availability of the schools which housed these students, it appeared that this selection represented an appropriate research base. It should be noted that the siblings of the
handicapped had brothers and sisters enrolled in schools in Mobile, Alabama, and the siblings of the nonhandicapped were enrolled in the Detroit Public Schools.

**Data Collection**

Letters were sent on July 6, 1990, to the local directors for the Mobile Area Association for Retarded Citizens which explained the proposed study and outlined the extent of involvement of the school personnel. Visitations were made to each department of special education for the purpose of describing the study personally to each director and requesting his support. Once approval was obtained for their involvement in the study, the Individual Education Planning Committee report for each mildly retarded handicapped elementary school student was reviewed. The IEPC reports, completed by special education personnel, contained demographic information, phone numbers, and current addresses which were helpful in my study. Careful attention was paid by the secretarial staff to block out the names of students to comply with confidentiality requirements. The names of all siblings and parents of the mildly handicapped children were obtained from these reports.

Once this data was secured, the questionnaire designed to be filled out and the Child Anxiety Scale were reviewed with the appropriate administrators. These questionnaires regarding the child's demographic data were completed on site by the researcher. The directors for the
Mobile Area Association for Retarded Citizens offered to write a letter of support to the parents of the siblings of the handicapped regarding the study. Self-addressed, stamped postcards were mailed, inviting the siblings to participate in the study. Five dollars was offered to encourage participation in the study, and to show appreciation for involvement. The cover letter, questionnaire and Child Anxiety Scale are presented in the Appendix. Every child was assured of complete anonymity in all aspects of their involvement in this study, therefore, their names were not disclosed.

The procedures used to secure data regarding siblings of the nonhandicapped were very similar. Letters and postcards were sent to parents of siblings of the nonhandicapped in the City of Detroit. The cover letter and questionnaire are also presented in the Appendix.

Of the hundred postcards sent to siblings of the handicapped and nonhandicapped, twenty responded, providing a return rate of twenty percent; of the twenty participants, all were usable.

The parents agreeing to have their children participate in the study reviewed a copy of the research proposal, and were informed of the scheduling and location of the test administration via telephone.
CHAPTER II
REVIEW OF LITERATURE

It is the purpose of this literature review to document the complexity and importance of families (Heward & Orlansky, 1984) and the significance of sibling relationship (Powell & Ogle, 1985) to the family system and to individual family members (Heward & Orlansky, 1984).

Early studies of nonhandicapped siblings focused on demographic characteristics (Lobato, 1983) such as birth order (Simeonsson & Bailey, 1983), in relation to personality characteristics (Powell & Ogle, 1985). The focus of recent investigations has shifted, however, to observational studies of the interactions between siblings (Powell & Ogle, 1985).

The literature involving a sibling of a child who has a handicap has, for the most part, paralleled the literature on nonhandicapped siblings. First, sibling-status variables that contribute to the psychosocial adjustment of the nonhandicapped sibling were observed (Powell & Ogle, 1985). The researcher noted that nonhandicapped siblings are affected in both positive and negative ways. Grossman (1972) reported that about one half of college students interviewed described the presence of a handicapped child in the family as a positive, integrative experience. These siblings showed increased tolerance for differences, as well as higher levels of empathy and altruism.
Grossman (1972) pointed out that the "humanness" of persons with mental retardation, as viewed by siblings was influenced by the severity of the retardation, and the extent to which the mother seemed to accept the retarded brother or sister. Grossman's research was carried out at a competitive, small, private women's college and at two noncompetitive community colleges. Although in the total population a high proportion of retarded people fell into the mildly retarded category, the classification included cultural-familiar retardation, which was concentrated in the lower classes. Their sample was comprised primarily of children with retardation due to organic causes, who tended to be lower in IQ. In the population of organically impaired retarded children, Down's Syndrome constituted the largest single diagnostic entity (Grossman, 1972). In response to 86 letters sent out, 13 replied that they were in college and would participate. The "diagnosis" used in the research was arrived at by first asking the sibling of the handicapped (Sib H) how his or her handicapped sibling (h) was diagnosed (and occasionally having Sib H write the parents for information if he or she did not know). They used this information in conjunction with detailed information about exactly what the handicapped child could do, e.g., what self-care skills he or she had, if the child talked, etc. Although some handicapped siblings (H) undoubtedly were misdiagnosed at least partially, either in terms of label or intellectual level, in general they felt
the ratings sufficiently accurate to be relied upon for the purposes of their research (Grossman, 1972).

Grossman's (1972) extended research project found a surprising number of brothers and sisters of retarded children who appeared to have benefited in some way from the experiences of growing up with a handicapped sibling. Grossman's research also found many students who seemed damaged: Students who were bitterly resentful of the family's situation, guilty about their rage at their parents and at the retarded sibling, fearful that they themselves might be defective or tainted; were sometimes truly deprived of the time and resources they needed to develop because every support the family had to give was used in the care of the handicapped child. In the study, about as many students seemed to have benefited as were harmed. Grossman also reported that they suspected that the study would find many more in the latter category in any unselected group of college-age brothers and sisters of handicapped children (Grossman, 1972). Although in the total population a high proportion of retarded people fell into the mildly retarded category, the classification included cultural-familiar retardation, which was concentrated in the lower classes. Their sample was comprised primarily of children with retardation due to organic causes, who tended to be lower in IQ. In the population of organically impaired retarded children,
Down's Syndrome constituted the largest single diagnostic entity (Grossman, 1972).

According to Farber and Rychman (1965), "role tension" was often experienced by siblings of handicapped children as the retarded child failed to advance socially, regardless of chronological age. A classic study by Farber (1960) suggested that siblings were often adversely affected by the degree of dependence of their handicapped sister or brother. Similarly, early studies reported devastating effects of handicapping conditions on families, ranging from higher divorce rates for parents of handicapped children to higher incidence or emotional disturbance in siblings (Widerstrom, 1986).

Meyer, Vadasy and Fewell (1985) also found that siblings of the handicapped stated that "If you have a handicapped brother or sister, you have different things to worry about than most of your friends." Carlisle (1984) stated that "siblings of the handicapped have often been asked, 'What have been the major problems for you living with your handicapped brother or sister?" Close to half of the responses of these siblings made references to their sibling's behavior as creating the major problems for them (Carlisle, 1984).

Research also supports the findings of other researchers related to the impact of handicapped siblings on the families. Dubinsky (1986) found that a sibling of a mentally retarded child "felt cheated because the brother
or sister was not the same as other kids. Siblings reported that 'I was waiting for the day he would wake up and be like me, a day that will never come.'" (p. 54).

Feelings and experiences shared by many siblings of the handicapped are feelings of anger, guilt, jealousy, embarrassment, loss, worry, and loneliness. Guilt can be devastating to the sibling who does not know how to handle this. Ellifrit (1984) stated, "I was supposed to be a good Christian and love and accept my sister when inwardly I did not. My biggest problem in dealing with Bonnie has been guilt." Siblings of the handicapped, however, have different worries from those of their friends (Meyer, Vadasy, & Fewell, 1985). Strangers or other kids interacting with nonhandicapped siblings may say things about their special sibling that hurt their feelings and make them wonder whether they are also different (Meyer, Vadasy, & Fewell, 1985).

Siblings who have sisters and brothers with handicaps express a number of special concerns they have about themselves, their families, the community, and the future (Powell & Ogle, 1985). Sadness, anger, guilt and embarrassment---siblings of the handicapped child experience almost all the same feelings their parents do (Murphy & Della-Corte, 1989). Their emotions are mixed (some positive, some negative), and their questions, though sometimes unvoiced, are many. Some siblings have extraordinary responsibilities for the handicapped child;
these responsibilities produce a number of specific worries and needs (Powell & Ogle, 1985).

Siblings may have similar concerns, needs, and experiences. The intensity and chronocity of those will vary from sibling to sibling (Powell & Ogle, 1985). Each sibling is a member of a unique family system, and the immediate and future influence that the sibling with a handicap will have on a brother or sister will differ depending on a number of individual characteristics of the family system (Powell & Ogle, 1985). Plans for the future of the disabled should consider the needs of the whole family. Although this planning focuses on the child with a disability, it is important to remember that other people in the family have needs too (Turnbull, Bronicki, Summers, & Roeder-Gordon, 1989).

Family characteristics, including family size, socioeconomic status, and religion, seem to be major factors contributing to sibling adjustment (Powell & Ogle, 1985). Crocker (1981) has suggested that siblings from larger families are generally better adjusted than those from smaller families. It seems natural that in two-child families where one child is handicapped, parents are more likely to rest all their hopes and expectations on their one handicapped child. In larger families, however, these hopes and desires can be distributed to several, easing the pressure on the one child.
Family socioeconomic status can also affect sibling responses to a handicapped child. Grossman (1972) found that siblings from middle-class families generally had a range of positive and negative feelings that were predictable from their parents' attitudes. Middle-class families often have problems in adjusting their high expectations for their handicapped child (Ogle & Powell, 1985). At the same time, middle-class families tend to be more financially secure and better prepared to utilize outside resources, such as camps, respite care services, and a wide range of professionals, in securing help for many family needs (Powell & Ogle, 1985).

Conversely, families of lower socioeconomic status often have limited financial resources (Fewell & Vadasy, 1986). Thus, siblings, especially females, who are from poorer families, may be overburdened with extra caregiving responsibilities that cannot be provided for through other channels (Featherstone, 1980).

Stubblefield (1965), in a review of the literature regarding the role of religion in parental acceptance of a handicapped child, noted that the birth of such a child often precipitates a theological crisis for many parents. Zuk, Miller, Bartram, and Kling (1961) established moderate but positive correlations between measure of religious background and material acceptance of a handicapped child. They found that Roman Catholic families tend to be more
accepting of a mentally retarded child than are Jewish or Protestant families: and they explained such acceptance as being derived from the explicit definitions supporting the home and family life decreed by the Roman Catholic Church (Zuk, Miller, Bartram, & Kling, 1961).

Additionally, parental attitudes and expectations, as well as characteristics of both the nonhandicapped and handicapped child, such as age, gender, temperament, and the type and severity of the child's handicap, also significantly influence the sibling relationship and affect sibling adjustment (Powell & Ogle, 1985).

Studies also suggest that being the sibling of a handicapped child evokes a range of emotional responses, from pride and enjoyment to irritation and resentment (Fewell & Vadasy, 1986). While these emotions may seem to show little difference from those characterizing all sibling relationships, the potential for more extreme responses exists, given the ongoing stress related to the presence of a handicapped child (Fewell & Vadasy, 1986).

In normal sibling relationships, there is a certain balance between the instrumental and expressive activities siblings engaged in together. A sibling's handicap may disrupt this balance. For example, in their home pilot observation of five older nonhandicapped siblings and their retarded brothers and sister, Stoneman and Brody (in Press) found that there were clear role asymmetries; frequently assumed the roles of teacher and manager. When siblings
who participated in workshops conducted by the Supporting Extended Family Members Program were interviewed about their experiences, many reported that activities they least enjoyed with their handicapped brother or sister were babysitting and caregiving. The siblings said they most enjoyed playing with the handicapped child. The siblings also noted that they did not have enough time to do the things they wanted to do, as well as time to spend with their parents (Fewell & Vadasy, 1986a).

Siblings' perception of their parents' attitudes regarding the handicapped child can indeed be a powerful influence on the nonhandicapped child's adjustment (Caldwell & Guze, 1960). Caldwell and Guze (1960), in a study of the adjustment of parents and siblings, looked at thirty-two families, one half of which had a handicapped child living in the home and one half of which had a handicapped child living in an institution. They found that, generally, where the two groups were clearly different was the sibling's perception of the ideal living arrangement for the mentally retarded child.

Researchers noted that there are negative and positive effects on nonhandicapped siblings (Grossman, 1972). Grossman proposed that the manner in which a handicap was interpreted and accepted delineated its impact on the siblings involved. Research on siblings of retarded children reflects, in part, detrimental effects on the psychological functioning of siblings of retarded children.
(Fewell & Vadasy, 1986). These effects generally involve greater anxiety, more conflicts with parents, and lower sociability or emphasis on interpersonal relationships than in families without a handicapped child (Grossman, 1972). Siblings, like parents, may experience guilt (Meyer, Vadasy, & Fewell, 1986), as well as anger (Ellifrit, 1984) toward the sibling.

Other authors have also concluded that there are positive aspects associated with the presence of a handicapped child in the family. Schipper (1959), basing results on parental histories and home observations, found that 75% of the siblings of Down's Syndrome children in the study were happy and well-adjusted. Schreiber and Feeley (1965) noted that, for some siblings of children with handicaps, there is an increased sense of maturity and responsibility resulting from the experience of growing up with a handicapped child. As stated by a parent in an article printed in the Exceptional Parent (1986), "My husband and John took care of the household chores. John was solicitous of his brother and his mother and took great responsibility for preparing his and his father's meals and cleaning house." Mates' (1982) study of thirty-two autistic children noted that, as a group, their sibling displayed higher-than-average levels of self-concept (Powell & Ogle, 1985). Heward & Orlansky (1984) made note of a little girl growing up with her handicapped brother. She states: "As brother and sister we were always close.
The public has a distorted view of the autistic child. This image may apply to some of the children, but not to all and certainly not to my brother, Douglas."

Research revealed that the model of a family with a handicapped child has included the mother, the father, and the affected child (Fewell & Vadasy, 1986). Only recently have siblings begun to become a focus of increased concern and attention (Powell & Ogle, 1985). Articles, books, and studies published by researchers concerning siblings of the handicapped have publishing dates printed as early as 1959. These publications, however, were few in number, and did not deal primarily with problems and concerns of the sibling but with that of the family as a whole.

Helsel (1978) is a sister of a sibling with mental retardation, epilepsy, and cerebral palsy. She tells of some of her feelings of embarrassment: "I was certain that everyone was looking at my brother with his obvious handicap and then wondering what was wrong with the rest of us" (p. 110).

Recognition has been slow in coming that the sisters and brothers of children with handicaps are important people in the total picture of human exceptionality. They have their own special needs, which must be recognized and met. Their ability to contribute to the growth and happiness of their handicapped sibling is substantial (Featherstone, 1980).
Implications as indicated in these articles contend that in general, the siblings of the handicapped are a population whose needs have been neglected (Post-Kammer & Nickolai, 1985). As the field of medicine continues to make progress in saving and prolonging the lives of individuals with various impairments, more children will be growing up with exceptional siblings (Powell & Ogle, 1985).

A child with special needs imposes demands which stress the entire family's ability to function effectively (Post-Kammer & Nickolai, 1985). Therefore, there is a need for research which examines the needs and problems of the sibling population.

It was the purpose of this chapter to examine past studies of siblings of the handicapped. It was evident that studies have been conducted purposefully to explore the problems of the siblings of handicapped children. Studies, however, have not focused on stressful behavior as a significant and prevalent problem of siblings of the handicapped child. Stress is an inevitable part of living, but excessive amounts of stress can cause damaging consequences in children (Trotter, 1989). Stress is how a person's body responds to change and children are unprepared to understand the process of change affecting their lives. Therefore, they are unable to cope with various stressful situations they experience while growing up (Trotter, 1989). It is important for these children to
be identified, diagnosed and counselled, insuring a more productive life in the future.

A review of the literature revealed that early studies of handicapped siblings focused on demographic characteristics (Lobato, 1983), however, the focus of recent investigations have shifted to observational studies of the interactions between siblings (Powell & Ogle, 1985). The literature reported that nonhandicapped siblings are affected negatively by having a handicapped brother or sister (Grossman, 1972). Early studies reported devastating effects of handicapping conditions on families ranging from higher divorce rates for parents of handicapped children to higher incidents of emotional disturbance in siblings (Widerstrom, 1986).

The literature reported studies in which the sibling of a handicapped child evokes a range of emotional responses, from pride and enjoyment to irritation and resentment (Fewell & Vadasy, 1986). The potential for more extreme responses exists given the ongoing stress related to the presence of a handicapped child (Fewell & Vadasy, 1986). The literature further reveals that research on siblings of retarded children reflects, in part, detrimental effects in the psychological functioning of siblings of retarded children (Fewell & Vadasy, 1986). These effects generally involve greater anxiety, more conflicts with parents and lower sociability or emphasis on
interpersonal relationships than in families without a handicapped child (Grossman, 1972).

The review indicated that the model of a family with a handicapped child has included the mother, the father, and the affected child (Fewell & Vadasy, 1986). Only recently has the literature begun to include a focus on siblings of the handicapped being a concern of researchers (Powell & Ogle, 1985); however, further research is needed to examine siblings of the handicapped.

A vast amount of research supported the basic premise that having a handicapped sibling is a significant source of stress across the age span (Fewell & Vadasy, 1986). The literature further revealed that researchers have noted that "normal" siblings of handicapped children are potentially "at risk" for a wide variety of behavioral or emotional problems, which may be long lasting and influence career choices and future family patterns (Powell & Ogle, 1985). It was the purpose of this investigation to recognize the nonhandicapped sibling, and to examine stress as a factor influencing the siblings of the handicapped.
CHAPTER III
METHODOLOGY

Subjects
Twenty children were identified by the participating schools as meeting the criteria for participating in this study (i.e., a sibling of a mentally handicapped child in grades K-5, students enrolled in the Mobile County Public Schools, and students enrolled in the Detroit Public Schools.)

Procedures
The Child Anxiety Scale was administered by the researcher individually in a classroom setting at the Mobile Association for Retarded Citizens in Mobile, Alabama, and the Detroit Osteopathic Hospital Conference room in Detroit, Michigan. In order to simplify administration and achieve a higher degree of standardization, all of the instructions, together with the actual test questions, were recorded on an audio cassette tape.

A demonstration was given to the ten children on a blackboard about how children should mark their answers with a large "X" on the circle of their choice.

The children were encouraged to keep track of their answers by following along with their fingers, pointing to the picture on the answer sheet. A reminder was given that there were no right or wrong answers, and that the
children were not to pay attention to what others were doing.

Letters and postcards were given to the siblings and parents of the mildly retarded handicapped students explaining the purpose of the study, and also granting the researcher permission to include the nonhandicapped sibling in the study. The parent mailed the pre-addressed, pre-stamped postcard to the researcher, therefore documenting that permission was granted.

Scoring Procedures

Within the CAS, answers indicating high anxiety were switched from side to side in a basically random manner. This procedure was followed so that children who did not understand the instructions and marked only the first or second answer were distinguished from really high- or low-scoring children.

Before using the scoring key, the scorer quickly scanned the answer sheet to see whether there were any signs which indicated that the child misunderstood the instructions. If any of the following features were observed, the answer sheet was considered invalid and not scored (i.e., all of the red circles or all of the blue circles had been marked, more than one question had been left unmarked, or more than one question had both circles marked [not counting erasing or other clear indications of a changed answer]).
When the answer sheet passed inspection for signs of invalidity, the scoring stencil was placed over the answer sheet in such a way that the small stars in the boxes laid on top of one another. Ignoring any item for which both circles were marked, the marks that fell within the circles on the scoring stencil were counted. Finally, the final score was recorded in the box on the answer sheet marked "Raw Score" (Gillis, 1980).

**Research Design**

The research design employed in this study was the Descriptive Research method. The aim of descriptive research was to describe "what exists" with respect to variables or conditions in a situation. A descriptive researcher method was selected to obtain information to assist in decision-making about how data would be collected and the use of the questionnaire was employed to gather information about its variables (Leedy, 1980). In descriptive research, studies are designed to obtain information concerning the current status of phenomena; they are directed toward determining the nature of a situation as it existed at the time of the study. There was no administration or control of treatment.

Descriptive research is generally directed toward seeking information to assist in decision-making.

The questionnaire approach was also employed in this study. A questionnaire gathers information about variables rather than to relate variables one to another, although
information gathered in questionnaires may point out relationships between variables. The questions asked on the self-report instrument were information gathering questions.

**Instrumentation**

The Child Anxiety Scale (CAS) is a twenty item self-report questionnaire, which was developed to enable the "early detection of emotional problems." The scale is useful for monitoring anxiety over time. The construction of CAS was based on a second-order anxiety factor identified in the much longer Early School Personality Questionnaire (ESPA) created by Coan and Cattell (1966).

The test manual contains clear and simple directions for administration and scoring. The answer sheets contain no words, only red and blue circles for the child's response and pictures to aid in the identification of each item. A simple scoring key yields a single raw score which reflects responses to high anxiety items. An audio cassette containing the instructions and questions is available to simplify administration and standardization. Since the items indicating high anxiety have been randomly switched from side to side (red circle to blue circle), the child who has a tendency to mark only the first or only the second answer is readily identified. Factorial validity data for the CAS are adequate.

The CAS does not include a lie scale or any control for a socially desirable response set. While the picture
answer sheet and the oral questions make this an easily administered scale for young children, some children in fourth and fifth grades may find the presentation too elementary. Like most self-report questionnaires, the CAS is open to faking.

The CAS is an attractive, easy to administer, easy to score scale. The manual contains clear norm and conversion tables. The brightly colored picture format of the answer sheets and the oral presentation of the twenty questions would seem most appealing to children under eight or nine years of age though the norms extend through twelve years of age. Because of its brevity and appeal to young children, the CAS is a promising screening device. Maximum amount of administration time required is under twenty minutes, with taped presentation of the items being just under fifteen minutes. A clear scoring template is provided to facilitate rapid, easy scoring.

Reliability data on the CAS are good, with immediate test-retest reliability coefficients for first through third grades (N=127), ranging from 82 (first grade) to 92 (third grade). The number of children in each separate grade, however, is not included. One week test-retest results with seventy-eight children (age not specified) gave a coefficient of 81. The Kuder Richardson 20 coefficient for internal consistency was 73 for a sample of 34=3 children (mean age 6.5). Data support the notion that
the CAS has respectable statistical reliability and factorial validity.

The CAS is best used as a research instrument due to its reliability data and lack of criterion-related validity.

**Research Design**

The research design employed in this study is the Descriptive Research method. The aim of descriptive research is to describe "what exists" with respect to variables or conditions in a situation. A descriptive research method was selected to obtain information to assist in decision-making about how data will be collected, and the use of the questionnaire was employed to gather information about its variables (Leedy, 1980). In descriptive research, studies are designed to obtain information concerning the current status of phenomena; they are directed toward determining the nature of a situation as it exists at the time of the study. There is no administration or control of treatment.

Descriptive research is generally directed toward seeking information to assist in decision-making.

The questionnaire approach is also employed in this study. A questionnaire gathers information about variables rather than to relate variables one to another, although information gathered in questionnaires may point out relationships between variables. The questions asked on the self-report instrument are information gathering
questions (Ary, Jacobs, & Razovich, 1972). The Child Anxiety Scale was the instrument selected to gather the necessary data enabling the researcher to arrive at an explainable or valid solution to the problem. The Child Anxiety Scale was chosen because of its usefulness in monitoring children's anxiety and/or stressful behaviors over a period of time, along with its high reliability data (Gillis, 1980); therefore, proving to be a reliable tool in the successful completion of the study.

Data Analysis

Descriptive statistics were computed for students who were siblings of the handicapped, and tests were conducted to identify significant differences in levels of stress between siblings of the handicapped and siblings of the nonhandicapped. An item factor analysis was used to make correlations between individual items and the pure anxiety factors related to the participants involved in the study.
CHAPTER IV

RESULTS

The purpose of this chapter is to present the results of the research and discussion of the research question that was tested.

Means and standard deviations for the total sample scores on the CAS Total Anxiety Scale are presented in Table 1, comparisons of subjects' ages are presented in Table 2, comparisons of subjects' familial size are presented in Table 3, comparisons of SES means are presented in Table 4, and Table 5 presents comparisons of mean scores of subjects' parents' marital status.

The Child Anxiety Scale was administered to individuals. The CAS is a self-report measure of behavior and reactions that have been strongly associated with anxiety in young children (Gillis, 1980). The CAS consists of twenty items that refer to the children's experiences and reactions to a variety of situations and to themselves (e.g., "Do you finish your work on time or do you need more time?" "Can other people do things better than you, or not as well as you?"). Items were chosen from the Early School Personality Questionnaire (Coan & Cattell, 1966) based on their factor loadings on a second-order factor described as a general anxiety factor. The test has demonstrated adequate test/retest reliability (r=.81 for one-week period) (Gillis, 1980).
There were ten boys and ten girls used in the study with regard to sex differences on the CAS. It has been found that there is a slight tendency for females to obtain higher scores. The difference, however, was not large enough to be of any practical significance, and does not appear to justify the siblings of mildly handicapped and siblings of the nonhandicapped.

The population that included siblings of the mildly mentally handicapped reflected a significant deviation from the norm in terms of elevated anxiety. Being a sibling of a mildly mentally handicapped person is a factor which has often been suspected of slightly increasing anxiety in children.

Table 1 compares the Anxiety Scale scores of siblings of the handicapped and nonhandicapped. The data in Table 1 revealed that subjects with handicapped siblings had a significantly greater level of anxiety as measured by the CAS when compared with nonhandicapped siblings. This data was not due to chance.

Table 2 compares the ages of subjects with nonhandicapped siblings to ages of subjects with handicapped siblings. Subjects with nonhandicapped siblings were significantly older than subjects with handicapped siblings.

Table 3 compares the anxiety levels of the nonhandicapped and siblings of the handicapped by family size. Siblings of the handicapped children had larger
### TABLE 1
**COMPARISON OF CHILDREN'S ANXIETY SCALE SCORE**

* N=20

<table>
<thead>
<tr>
<th>Variable</th>
<th># of Cases</th>
<th>Mean</th>
<th>Standard Deviation</th>
<th>Standard Error</th>
<th>F Value</th>
<th>2-tail Prob.</th>
</tr>
</thead>
<tbody>
<tr>
<td>CSTEN</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Group 1</td>
<td>10</td>
<td>6.1000</td>
<td>1.287</td>
<td>.407</td>
<td>1.27</td>
<td>.729</td>
</tr>
<tr>
<td>Group 2</td>
<td>10</td>
<td>2.9000</td>
<td>1.449</td>
<td>.458</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Pooled Variance Estimate</th>
<th>Separate Variance Estimate</th>
</tr>
</thead>
<tbody>
<tr>
<td>t Value</td>
<td>Degrees of Freedom</td>
</tr>
<tr>
<td>5.22</td>
<td>18</td>
</tr>
</tbody>
</table>

### TABLE 2
**COMPARISON OF SUBJECTS' AGES**

* N=20

<table>
<thead>
<tr>
<th>Variable</th>
<th># of Cases</th>
<th>Mean</th>
<th>Standard Deviation</th>
<th>Standard Error</th>
<th>F Value</th>
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</tr>
</thead>
<tbody>
<tr>
<td>FAM</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Group 1</td>
<td>10</td>
<td>6.1000</td>
<td>3.446</td>
<td>1.090</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Group 2</td>
<td>10</td>
<td>9.3000</td>
<td>4.547</td>
<td>1.438</td>
<td>1.74</td>
<td>.421</td>
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<table>
<thead>
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</tr>
</thead>
<tbody>
<tr>
<td>t Value</td>
<td>Degrees of Freedom</td>
</tr>
<tr>
<td>-1.77</td>
<td>18</td>
</tr>
</tbody>
</table>
families than siblings of the nonhandicapped. Difference in family size is significant for this sample. Size of the family would be larger 99.8 times out of 100, meaning it is not due to chance. Siblings of the handicapped having large families is not due to chance.

TABLE 3
COMPARISONS OF FAMILY SIZE
N=20

<table>
<thead>
<tr>
<th>Variable</th>
<th># of Cases</th>
<th>Mean</th>
<th>Standard Deviation</th>
<th>Standard Error</th>
<th>F 2-tail Value</th>
<th>2-tail Prob.</th>
</tr>
</thead>
<tbody>
<tr>
<td>FAM</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Group 1</td>
<td>10</td>
<td>4.7000</td>
<td>1.418</td>
<td>.448</td>
<td>8.62</td>
<td>.004</td>
</tr>
<tr>
<td>Group 2</td>
<td>10</td>
<td>3.3000</td>
<td>.483</td>
<td>.153</td>
<td></td>
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</table>

Pooled Variance Estimate
Separate Variance Estimate

<table>
<thead>
<tr>
<th>t Value</th>
<th>Degrees of Freedom</th>
<th>2-tail Prob.</th>
<th>t Value</th>
<th>Degrees of Freedom</th>
<th>2-tail Prob.</th>
</tr>
</thead>
<tbody>
<tr>
<td>2.96</td>
<td>18</td>
<td>.008</td>
<td>2.96</td>
<td>11.06</td>
<td>.013</td>
</tr>
</tbody>
</table>

Table 4 compares the siblings of the handicapped to siblings of the nonhandicapped according to SES (socioeconomic status). Subjects without handicapped siblings did not reveal a significantly greater level of anxiety as measured by means of a questionnaire when compared with siblings of the handicapped. The SES population was also identified by means of a questionnaire. A subgroup of children who were living with two parents was identified by means of a questionnaire. There
was no significant difference in the mean score of the

TABLE 4
COMPARISONS OF SOCIOECONOMIC STATUS
N=20

<table>
<thead>
<tr>
<th>Variable</th>
<th># of Cases</th>
<th>Mean</th>
<th>Standard Deviation</th>
<th>Standard Error</th>
<th>F Value</th>
<th>2-tail Prob.</th>
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</thead>
<tbody>
<tr>
<td>SES</td>
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<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Group 1</td>
<td>10</td>
<td>1.0000</td>
<td>.000</td>
<td>.000</td>
<td>--</td>
<td>--</td>
</tr>
<tr>
<td>Group 2</td>
<td>10</td>
<td>1.0000</td>
<td>.000</td>
<td>.000</td>
<td>--</td>
<td>--</td>
</tr>
</tbody>
</table>

Pooled Variance Estimate
<table>
<thead>
<tr>
<th>t Value</th>
<th>Degrees of Freedom</th>
<th>2-tail Prob.</th>
</tr>
</thead>
<tbody>
<tr>
<td>.00</td>
<td>18</td>
<td>1.000</td>
</tr>
</tbody>
</table>

Separate Variance Estimate
<table>
<thead>
<tr>
<th>t Value</th>
<th>Degrees of Freedom</th>
<th>2-tail Prob.</th>
</tr>
</thead>
<tbody>
<tr>
<td>.00</td>
<td></td>
<td>.00</td>
</tr>
</tbody>
</table>

two-parent group and the other children tested in the study. Table 5 presents mean scores of the subjects tested in the study.

TABLE 5
COMPARISONS OF PARENT GROUPS
N=20

<table>
<thead>
<tr>
<th>Variable</th>
<th># of Cases</th>
<th>Mean</th>
<th>Standard Deviation</th>
<th>Standard Error</th>
<th>F Value</th>
<th>2-tail Prob.</th>
</tr>
</thead>
<tbody>
<tr>
<td>PARENT</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Group 1</td>
<td>10</td>
<td>1.8000</td>
<td>.919</td>
<td>.291</td>
<td>1.05</td>
<td>.940</td>
</tr>
<tr>
<td>Group 2</td>
<td>10</td>
<td>2.0000</td>
<td>.943</td>
<td>.298</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

(table continues)
Table 2 - Continued

<table>
<thead>
<tr>
<th></th>
<th>Pooled Variance Estimate</th>
<th></th>
<th>Separate Variance Estimate</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>t Value</td>
<td>Degrees of Freedom</td>
<td>2-tail Prob.</td>
<td>t Value</td>
</tr>
<tr>
<td></td>
<td>-.48</td>
<td>18</td>
<td>.637</td>
<td>-.48</td>
</tr>
</tbody>
</table>


CHAPTER V
SUMMARY, CONCLUSIONS, AND RECOMMENDATIONS

The purpose of this chapter is to discuss the research question and Null Hypothesis developed to guide this study, as well as to discuss any recommendations and implications that were developed as a result of the research findings.

There was a research question and Null Hypothesis to guide this investigation. The research question was: "Is there a difference in the levels of stress in siblings of handicapped children as indicated on the Child Anxiety Scale?" (Gillis, 1980), and the Null Hypothesis was: "There is no difference in the level of stress as measured by the Child Anxiety Scale."

Referring to Table 1 in this research study, one can see by comparing the mean scores of siblings of the handicapped that subjects having handicapped siblings had a significantly greater level of anxiety as measured by the CAS when compared with subjects having nonhandicapped siblings.

There are several implications that can be drawn from this study. Results of this study suggest that having a handicapped sibling brings with it a significant source of stress. The effects of having a handicapped sibling involve greater anxiety and more conflicts than in families without a handicapped child.
The following recommendations are suggested to enable siblings to understand and minimize feelings of inadequacy and resentment when dealing with the handicapped sibling.

1. Courses should be offered for siblings of the handicapped, enabling them to study the rationale behind their feelings.

2. Ongoing inservice education for parents of siblings of the handicapped should be implemented, enabling them to gain a better understanding of siblings of the handicapped.

3. Parents, teachers, counselors and other professionals should be exposed to more extensive training in handling and instructing siblings of the handicapped.

4. Additional research should be conducted on school-based Special Education Administrators and their responsibilities in a school as it relates to the problems and concerns of siblings of the handicapped.

5. Parent groups should focus on parenting nonhandicapped siblings. The brothers and sisters of a handicapped child often have concerns related to their sibling's disability (i.e., what caused the handicap, will it affect them, reactions of their friends, a feeling of being "left out," or being required to do too much for the handicapped child).

6. Educating significant others. Grandparents, aunts, uncles, neighbors, even the school personnel, can
all have an important effect on the nonhandicapped sibling's development.
APPENDIX A

Child Anxiety Scale Instrument/Scale Questions
<table>
<thead>
<tr>
<th>Picture</th>
<th>Question</th>
</tr>
</thead>
<tbody>
<tr>
<td>butterfly</td>
<td>Do you do very well in most things you try, or do things often go wrong for you? If you do very well in most things you try, mark an X on the red circle, or if things often go wrong for you, mark an X on the blue circle.</td>
</tr>
<tr>
<td>spoon</td>
<td>Do people think you are often bad, or do people think you are usually good? If people think you are often bad, put an X on the red circle. If people think you are usually good, put an X on the blue circle.</td>
</tr>
<tr>
<td>cloud</td>
<td>Can you answer quickly, or do others seem to answer before you? If you answer quickly, put an X on the red circle, or if others seem to answer before you, put an X on the blue circle.</td>
</tr>
<tr>
<td>fish</td>
<td>Are you lucky or unlucky? If you are lucky, put an X on the red circle. If you are unlucky, put an X on the blue circle.</td>
</tr>
<tr>
<td>apple</td>
<td>Do you think only some people like you, or do you think everybody likes you? If you think only some people like you, put an X on the red circle, or, if you think everybody likes you, put an X on the blue circle.</td>
</tr>
<tr>
<td>mushroom</td>
<td>Do people ever say you talk too much? If people ever say you talk too much, put an X on the red circle or, if people never say you talk too much, put an X on the blue circle.</td>
</tr>
<tr>
<td>mouse</td>
<td>Can you do things better than most boys and girls, or not as well as most boys and girls? If you can do things better than most boys and girls, put an X on the red circle or, if you cannot do things as well as most boys and girls, put an X on the blue circle.</td>
</tr>
<tr>
<td>moon</td>
<td>Do you seem to be always having accidents, or do you never have accidents? If you seem to be always having accidents, put an X on the red circle or, if you never have accidents, put an X on the blue circle.</td>
</tr>
</tbody>
</table>
Do you feel cheerful and happy most of the time, or not much at all? If you feel cheerful and happy most of the time, put an X on the red circle. If you do not feel cheerful and happy much at all, put an X on the blue circle.

Do things sometimes seem too hard for you, or do things never seem too hard for you? If things sometimes seem too hard for you, put an X on the red circle or, if things never seem too hard for you, put an X on the blue circle.

Do you think you have to sit too long in school? If you think you have to sit too long in school, put an X on the blue circle.

Do you usually finish your work on time, or do you need more time? If you usually finish your work on time, put an X on the red circle. If you need more time to finish your work, put an X on the blue circle.

Are other children always nice to you, or do they sometimes pick on you, or do they sometimes pick on you? If other children are always nice to you, put an X on the red circle. If other children sometimes pick on you, put an X on the blue circle.

Can other people do things better than you, or not as well as you? If other people do things better than you, put an X on the red circle or, if other people do not do things as well as you, put an X on the blue circle.

Are you afraid of the dark, or are you not afraid of the dark? If you are afraid of the dark, put an X on the red circle or, if you are not afraid of the dark, put an X on the blue circle.

Do you have just a few problems, or do you have a lot of problems? If you have a few problems, put an X on the red circle. Or, if you have a lot of problems, put an X on the blue circle.

Do you think people ever say bad things about you? If you think people ever say bad things about you, put an X on the red circle. If you think people never say bad things about you, put an X on the blue circle.
APPENDIX B

Fulton County School System Request Forms
FULTON COUNTY SCHOOL SYSTEM

REQUESTS TO CONDUCT RESEARCH PROJECTS—PROCEDURES

1. Before submitting a formal request for research to the Office of Elementary or Secondary Schools, the researcher should first discuss the feasibility of the proposed research with the appropriate principal/administrator.

2. When a request is made to conduct a research study, the applicant should contact the Office of Elementary or Secondary Curriculum, as appropriate, to obtain the Research Study Request form. Applications should be requested in advance to allow sufficient time for review. When the completed form is received, the appropriate Executive Director of Curriculum will make the copies and distribute them to appropriate departmental persons.

3. The Director of Curriculum will be responsible for insuring that appropriate building and/or central office personnel review each research study request.
   a. All requests for research will be examined to insure that appropriate confidentiality procedures will be followed.
   b. If actual student participation is requested, every effort will be made to insure that the purpose for the study is beneficial to overall educational programming in the Fulton County Schools and in no way presents a potentially harmful condition for any student. Parent notification procedures will be required.

4. The review comments will be compiled and a letter denoting approval or denial will be sent to the applicant by the appropriate Director of Curriculum.

5. When those reviewing the proposal do not come to a consensus as to a recommendation to approve or deny the request, the Director of Curriculum will deny the request based upon lack of sufficient support for the research proposal. A research request which has been denied may be presented to the appropriate Assistant Superintendent for final review.

December 9, 1987
RESEARCH STUDY REQUEST

REQUESTING PERSON(S)

Name: Courtney V. Sanders

Work Address: Tri-Cities High School
1500 Jefferson Avenue
East Point, GA

Title/Agency: Spec. Ed. Tchr/IRR

Telephone: 766-1638

Zip Code: 30344

DESCRIPTION OF STUDY

Title:
"Siblings of the Handicapped"

Purpose/Objectives

To investigate stress in siblings of the handicapped.

Objectives/The data from this study will be used to make recommendations and possibly suggest approaches that may be implemented at the local level.

Beginning Date: Immediately

Completion Date: December 15
(First day after school ends for students)

INTERIM REPORT DATE

To be determined

INFORMATION REQUIRED

Please provide attachment to answer the following questions. Also, attach a summary of the research proposal, if available.

A. How much school time will be involved for staff research?

B. Number of students needed and particular characteristics (boy, girl, age, etc.).

C. Information needed for individual students.

D. What are space/room requirements?

E. Will school supplies/equipment be required?

F. Will financial support be requested from the Fulton County Board of Education?

G. How will teachers be required to help in the study (function and time)?

H. How will other school personnel be involved in the study (function and time)?

I. What data will be collected? (Specify names of commercially-available tests and attach copies or researcher-developed instruments.)

J. What methods of data analysis will be used?

K. How will parental consent be obtained (if appropriate)?

L. How will human subjects be protected in view of the Family Rights and Privacy Act?

RESULTS

Do you agree to provide a copy/summary of the completed study to the Fulton County Board of Education?

Signature: Courtney V. Sanders

Date: 10/31/89

Title: Spec. Ed.

12/6/87
Information Required

A. Five minutes for the distribution of letters.

B. Approximately 10 selected students
   Siblings of the mildly mentally handicapped
   Boys & Girls
   Grades K-5

C. Demographic sheet, responses & stress instrument.

D. None

E. None

F. None

G. None

H. None

I. See Demographics & Instrument

J. T-test comparing means

K. A postcard & letter of consent will be mailed to the
   parent verifying the child's participation in the study.

L. No personally identifiable data will be written on the
   instruments or documented in the study.
FULTON COUNTY BOARD OF EDUCATION
Elementary Schools
Inter-Office Communication

MEMORANDUM

TO: Principals of Selected Elementary Schools
FROM: Dorothy R. Fielder
Executive Director - Elementary Curriculum
DATE: November 13, 1989
RE: Research Request from Courtney V. Sanders

Courtney V. Sanders, an interrelated special education teacher at Tri-Cities High School, Russell Campus, has submitted a request to conduct research. It is my understanding from a conversation with her that the only involvement the schools will have is to distribute cards requesting permission from parents to interview siblings of their handicapped children. If you have further questions, please direct them to Ms. Sanders at home (352-0989) or at work (766-1638). Please review the enclosed request and write me a note indicating whether you approve the request by the end of the day on Tuesday, November 21. The schools selected are S. R. Young, Oak Knoll, S. L. Lewis, and Union City.

Thank you for your assistance.

c: Oscar Perry
Daun Dickie
Annie Duvall
Courtney Sanders
Leslie Ely
APPENDIX C

Letters to Parents
Dear Parent,

Presently some brothers and sisters of handicapped children are experiencing feelings of stress because of concerns they have about themselves and their handicapped brother or sister. More information about brothers and sisters of handicapped children is needed. The teachers, counselors and principals want to help improve school life for brothers and sisters of the handicapped. I would like to study stress of brothers and sisters of the handicapped for my work at Clark Atlanta University. I would appreciate your help.

If your child is a student, K-5, and has a brother or sister who is handicapped, I am asking your permission to allow him or her to be included in my study. What they tell me will be confidential and anonymous. The results will be shared with you when I finish my study.

Please complete and return the enclosed postcard. Your child will be paid $5.00 for participating in my study. If you have any questions, please feel free to call me at 352-0989.

Thank you.

Sincerely,

Courtney V. Sanders, M.Ed.
July 27, 1990

Dear ______________________:

I am a graduate student attending Clark Atlanta University. I am completing a study aimed at recognizing brothers and sisters of special needs children.

I understand that your special needs child attends Mobile Association for Retarded Citizens, Inc. Dr. Connie Smith has advised me you have agreed to participate in this project. During the study, I will ask a brother or sister of your special needs child to complete a twenty (20) item self-report questionnaire.

I have attached a statement of the purpose of my study, a sample of the questionnaire (i.e., the Child Anxiety Scale), a copy of Mobile Association for Retarded Citizens, Inc. letter permitting my study, and a release form to be signed by the participating parent.

Thank you for allowing me to work with your child.

Sincerely,

Courtney V. Sanders

Attachment
STATEMENT OF PURPOSE

The purpose of this investigation is to recognize the non handicapped sibling, and to examine stress as a factor influencing expressed attitudes towards the handicapped sibling.
Parent Release

Courtney V. Sanders has my permission to administer the Child Anxiety Scale to my son/daughter ________________________, as part of a research project studying siblings of special needs children.

_________________________   ______________________
Parent Signature                  Date
Yes, my child can participate in your study of stress. Please call me.

Name: ______________________
Tele #: _____________________
Date: _______________________

Thank You!
APPENDIX D

Demographic Information
Demographic Information

<To be administered by researcher>

1. Age of subject: ________________

2. Age of handicapped sibling: ________________

3. Sex of subject:
   Male   Female

4. Sex of handicapped sibling:
   Male   Female

5. Race of subject: Black White Asian Other, specify _____________

6. Exceptionality of handicapped sibling:
   Mentally Handicapped
   Learning Disability
   Behavior Disorder
   Physically Handicapped
   Visually Handicapped
   Hearing Impaired
   Language Deficit
   Other, specify _____________

7. Does your child receive a lunch card for the school year?
   Yes   No

8. What is your marital status?
   Single   Divorced   Widowed

9. Family size/number of people in household: _____________
Demographic Information

<To be administered by researcher>

1. Age of subject: __________________________

2. Age of sibling: __________________________

3. Sex of subject:
   Male                          Female

4. Sex of sibling:
   Male                          Female

5. Race of subject: Black  White  Asian  Other, specify __________

6. Does your child receive a lunch card for the school year?
   Yes       No

7. What is your marital status?
   Married  Single  Divorced  Widowed

8. Family size / Number of people in household: __________
APPENDIX E

Letter to Subjects
July 27, 1990

Dear __________________:

I am a graduate student attending Clark Atlanta University. I am completing a study aimed at recognizing brothers and sisters of special needs children.

I have administered a twenty (20) item self-report questionnaire to children with special needs sisters and brothers. However, in order to complete my study must include a sample of children who do not have special needs brothers and sisters. Therefore, I am asking your permission to allow your child to participate in my study by completing the twenty (20) item self-report questionnaire of stress.

I have attached a statement of the purpose of my study, a sample of the questionnaire (i.e.) the Child Anxiety Scale, and a copy of a release form to be signed by the participating parent.

Thank you for allowing me to work with your child.

Sincerely,

Courtney V. Sanders, M.Ed

Attachment
I, like you, am a student with a homework project and I need your help. I would like you to help me answer some important questions about having a special brother or sister.

If you would like to help me, please put a smile on the face below.

<Thank You.>
APPENDIX F

Letter to Research Department
Dr. Myrtice M. Taylor  
Assistant Superintendent of Research & Curriculum Services  
Instructional Services Center  
2930 Forest Hill Drive, S.w.  
Atlanta, Georgia  30315  

Dear Dr. Taylor:  

I am in the process of completing requirements for the Specialist in Education degree at Clark Atlanta University in special education. The purpose of this letter is to request permission to conduct a brief survey with siblings of the handicapped students in the Atlanta Public Schools.  

My study investigates stressful behaviors in siblings of the handicapped. It consists of an instrument and letters of informed consent. The data from this study will be used to make recommendations and possibly suggest approaches that may be implemented at the local level. I would provide mailing labels and pre-stuffed stamped envelopes for mailing the information to the parents of randomly selected mildly mentally handicapped primary students. These envelopes would contain letters of informed consent.  

I'm enclosing a copy of my proposal and the research instrument for your review. These documents have been approved by my Thesis committee. I will of course, be more than willing to share the results of this investigation with you and your staff. Please feel free to call me at 352-0989 if you have any questions or concerns about this proposal. Your immediate response would be greatly appreciated.  

Respectfully yours,  

(Ms.) Courtney V. Sanders, MEd  

cc: Proposal  
Instrument  
Letter of Informed Consent
December 29, 1989

Dorothy R. Fielder
Executive Director for Elementary Curriculum
786 Cleveland Ave., S.W.
Services Building
Atlanta, Georgia 30315

Dear Ms. Fielder:

I am in the process of completing requirements for the Specialist in Education degree at Clark Atlanta University in special education. The purpose of this letter is to request permission to conduct a brief survey with siblings of handicapped students in the Fulton County Public Schools.

My study investigates stress in siblings of the handicapped. I've enclosed a copy of the instrument and letters of informed consent. The data from this study will be used to make recommendations and possibly suggest approaches that may be implemented at the local level to help identify and counsel this population of children. I would provide mailing labels and pre-stuffed stamped envelopes for mailing the information to the parents of selected mildly mentally handicapped primary students. These envelopes would contain letters of informed consent and a stamped post card to confirm the student's participation in the study.

I am enclosing a copy of my proposal for your review. These draft documents have been approved by my thesis committee. I will, of course, be more than willing to share the results of this investigation with you and your staff and the parents of the study participants. Please feel free to call me at home: 352-0989 if you have any questions or concerns about this proposal. Your immediate response would be greatly appreciated.

Respectfully yours,

Courtney V. Sanders, M.Ed

cc: Proposal
Instrument
Letters of Informed Consent
July 27, 1990

MRS COURTNEY SANDERS WARMACK
4142 GOVERNMENT BOULEVARD
MOBILE AL 36693

Dear Mrs. Warmack:

The Mobile Association for Retarded Citizens, Inc. has received your request to study siblings of handicapped children enrolled in its program. We have reviewed a copy of your research proposal and agree to participate in the study. We feel the focus on factors influencing the families of special needs individuals will contribute to a greater understanding of best treatment practices in the field.

The stated purpose of your study is "to recognize the non handicapped siblings, and to examine stress as a factor influencing expressed attitudes towards the handicapped sibling." To accomplish this you wish to administer a self-report questionnaire, the Child Anxiety Scale, to siblings of clients enrolled here.

Please contact Dr. Constance V. Smith regarding the identification and scheduling of participants. You are wished the very best in graduate study efforts.

Sincerely,

Frederick M. Pinto
Executive Director

Iris Harris, MSW, LCSW
Coordinator of Social Services

Dr. Constance V. Smith
Coordinator Primary/Secondary Program
March 20, 1990

Dear Ms. Lindsey,

Thank you for honoring my request to conduct research with your mildly mentally handicapped students in grades K through Five. Included in the package are letters describing the purpose of the study along with a self addressed postcard to be given to ten parents of mildly mentally handicapped students attending your school.

I will contact you by telephone as a follow-up by April 9, 1990. If you have any questions, please feel free to call me collect at (313) 567-8032.

Sincerely,

Courtney Sanders-Warmack, M.Ed.
March 20, 1990

Dear Ms. Wright,

Thank you for honoring my request to conduct research with your mildly mentally handicapped students in grades K through Five. Included in the package are letters describing the purpose of the study along with a self addressed postcard to be given to ten parents of mildly mentally handicapped students attending your school.

I will contact you by telephone as a follow-up by April 9, 1990. If you have any questions, please feel free to call me collect at (313) 567-8032.

Sincerely,

Courtney Sanders-Warmack, M.Ed.
March 20, 1990

Dear Ms. George,

Thank you for honoring my request to conduct research with your mildly mentally handicapped students in grades K through Five. Included in the package are letters describing the purpose of the study along with a self addressed postcard to be given to ten parents of mildly mentally handicapped students attending your school.

I will contact you by telephone as a follow-up by April 9, 1990. If you have any questions, please feel free to call me collect at (313) 567-8032.

Sincerely,

Courtney Sanders-Warmack, M.Ed.
APPENDIX G

Letter to Thesis Committee
July 7, 1989

Dear Dr. Hopkins,

Presently siblings of the handicapped are experiencing feelings of stress due to the special concerns they have about themselves in relation to their handicapped sibling. The reasons are many and varied, yet the bottom line may be the lack of accurate information about siblings of the handicapped. The teachers, counselors, and administrators must continue to play significant roles to improve the atmosphere for siblings of the handicapped. My intention is to research the degree of stress related to siblings of the handicapped for my Educational Specialist thesis.

I am requesting your comments and suggestions in reference to the submitted proposal. Your responses will be greatly appreciated.

Thank you,

Courtney V. Sanders, M.Ed.
July 7, 1989

Dear Dr. Rogers,

Presently siblings of the handicapped are experiencing feelings of stress due to the special concerns they have about themselves in relation to their handicapped sibling. The reasons are many and varied, yet the bottom line may be the lack of accurate information about siblings of the handicapped. The teachers, counselors, and administrators must continue to play significant roles to improve the atmosphere for siblings of the handicapped. My intention is to research the degree of stress related to siblings of the handicapped for my Educational Specialist thesis.

I am requesting your comments and suggestions in reference to the submitted proposal. Your responses will be greatly appreciated.

Thank you,

Courtney V. Sanders, M.Ed.
July 7, 1989

Dear Dr. Robinson,

Presently siblings of the handicapped are experiencing feelings of stress due to the special concerns they have about themselves in relation to their handicapped sibling. The reasons are many and varied, yet the bottom line may be the lack of accurate information about siblings of the handicapped. The teachers, counselors, and administrators must continue to play significant roles to improve the atmosphere for siblings of the handicapped. My intention is to research the degree of stress related to siblings of the handicapped for my Educational Specialist thesis.

I am requesting your comments and suggestions in reference to the submitted proposal. Your responses will be greatly appreciated.

Thank you,

Courtney V. Sanders, M.Ed.
REFERENCES


bottle  Do you feel cheerful and happy most of the time, or not much at all? If you feel cheerful and happy most of the time, put an X on the red circle. If you do not feel cheerful and happy much at all, put an X on the blue circle.

kite    Do things sometimes seem too hard for you, or do things never seem too hard for you? If things sometimes seem too hard for you, put an X on the red circle or, if things never seem too hard for you, put an X on the blue circle.

book    Do you think you have to sit too long in school? If you think you have to sit too long in school, put an X on the blue circle.

leaf    Do you usually finish your work on time, or do you need more time? If you usually finish your work on time, put an X on the red circle. If you need more time to finish your work, put an X on the blue circle.

owl     Are other children always nice to you, or do they sometimes pick on you, or do they sometimes pick on you? If other children are always nice to you, put an X on the red circle. If other children sometimes pick on you, put an X on the blue circle.

lion    Can other people do things better than you, or not as well as you? If other people do things better than you, put an X on the red circle or, if other people do not do things as well as you, put an X on the blue circle.

cake    Are you afraid of the dark, or are you not afraid of the dark? If you are afraid of the dark, put an X on the red circle or, if you are not afraid of the dark, put an X on the blue circle.

sun     Do you have just a few problems, or do you have a lot of problems? If you have a few problems, put an X on the red circle. Or, if you have a lot of problems, put an X on the blue circle.

hand    Do you think people ever say bad things about you? If you think people ever say bad things about you, put an X on the red circle. If you think people never say bad things about you, put an X on the blue circle.
APPENDIX B

Fulton County School System Request Forms
FULTON COUNTY SCHOOL SYSTEM

REQUESTS TO CONDUCT RESEARCH PROJECTS—PROCEDURES

1. Before submitting a formal request for research to the Office of Elementary or Secondary Schools, the researcher should first discuss the feasibility of the proposed research with the appropriate principal/administrator.

2. When a request is made to conduct a research study, the applicant should contact the Office of Elementary or Secondary Curriculum, as appropriate, to obtain the Research Study Request form. Applications should be requested in advance to allow sufficient time for review. When the completed form is received, the appropriate Executive Director of Curriculum will make the copies and distribute these to appropriate departmental persons.

3. The Director of Curriculum will be responsible for insuring that appropriate building and/or central office personnel review each research study request.

   a. All requests for research will be examined to insure that appropriate confidentiality procedures will be followed.

   b. If actual student participation is requested, every effort will be made to insure that the purpose for the study is beneficial to overall educational programming in the Fulton County Schools and in no way presents a potentially harmful condition for any student. Parent notification procedures will be required.

4. The review comments will be compiled and a letter denoting approval or denial will be sent to the applicant by the appropriate Director of Curriculum.

5. When those reviewing the proposal do not come to a consensus as to a recommendation to approve or deny the request, the Director of Curriculum will deny the request based upon lack of sufficient support for the research proposal. A research request which has been denied may be presented to the appropriate Assistant Superintendent for final review.

December 9, 1987
Helen W. Richardson  
Executive Director for Secondary Curriculum  
FULTON COUNTY BOARD OF EDUCATION

Services Building  
786 Cleveland Avenue, S.W.  
Atlanta, Georgia 30315  
763-6898

RESEARCH STUDY REQUEST

REQUESTING PERSON(S)

Name: Courtney V. Sanders  
Title/Agency: Spec. Ed.Tchr/IRR

Work Address: Tri-Cities High School  
1500 Jefferson Avenue  
East Point, GA

DESCRIPTION OF STUDY

Title: "Siblings of the Handicapped"

Purpose/Objectives

To investigate stress in siblings of the handicapped.

Objectives: The data from this study will be used to make recommendations and possibly suggest approaches that may be implemented at the local level.

Beginning Date: Immediately  
Completion Date: December 15  
(Last day before school ends for students)

Interim Report Date: To be determined

INFORMATION REQUIRED

Please provide attachment to answer the following questions. Also, attach a summary of the research proposal, if available.

A. How much school time will be involved for staff research?
B. Number of students needed and particular characteristics (boy, girl, age, etc.).
C. Information needed for individual students.
D. What are space/room requirements?
E. Will school supplies/equipment be required?
F. Will financial support be requested from the Fulton County Board of Education?
G. How will teachers be required to help in the study (function and time)?
H. How will other school personnel be involved in the study (function and time)?
I. What data will be collected? (Specify names of commercially-available tests and attach copies or researcher-developed instruments.)
J. What methods of data analysis will be used?
K. How will parental consent be obtained (if appropriate)?
L. How will human subjects be protected in view of the Family Rights and Privacy Act?

RESULTS

Do you agree to provide a copy/summary of the completed study to the Fulton County Board of Education? 
Signature: 
Date: 10/31/89

Title: TIE Teacher/Spec.Ed.

12/9/87
Information Required

A. Five minutes for the distribution of letters.

B. Approximately 10 selected students
   Siblings of the mildly mentally handicapped
   Boys & Girls
   Grades K-5

C. Demographic sheet, responses & stress instrument.

D. None

E. None

F. None

G. None

H. None

I. See Demographics & Instrument

J. T-test comparing means

K. A postcard & letter of consent will be mailed to the
   parent verifying the child's participation in the study.

L. No personally identifiable data will be written on the
   instruments or documented in the study.
MEMORANDUM

TO: Principals of Selected Elementary Schools

FROM: Dorothy R. Fielder

Executive Director - Elementary Curriculum

DATE: November 13, 1989

RE: Research Request from Courtney V. Sanders

Courtney V. Sanders, an interrelated special education teacher at Tri-Cities High School, Russell Campus, has submitted a request to conduct research. It is my understanding from a conversation with her that the only involvement the schools will have is to distribute cards requesting permission from parents to interview siblings of their handicapped children. If you have further questions, please direct them to Ms. Sanders at home (352-0989) or at work (766-1638). Please review the enclosed request and write me a note indicating whether you approve the request by the end of the day on Tuesday, November 21. The schools selected are S. R. Young, Oak Knoll, S. L. Lewis, and Union City.

Thank you for your assistance.

c: Oscar Perry
Daun Dickie
Annie Duvall
Courtney Sanders
Leslie Ely
APPENDIX C

Letters to Parents
Dear Parent,

Presently some brothers and sisters of handicapped children are experiencing feelings of stress because of concerns they have about themselves and their handicapped brother or sister. More information about brothers and sisters of handicapped children is needed. The teachers, counselors and principals want to help improve school life for brothers and sisters of the handicapped. I would like to study stress of brothers and sisters of the handicapped for my work at Clark Atlanta University. I would appreciate your help.

If your child is a student, K-5, and has a brother or sister who is handicapped, I am asking your permission to allow him or her to be included in my study. What they tell me will be confidential and anonymous. The results will be shared with you when I finish my study.

Please complete and return the enclosed postcard. Your child will be paid $5.00 for participating in my study. If you have any questions, please feel free to call me at 352-0989.

Thank you.

Sincerely,

Courtney V. Sanders, M.Ed.
July 27, 1990

Dear ________________________:

I am a graduate student attending Clark Atlanta University. I am completing a study aimed at recognizing brothers and sisters of special needs children.

I understand that your special needs child attends Mobile Association for Retarded Citizens, Inc. Dr. Connie Smith has advised me you have agreed to participate in this project. During the study, I will ask a brother or sister of your special needs child to complete a twenty (20) item self-report questionnaire.

I have attached a statement of the purpose of my study, a sample of the questionnaire (i.e., the Child Anxiety Scale), a copy of Mobile Association for Retarded Citizens, Inc. letter permitting my study, and a release form to be signed by the participating parent.

Thank you for allowing me to work with your child.

Sincerely,

Courtney V. Sanders

Attachment
STATEMENT OF PURPOSE

The purpose of this investigation is to recognize the non handicapped sibling, and to examine stress as a factor influencing expressed attitudes towards the handicapped sibling.
Parent Release

Courtney V. Sanders has my permission to administer the Child Anxiety Scale to my son/daughter ____________________________, as part of a research project studying siblings of special needs children.

_________________________  __________________
Parent Signature             Date
Yes, my child can participate in your study of stress. Please call me.

Name: ____________________
Tele #: ____________________
Date: ____________________

Thank You!
APPENDIX D

Demographic Information
Demographic Information

<To be administered by researcher>

1. Age of subject:__________________

2. Age of handicapped sibling:__________________

3. Sex of subject:
   Male            Female

4. Sex of handicapped sibling:
   Male            Female

5. Race of subject:  Black  White  Asian  Other, specify__________________

6. Exceptionality of handicapped sibling:
   Mentally Handicapped
   Learning Disability
   Behavior Disorder
   Physically Handicapped
   Visually Handicapped
   Hearing Impaired
   Language Deficit
   Other, specify__________________

7. Does your child receive a lunch card for the school year?
   Yes        No

8. What is your marital status?
   Single  Divorced  Widowed

9. Family size/number of people in household:__________________
Demographic Information

<To be administered by researcher>

1. Age of subject: _______________________

2. Age of sibling: _______________________

3. Sex of subject: 
   Male       Female

4. Sex of sibling: 
   Male       Female

5. Race of subject: Black White Asian Other, specify ___________________

6. Does your child receive a lunch card for the school year? 
   Yes       No

7. What is your marital status? 
   Married    Single    Divorced    Widowed

8. Family size / Number of people in household: __________
APPENDIX E

Letter to Subjects
July 27, 1990

Dear ____________________:

I am a graduate student attending Clark Atlanta University. I am completing a study aimed at recognizing brothers and sisters of special needs children.

I have administered a twenty (20) item self-report questionnaire to children with special needs sisters and brothers. However, in order to complete my study must include a sample of children who do not have special needs brothers and sisters. Therefore, I am asking your permission to allow your child to participate in my study by completing the twenty (20) item self-report questionnaire of stress.

I have attached a statement of the purpose of my study, a sample of the questionnaire (i.e.) the Child Anxiety Scale, and a copy of a release form to be signed by the participating parent.

Thank you for allowing me to work with your child.

Sincerely,

Courtney V. Sanders, M.Ed

Attachment
I, like you, am a student with a homework project and I need your help. I would like you to help me answer some important questions about having a special brother or sister. If you would like to help me, please put a smile on the face below.

<Thank You.>
APPENDIX F

Letter to Research Department
Dr. Myrtice M. Taylor  
Assistant Superintendent of Research & Curriculum Services  
Instructional Services Center  
2930 Forest Hill Drive, S.W.  
Atlanta, Georgia 30315

June 29, 1989

Dear Dr. Taylor:

I am in the process of completing requirements for the Specialist in Education degree at Clark Atlanta University in special education. The purpose of this letter is to request permission to conduct a brief survey with siblings of the handicapped students in the Atlanta Public Schools.

My study investigates stressful behaviors in siblings of the handicapped. It consists of an instrument and letters of informed consent. The data from this study will be used to make recommendations and possibly suggest approaches that may be implemented at the local level. I would provide mailing labels and pre-stuffed stamped envelopes for mailing the information to the parents of randomly selected mildly mentally handicapped primary students. These envelopes would contain letters of informed consent.

I'm enclosing a copy of my proposal and the research instrument for your review. These documents have been approved by my Thesis committee. I will of course, be more than willing to share the results of this investigation with you and your staff. Please feel free to call me at 352-0989 if you have any questions or concerns about this proposal. Your immediate response would be greatly appreciated.

Respectfully yours,

(Ms.) Courtney V. Sanders, MEd

cc: Proposal  
Instrument  
Letter of Informed Consent
December 29, 1989

Dorothy R. Fielder  
Executive Director for Elementary Curriculum  
786 Cleveland Ave., S.W.  
Services Building  
Atlanta, Georgia 30315

Dear Ms. Fielder:

I am in the process of completing requirements for the Specialist in Education degree at Clark Atlanta University in special education. The purpose of this letter is to request permission to conduct a brief survey with siblings of handicapped students in the Fulton County Public Schools.

My study investigates stress in siblings of the handicapped. I've enclosed a copy of the instrument and letters of informed consent. The data from this study will be used to make recommendations and possibly suggest approaches that may be implemented at the local level to help identify and counsel this population of children. I would provide mailing labels and pre-stuffed stamped envelopes for mailing the information to the parents of selected mildly mentally handicapped primary students. These envelopes would contain letters of informed consent and a stamped post card to confirm the student's participation in the study.

I am enclosing a copy of my proposal for your review. These draft documents have been approved by my thesis committee. I will, of course, be more than willing to share the results of this investigation with you and your staff and the parents of the study participants. Please feel free to call me at home: 352-0989 if you have any questions or concerns about this proposal. Your immediate response would be greatly appreciated.

Respectfully yours,

Courtney V. Sanders, M.Ed

cc: Proposal  
Instrument  
Letters of Informed Consent
July 27, 1990

MRS COURTNEY SANDERS WARMACK
4142 GOVERNMENT BOULEVARD
MOBILE AL 36693

Dear Mrs. Warmack:

The Mobile Association for Retarded Citizens, Inc. has received your request to study siblings of handicapped children enrolled in its program. We have reviewed a copy of your research proposal and agree to participate in the study. We feel the focus on factors influencing the families of special needs individuals will contribute to a greater understanding of best treatment practices in the field.

The stated purpose of your study is "to recognize the non handicapped siblings, and to examine stress as a factor influencing expressed attitudes towards the handicapped sibling." To accomplish this you wish to administer a self-report questionnaire, the Child Anxiety Scale, to siblings of clients enrolled here.

Please contact Dr. Constance V. Smith regarding the identification and scheduling of participants. You are wished the very best in graduate study efforts.

Sincerely,

Frederick M. Pinto
Executive Director

Dr. Constance V. Smith
Coordinator Primary/Secondary Program

Sincerely,

Iris Harris, MSW, LCSW
Coordinator of Social Services
March 20, 1990

Dear Ms. Lindsey,

Thank you for honoring my request to conduct research with your mildly mentally handicapped students in grades K through Five. Included in the package are letters describing the purpose of the study along with a self addressed postcard to be given to ten parents of mildly mentally handicapped students attending your school.

I will contact you by telephone as a follow-up by April 9, 1990. If you have any questions, please feel free to call me collect at (313) 567-8032.

Sincerely,

Courtney Sanders-Warmack, M.Ed.
March 20, 1990

Dear Ms. Wright,

Thank you for honoring my request to conduct research with your mildly mentally handicapped students in grades K through Five. Included in the package are letters describing the purpose of the study along with a self addressed postcard to be given to ten parents of mildly mentally handicapped students attending your school.

I will contact you by telephone as a follow-up by April 9, 1990. If you have any questions, please feel free to call me collect at (313) 567-8032.

Sincerely,

Courtney Sanders-Warmack, M.Ed.
March 20, 1990

Dear Ms. George,

Thank you for honoring my request to conduct research with your mildly mentally handicapped students in grades K through Five. Included in the package are letters describing the purpose of the study along with a self addressed postcard to be given to ten parents of mildly mentally handicapped students attending your school.

I will contact you by telephone as a follow-up by April 9, 1990. If you have any questions, please feel free to call me collect at (313) 567-8032.

Sincerely,

Courtney Sanders-Warmack, M.Ed.
APPENDIX G

Letter to Thesis Committee
July 7, 1989

Dear Dr. Hopkins,

Presently siblings of the handicapped are experiencing feelings of stress due to the special concerns they have about themselves in relation to their handicapped sibling. The reasons are many and varied, yet the bottom line may be the lack of accurate information about siblings of the handicapped. The teachers, counselors, and administrators must continue to play significant roles to improve the atmosphere for siblings of the handicapped. My intention is to research the degree of stress related to siblings of the handicapped for my Educational Specialist thesis.

I am requesting your comments and suggestions in reference to the submitted proposal. Your responses will be greatly appreciated.

Thank you,

Courtney V. Sanders, M.Ed.
June 7, 1989

Dear Dr. Rogers,

Presently siblings of the handicapped are experiencing feelings of stress due to the special concerns they have about themselves in relation to their handicapped sibling. The reasons are many and varied, yet the bottom line may be the lack of accurate information about siblings of the handicapped. The teachers, counselors, and administrators must continue to play significant roles to improve the atmosphere for siblings of the handicapped. My intention is to research the degree of stress related to siblings of the handicapped for my Educational Specialist thesis.

I am requesting your comments and suggestions in reference to the submitted proposal. Your responses will be greatly appreciated.

Thank you,

Courtney V. Sanders, M.Ed.
July 7, 1989

Dear Dr. Robinson,

Presently siblings of the handicapped are experiencing feelings of stress due to the special concerns they have about themselves in relation to their handicapped sibling. The reasons are many and varied, yet the bottom line may be the lack of accurate information about siblings of the handicapped. The teachers, counselors, and administrators must continue to play significant roles to improve the atmosphere for siblings of the handicapped. My intention is to research the degree of stress related to siblings of the handicapped for my Educational Specialist thesis.

I am requesting your comments and suggestions in reference to the submitted proposal. Your responses will be greatly appreciated.

Thank you,

Courtney V. Sanders, M.Ed.
REFERENCES


