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Bu çalışma, otizmli çocukların kardeşleri ile tipik gelişim gösteren (TG) çocukların kardeşlerinin sosyal uyum ve beceri düzeylerini karşılaştırmayı amaçlamıştır. Örneklem, 48'i otizmli çocuğun annesi ve 48'i TG çocuğun annesi olmak üzere toplam 96 anneden oluşmaktadır. Çocukların sosyal uyum ve becerileri, Sosyal Uyum ve Beceri Ölçeği (SUBÖ) ile değerlendirilmiştir. Sonuçlar, iki kardeş grubu arasında SUBÖ toplam puanlarında anlamlı bir fark olduğunu göstermiştir (Z = -3.253, p = 0.001). Ayrıca, "Dürtüsellik" (Z = -3.541, p = 0.001), "Dikkat ve Hiperaktivite" (Z = -3.361, p = 0.001), "Sosyal İlişkiler" (Z = -2.189, p = 0.029) ve "Duygusal Durum" (Z = -2.528, p = 0.011) alt boyutlarında da anlamlı farklılıklar bulunmuştur. Bu bulgular, otizmli çocukların kardeşlerinin birden fazla alanda zorluk yaşadığını ve SUBÖ puanlarının TG çocukların kardeşlerine kıyasla daha düşük olduğunu göstermektedir. Sonuçlar, tüm ailenin eğitim ve rehabilitasyon sürecine dahil edilmesinin önemini vurgulamaktadır.

Anahtar Kelimeler: otizm spektrum bozukluğu, kardes, sosyal uyum, sosyal beceriler, tipik gelisim

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INTRODUCTION

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utism spectrum disorder (ASD) is a neurodevelopmental disorder characterised by inadequate social interaction, repetitive behaviours, and limited interests (Dinure, 2022). This condition, which manifests from infancy or early childhood, is thought to result from a combination of genetic or non-genetic factors (Genovese & Butler, 2023). The symptoms of ASD are typically divided into two main categories. The former group comprises limitations in communication and interaction, while the latter group encompasses symptoms in repetitive interests and activities (Kaba & Aysev, 2020). These symptoms have been shown to hinder children's ability to fulfil their social, academic, and daily functions (Schaeffer et al., 2023).

Individuals diagnosed with ASD are frequently afflicted with behavioural and psychiatric disorders (Genovese & Butler, 2023). Conditions such as anxiety, depression, self-harm, irritability, aggression, distraction, and hyperactivity are frequently observed in these individuals (Genovese & Butler, 2023; Lin et al., 2023). These conditions can have a detrimental impact not only on the autistic child but also on their family members and siblings (Quatrosi et al., 2023). Parents of children with ASD have been shown to experience elevated levels of stress and anxiety in comparison to other parents, and due to the considerable time and attention devoted to their autistic child, they may inadvertently neglect their other children (Kalecik, 2013; Quatrosi et al., 2023). The consequences of such circumstances can be detrimental, manifesting in the form of neglect, communication deficiencies within the domestic environment, and social impairments. These children may emulate their autistic sibling or, alternatively, attempt to garner attention by engaging in problematic behaviours due to perceived neglect (Copuroğlu & Mengi, 2014; Kalecik, 2013; Orm et al., 2022). The presence of a disabled sibling has been shown to have a detrimental effect on children's social-emotional skills and reactions, often resulting in the manifestation of negative emotions (Yılmaz, 2019). Consequently, these children encounter difficulties in adapting to and socializing in a societal context from a young age (Temel et al., 2017).

A review of the extant literature reveals the existence of studies indicating that the presence of an autistic individual within a family unit can exert a detrimental effect on both the environment and the family unit itself (Aydemir & Önal, 2024; Cuskelly et al., 2023; Fields et al., 2024; Sınanmış and Kolburan, 2019; Şengül Erdem, 2019). One study in particular posits that children with autistic siblings experience heightened levels of social anxiety in comparison to those without (Sinanmış and Kolburan, 2019). Another study posits that children with autistic siblings experience a detrimental impact on their quality of life, and encounter social challenges (Yazıcı & Yazıcı, 2010). A study by Mariñez et al. (2022) found that children aged between 7 and 9 who have a sibling with special needs experience more problems than other age groups (Mariñez et al., 2022). The age range of 7-9 is termed the

"Concrete Operational Period," during which children begin to overcome cognitive difficulties (Kili, 2010). Furthermore, the 7-9 age range is recognised as a pivotal stage in children's social development, characterised by the transition from egocentrism to interaction with society (Kili, 2010). The present study was thus conducted to investigate whether the social adaptation and skill levels of children between the ages of 7 and 9 are affected by having an autistic sibling. The extant literature suggests that factors such as quality of life, anxiety and stress levels in children with ASD have been addressed, but studies on social adaptation and skill levels are required.

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The objective of this study is to make a comparison between the social adaptation and skills of children with and without siblings diagnosed with ASD. A review of the extant literature reveals that studies in this area are typically conducted across a wide range of ages. This study aims to make a significant contribution to the existing literature by focusing on a specific age group and examining in detail the social adaptation and skills of children with ASD siblings.

The rationale behind this particular focus is to elucidate the impact of social adaptation in children with ASD siblings. This focus is noteworthy, as it distinguishes the study from numerous others in the field, which tend to adopt a more expansive age range or to focus on broader family dynamics. The study makes a significant contribution to the existing literature by providing more detailed information about the social structures of families of individuals with ASD. The findings of the study are expected to inform the development of support programmes for children and families in both academic and clinical contexts.

METHOD

Research Design

The present study adopts a descriptive, cross-sectional research design, utilising the relational screening model to compare the social adaptation and skill levels of children with and without autistic mothers. The relational screening model is a research design that examines the relationships between two or more variables.

Study Group

The study was conducted in two special education centres in the Çankaya district of Ankara province. The. The sample size for the study was determined using G-power analysis, a statistical method for calculating required sample sizes to achieve sufficient power in hypothesis testing. The analysis was based on the parameters derived from a prior study conducted by Bozbey-Akalın (2005), ensuring a high level of reliability (0.95) and maintaining a margin of error at 0.05. These parameters were selected with meticulous care to guarantee the validity and reliability of the study findings, whilst also taking into account the feasibility of participant recruitment within the study's context (Bozbey Akalın, 2005). The study population comprised a

total of 96 mothers, with 48 mothers of children diagnosed with ASD and 48 mothers of children without ASD. Prior to participation, written consent forms were obtained from the individuals. A total of 157 mothers were interviewed as part of the study, and the interviews were terminated with 61 mothers who did not meet the inclusion and exclusion criteria. The participants were selected using the snowball sampling method. The study comprised two groups. The inclusion and exclusion criteria for the mothers who participated in the study were determined as follows:

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The inclusion criteria for mothers with children diagnosed with ASD were as follows: the mother must have a child with an ASD between the ages of 3-6, and one or two typically developing children between the ages of 7-9. Furthermore, the mother must be the child's primary caregiver and be literate. The exclusion criteria included the following: the mother must not have more than one disabled child, more than three children living in the same house, or a psychological disorder.

The inclusion criteria for mothers without children with ASD were as follows: the mother had to have one or two children between the ages of seven and nine who had TG and no disease, as well as a typically developing child between the ages of three and six. The mother was also required to be the primary caregiver of the child. The exclusion criteria were as follows: the mother had to have no more than three children living in the same house, and she could not have a psychological disorder.

Furthermore, the age group of the autistic sibling was limited to 3–6 years old, ensuring homogeneity of the groups. In instances where the age range of the autistic sibling fell between 7 and 9 years, the mother was requested to complete the relevant questionnaires based on the younger sibling (3-6 years) with whom they spent the majority of their time.

Data Collection Tools

Sociodemographic Information Form. The demographic information form, prepared by the researchers, serves to ascertain the age, employment status, and educational attainment of the mothers to be included in the study. It also ascertains the presence of any illnesses, the use of medication, the number of children, the ages of the children, the presence of additional illnesses diagnosed with the child, and the child's medication status.

Social Adaptation and Skills Scale (SASS). The scale, which was developed by Sezgin and Akman in 2014, consists of 59 items and 7 sub-dimensions. The scale is administered to mothers. The sub-dimensions of the scale are as follows: Impulsivity (14 items), Threshold of Inhibition (8 items), Attention and Hiperactivity (10 items), Social Relations (10 items), Emotional State (7 items), Need for Approval (5 items), and Introversion (5 items). The 3-point Likert-type scale is scored as follows: "not at all appropriate; 1 point", "somewhat appropriate; 2 points",

"very appropriate; 3 points". Scores on the scale are indicative of a child's social adaptation and skill level, with high scores denoting suboptimal levels. The alpha scale internal consistency coefficient was determined to be 0.94 (Sezgin & Akman, 2014). The scale proprietor was contacted for their views on the scale's usability, and the ethics committee was presented with the permission document.

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Data Collection Process

The present study was conducted in two special education centres located in the Çankaya district of Ankara province. Participants were determined by meeting with relevant institutions beforehand. Prior to participation, the subjects were furnished with pertinent information regarding the study, and their consent for involvement was obtained through the signing of a consent form. The collection of data was conducted through in-person interactions.

Data Analysis

The statistical analysis of the data obtained in the present study was conducted utilising the IBM SPSS Statistics 26.0 software program. Descriptive statistics were performed using frequency (n) and percentage (%) for categorical variables, and Minimum (min), Maximum (max), Mean (average), Standard Deviation (SD), Median and Interquartile Range (IQR) values for numerical variables. The distribution of the variables was then examined using Kolmogorov-Smirnov values, Skewness-Kurtosis values and histogram graphics. The analysis revealed that the data were not normally distributed. To facilitate meaningful comparisons between paired groups, the Mann-Whitney U test was employed. P-values less than 0.05 were considered to indicate statistical significance.

Ethical Approval

The study was designed as a descriptive study and was approved by Ankara Medipol University Non-Interventional Clinical Research Ethics Committee with the decision number 57 dated May 13, 2024 (code number E-81477236-604.01.01-2306).

RESULTS

A total of 96 mothers participated in the study, 48 of whom had children with autism (Group 1) and 48 of whom had children with TD (Group 2). The mean age of all participating mothers was determined to be 38.42 years (±3.41). A subsequent investigation into the sociodemographic data of the two groups revealed no significant differences between them. The sociodemographic findings of the participants are given in Table 1.

Table 1

Socio-demographic findings of participants (n=96)

	Group 1 (n=48)		Group 2 (n=48)		Homogeneity	
	Grouj	p I (II=46)	Group) 2 (II=46)	t	р
Do you have a job currently working?	n	%	n	%		
Yes	8	16.7	13	27.1	- 1.231	0.073
No	40	83.3	35	72.9		
What is your educational background?	n	%	n	%		
Primary School	1	2,1	5	10,4		
Middle School	21	43,8	11	22,9	1.109 0.22	0 2 2 1
High School	17	35,4	16	33,3		0.221
University	9	18,8	15	31,3		
Postgraduate	0	0,0	1	2,1		
Do you have any diseases?	n	%	n	%		
Yes	0	0,0	4	8,3	2.067	0.044*
No	48	100,0	44	91,7	2.007	0,044*
Do you use medication?	n	%	n	%		
Yes	0	0,0	2	4,2	-	0.159
No	48	100,0	46	95,8	1.426	
How many children do you have?	n	%	n	%		
2 children	23	47,9	34	70,8	- 0.0	0.022*
3 children	25	52,1	14	29,2	2.326	320
	Min- Max	Mean SD	Min- Max	mean SD		
Age of mother (years)	33-48	37,79±3,73	31-46	39,04±2,98	- 1.813	0.073
Age of siblings of children with and without ASD (years)	3-6	3,81±0,89	3-6	4,38±1,12	- 2.719	0.155
Age of research group (years)	7–9	8,38±0,73	7-9	8,27±0,79	0.669	0.495

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Note: n: number of samples, % Percentage, Min: Minimum, Max: Maximum, Mean: Average, SD: Standard Deviation, t: reason of t test, *p<0.05

It was determined that children with autistic siblings received higher scores in the total SASS and the sub-dimensions of 'Impulsivity, Attention and Hiperactivity, Social Relationship, Mood, Need for Approval'. The descriptive values for the total SASS and the sub-dimensions of the scale are presented in Table 2.

Table 2

Values belonging to SASS (n=96)

		Median	IQR	Min – Max	Mean ± SD
Immulaivity	Group 1	19	4	14 - 30	19,75 ± 3,96
Impulsivity	Group 2	18	4	14 - 29	17,54 ± 3,20
Frustration Threshold	Group 1	11	4,75	8 - 19	11,39 ± 2,53
	Group 2	11	4	8 - 21	11,68 ± 3,40
Attention and Hiperactivity	Group 1	14	4	10 - 27	15,14 ± 3,51
	Group 2	14	5	10 - 22	12,95 ± 2,90
Social Relationship	Group 1	19	6	11 - 33	19,39 ± 4,43
	Group 2	18	4,75	12 – 28	17,66 ± 3,27
Emotional State	Group 1	10	5	12 - 28	10,43 ± 2,80
	Group 2	9	3	7 -19	9 ± 1,66
Need for Approval	Group 1	7	4	5 - 11	7,95 ± 1,70
	Group 2	8	3	5 – 13	7,47 ± 2,18
Introversion	Group 1	6	3	5 - 12	6,45 ± 1,67
	Group 2	6	1	5 - 14	7,08 ± 2,29
SASS Total Score	Group 1	76,50	12,50	59 - 142	89,08 ± 14,89
	Group 2	89	19,50	67 - 126	81,27 ± 12,67

Note: SASS: Social Adaptation and Skills Scale, Group 1: Children with autistic siblings, Group 2: Children without autistic siblings, Min: Minimum, Max: Maximum, Mean: Average, SD: Standard Deviation, IQR: Interquartile Range

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The study results indicated a significant discrepancy in the social adaptation and skill levels of siblings of children with and without ASD (p=0.001, Z= -3.253). Furthermore, a significant disparity was identified between the two groups in the scale sub-dimensions of "Impulsivity (Z = -3.541, p = 0.001)", "Attention and Hiperactivity (Z = -3.361, p = 0.001)", "Social Relationship (Z = -2.189, p = 0.029)", and "Emotional State (Z = -2.528, p = 0.011)". The values associated with these data are presented in Table 3.

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Table 3

Differences between SASS scores of children with and without ASD siblings (n=96)

	Z	р	
Impulsivity	-3.541	0.001**	
Frustration Threshold	-0.137	0.891	
Attention and Hiperactivity	-3.361	0.001**	
Social Relationship	-2.189	0.029*	
Emotional State	-2.528	0.011*	
Need for Approval	-1.454	0.146	
Introversion	-1.100	0.271	
SASS Total Score	-3.253	0.001**	

Note: SASS: Social Adaptation and Skills Scale, *p<0,05; **p<0,001.

DISCUSSIONS, CONCLUSION AND RECCOMENDATIONS

The present study was conducted with the objective of investigating the impact of having an autistic sibling on children's social adaptation and skill development. The analysis revealed a significant discrepancy in the social adaptation and skill levels of children with and without an autistic sibling. The results indicated that children with autistic siblings demonstrated higher scores in the "impulsivity", "attention and hyperactivity", "social relationship", and "emotional state" sub-dimensions of the scale, and exhibited a greater prevalence of problem behaviours in these domains.

Social adaptation, defined as the ability to interact with others in a manner that is socially acceptable, is a crucial aspect of human development (Günindi, 2010). In a study conducted by Shivers et al. (2019), the social adaptation levels of children with and without autistic siblings were compared. The results indicated that the siblings of children with ASD exhibited significantly greater social impairment compared to the other group (Shivers et al., 2019). A review of related studies in the literature revealed that children with autistic siblings exhibited significantly more pronounced social adaptation and skill difficulties than children with typically developing siblings (Rum et al., 2021; Shojaee et al., 2020). The aforementioned studies corroborate our findings, indicating that the issues observed in children with ASD also impact their siblings, negatively affecting their social adaptation and skills.

The concept of impulsivity within the SASS framework encompasses behaviours such as teasing friends unnecessarily and engaging in inappropriate actions in the presence of others, including masturbation and unwarranted physical contact (Sezgin & Akman, 2014). A substantial

proportion of children diagnosed with ASD have been observed to manifest impulsivity, characterised by sensory-seeking behaviours and problematic conduct (Gundogdu et al., 2023; van den Boogert et al., 2021). In a study conducted by Şengül (2017), it was posited that children with autistic siblings exhibit more impulsive and aggressive behaviours and are more prone to aggression (Şengül Erdem, 2019). A review of the relevant literature revealed that children with siblings diagnosed with ADHD exhibited greater impulsivity. This assertion is supported by a significant disparity observed between the two groups in a study that compared the impulsivity of children with and without siblings diagnosed with Attention Deficit and Hyperactivity Disorder (ADHD) (Mulligan et al., 2013). The findings of this study suggest that children with siblings who have special needs may display impulsive behaviours as a result of factors such as the constant attention being directed towards the other child and the observation of problematic behaviours by typically developing children.

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The frustration threshold is defined as the point at which manifestations of aggression, temper tantrums, excessive love of parents for the child, and the child getting angry in response to disappointment experienced, as well as behaviours that could be considered towards physical violence, become evident (Sezgin & Akman, 2014). Despite the absence of a statistically significant difference between the two groups, the mean scores for each group exhibited a narrow range of variation. The hypothesis that the absence of a significant difference between the two groups in this study is attributable to the influence of various factors on the sub-dimension of 'Frustration Threshold' in both groups is proposed. The hypothesis is that this is due to the presence of factors such as environmental influences, familial attitudes and approaches, social relations, and the child's adoption of a role model, as well as attitudes between siblings, which differ between the two groups.

The "Attention and Mobility" sub-dimension of the scale encompasses difficulties such as inattention, difficulty concentrating, and challenges with homework completion (Sezgin & Akman, 2014). A study indicates that children with autistic siblings exhibit heightened levels of hyperactivity in comparison to children with a sibling who has typical development (Shojaee et al., 2020). A further study by Erdem et al. (2020) found that children with autistic siblings exhibited more pronounced attention and mobility problems compared to those without (Erdem & Fazlıoğlu, 2020a). A review of the literature reveals a correlation between attention and mobility problems and impulsivity (Aguilar-Cárceles & Farrington, 2020; Dekkers et al., 2022). While these studies align with our findings, they propose that attention and mobility problems may have originated from impulsivity.

In a study conducted by Sinanmış (2019), it was determined that children with autistic siblings exhibited higher levels of social anxiety than those without autistic siblings (Sinanmış &

Kolburan, 2019). A review of the literature reveals that studies have indicated that children with autistic siblings experience social relationship difficulties to a greater extent than children without autistic siblings (Koukouriki et al., 2022; Park et al., 2023; Shojaee et al., 2020). These results corroborate the findings of the present study and indicate that the restrictions in communication and interaction encompassed within the diagnostic criteria for ASD may also give rise to challenges for the child's sibling.

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A significant discrepancy was identified between the groups in the 'Emotional State' subdimension, with children who have siblings diagnosed with ASD demonstrating more pronounced mood-related challenges. The 'Emotional State' sub-dimension encompasses items such as frequent emotional fluctuations and difficulties in forming relationships, as defined by SASS (Sezgin & Akman, 2014). The extant literature highlights that siblings of children with ASD are more likely to experience emotional challenges, including depression, stress, anxiety, and disorientation, compared to siblings of typically developing (TD) children (Erdem & Fazlıoğlu, 2020b; Eyüboğlu et al., 2017; Guidotti et al., 2021; Leedham et al., 2020; Yazıcı, 2020). The aetiology of these emotional difficulties is thought to be multifactorial, with several potential contributing factors including, but not limited to, parents devoting disproportionate time and attention to the child with ASD, increased family stress levels, and the neglect of the other sibling's needs.

In relation to the 'Need for Approval' sub-dimension, which encompasses behaviours such as seeking excessive attention and praise, or engaging in attention-seeking actions (Sezgin & Akman, 2014), no significant difference was observed between the groups. This finding indicates that the need for approval is not directly influenced by having a sibling with ASD. Instead, it is posited that environmental factors and family dynamics may play a more significant role in shaping the need for approval in both groups.

Introversion is characterised by a range of behaviours, including anxiety, fear, worry and inattention (Sadi, 2018). In a comparative study examining the introversion and antisocial behaviours of children with and without siblings diagnosed with ASD, no significant differences were identified between the two groups (Bozkurt et al., 2020). While these findings align with the results of the current study, it is hypothesized that the presence of a special needs individual in the family environment may contribute to increased levels of fear, anxiety, and introversion. Consequently, further research is warranted to explore the underlying factors and mechanisms influencing these outcomes.

The study is not without its limitations. The heterogeneity of the sample, with data being collected from two different institutions, and the variation in the quality and content of the education received by autistic children across these institutions, are considered potential sources

of bias that may have affected the autistic children and, consequently, their siblings differently. Furthermore, the variation in educational and occupational statuses of the participating mothers may have influenced family relationships and the time spent with the children, potentially impacting the children's social adaptation and skills.

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Consequently, autism has the potential to impact not only the child who has been diagnosed with the condition, but also their siblings and the wider family unit. The manifestation of problem behaviours associated with autism spectrum disorder (ASD) has the potential to influence the siblings of individuals diagnosed with ASD, thereby contributing to challenges in their social adaptation and skill development. However, this observation necessitates further investigation to establish a more definitive connection. Research has indicated that children with an autistic sibling tend to experience heightened levels of attention, impulsivity, anxiety, and stress compared to those without such a sibling. Consequently, there is a strong rationale for the inclusion of the family and siblings in the education and rehabilitation process for autistic children. Furthermore, the study's findings were contingent upon the restriction of the age range of the siblings. It is hypothesised that future studies focusing on different age groups or on groups where the autistic sibling is older than the typically developing sibling will provide more comprehensive insights. Furthermore, the exploration of additional factors, such as family dynamics, environmental influences, and the duration of sibling interaction, could further enhance our understanding of social adaptation and skill development in siblings of children with ASD.



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GENİŞLETİLMİŞ ÖZET

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Giriş

Literatür incelendiğinde OSB'li çocukların sosyal, duygusal, fiziksel ve çevresel birçok zorluğa maruz kaldığı görülmektedir (Park ve ark., 2023; Orm ve ark., 2022). OSB'li çocukların yaşadığı bu zorluklar sadece bireyin kendisini değil çevresini de etkiler. Özellikle çocuklar OSB'li bir kardeşe sahip olmayı küçük yaşta anlamlandıramaz ve kardeşinden gördüğü problem davranışları sergilemeye başlayabilir (Orm ve ark., 2022; Ledham ve ark., 2020). Otizmde meydana gelen iletişim ve etkileşimdeki kısıtlılıklar aynı evde yaşadıkları kardeşleri için de bir tehdit oluşturur. Kardeşler, zamanla problem davranışlar sergilemeye başlar, ihmal edildiklerini düşünür ve çeşitli problemlerle karşılaşırlar (Koukouriki ve ark., 2022; Kalecik, 2013). Yapılan bir çalışma, OSB'li kardeşi olan çocukların en çok 7-9 yaş aralığında problem yaşadıkların belirtmektedir (Mariñez, 2022). Bu sebeple bu çalışma 7 – 9 yaş aralığında olup, OSB'li kardeşi olan çocukların karşılaşırımak amacıyla yapılmıştır.

Yöntem

Çalışmanın amacı OSB'li çocukların kardeşlerinde sosyal uyum ve beceri düzeylerini karşılaştırmaktı. Çalışma ilişkisel tarama modeli ile gerçekleştirildi. Araştırmaya katılacak kişi sayısı benzer bir çalışma referans alınarak topam 96 (Her grupta 48 kişi) kişi olarak hesaplandı (Bozbey Akalın, 2005). Katılımcılara ait demografik bilgiler Sosyodemografik Bilgi Formu ile, çocukların sosyal uyum ve beceri düzeylerini değerlendirmek için de Sosyal Uyum ve Beceri Ölçeği (SUBÖ) kullanıldı. Veriler SPSS 26.0 paket programı kullanılarak analiz edildi. Tanımlayıcı veriler frekans, yüzde, minimum, maksimum, meydan, çeyrekler arası açıklık değerleri ile ifade edildi. Her iki grubun SUBÖ değerlerine ilişkin veriler Mann Whitney U testi kullanılarak karşılaştırıldı. T testleri ile her iki grubun homojenlik dağılımları karşılaştırıldı. Anlamlılık değeri p<0,05 kabul edildi.

Sonuçlar

Çalışma sonuçlarına göre annelerin yaş ortalamaları 38.42 ± 3.41 yıl olarak belirlendi. Her iki grupta da annelerin çoğunluğunn ev hanımı olduğu, bir hastalık ve ilaç kullanım durumlarının olmadığı belirlendi. OSB'li çocuğu olan annelerin çoğunlukla orta okul ve lise mezunu; OSB'li çocuğu olmayan annelerin ise çoğunluğunun üniversite ve lise mezunu olduğu belirlendi.

Ölçek puanları karşılaştırıldığında SUBÖ total puan ve ölçeğin bazı alt boyutlarında gruplar arasında anlamlı bir fark olduğu görüldü. 'Dürtüsellik, Dikkat ve Hiperaktivite, Sosyal İlişkiler, Duygu Durumu' alt boyutlarında gruplar arasında anlamlı bir fark bulunmuştur (p<0,05). 'Engellenme Eşiği, Onay İhtiyacı, İçe Dönüklük' alt boyutlarında ise gruplar arasında anlamlı bir fark bulunmamıştır.

Tartışma

7-9 yaşında, OSB'li kardeşe sahip çocukların sosyal uyum ve beceri düzeylerini karşılaştırdığımız bu çalışmada SUBÖ total puanı ve ölçeğin bazı alt boyutlarında gruplar arasında anlamlı bir fark bulunmuştur. Literatürde benzer çalışmalar incelendiğinde OSB'li kardeşi olan çocukların tipik gelişen kardeşi olan çocuklara göre daha fazla stres, kaygı, anksiyete, agresyon, dürtüsellik, hiperaktivite, sosyal ilişki problemleri yaşadığı belirlenmiştir (Shivers ve ark., 2019; Rum ve ark., 2021; Gündoğdu ve ark., 2023, Şengül Erdem, 2019; Erdem % Fazlıoğlu, 2020a).

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Bu çalışmada ölçeğin bazı alt boyutlarında gruplar arasında anlamlı bir fark çıkmamıştır. Engellenme eşiği ve onay ihtiyacı alt boyutlarında OSB'li kardeşe sahip olan ve olmayan grupta bu durumu etkileyen farklı faktörlerin olduğu düşünülmektedir. Ölçek ortalama puanları her iki grupta da birbirine çok yakın olmakla birlikte aile içi tutum ve yaklaşımların, sosyal ilişkilerin, çocuğun rol model almış ya da alabileceği kişilerin varlığının, çevrenin bu sonuçları etkilemiş olabileceği düşünülmektedir.

İçe dönüklük alt boyutunda da gruplar arasında anlamlı bir fark bulunmamasına karşın OSB'li kardeşe sahip olmayan çocukların daha yüksek puan alarak diğer gruba oranla bu alanda daha çok problem yaşadıkları belirlenmiştir. Literatürde benzer bir çalışma bulgularımızı desteklese de (Bozkurt ve ark., 2020) bu alanda yapılacak ileri çalışmalara ihtiyaç duyulduğu düşünülmektedir.

Çalışma sonuçlarına göre ve 7 – 9 yaş aralığının çocuklarda toplumsal etkileşim ve sosyal ilişkiler için oldukça önemli bir dönem olduğu, bu yaştaki tipik gelişen çocukların daha sonradan OSB'li bir kardeşe sahip olmasıyla birlikte çeşitli problem davranışlar sergilemeye başladıkları ve sosyal uyum ve beceri düzeylerinin olumsuz etkilendiği belirlenmiştir. Bu sebeple rehabilitasyon ve eğitim sürecine sadece çocuğu değil çevre ve aileyi de dahil etmenin önemli olduğu düşünülmektedir.