

# RODITELJSKI STILOVI I PONAŠANJA PREMA DJECI TIPIČNOG RAZVOJA I DJECI S TEŠKOĆAMA U RAZVOJU: PREGLED SUVREMENIH SPOZNAJA

## PARENTING STYLES AND BEHAVIOURS TOWARDS TYPICALLY DEVELOPING CHILDREN AND CHILDREN WITH DEVELOPMENTAL DISABILITIES: AN OVERVIEW OF CONTEMPORARY INSIGHTS

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**Sažetak:** Cilj je ovoga rada dati narativni pregled istraživanja roditeljskih stilova i ponašanja prema djeci tipičnog razvoja sa sestrom/bratom s teškoćama u razvoju. U radu je prikazan model roditeljskih stilova i dimenzije koje opisuju roditeljska ponašanja te njihove odrednice. Definiran je konstrukt nejednakog roditeljskog tretmana i opisana su istraživanja njegove povezanosti s razvojnim ishodima kod djece. U drugom dijelu rada prikazan je detaljan pregled spoznaja o nejednakom roditeljskom tretmanu u obiteljima s djetetom s teškoćama u razvoju. Pregled istraživanja upućuje da se u obiteljima s djetetom s teškoćom u razvoju često javlja nejednak roditeljski tretman, koji se iskazuje u doživljaju djece tipičnog razvoja da im roditelji ne posvećuju jednako pažnje i vremena kao sestrama/braći s teškoćama u razvoju, u angažmanu djece tipičnog razvoja oko skrbi za sestru/brata s teškoćama u razvoju te u manjku autonomije koji osjećaju djeca tipičnog razvoja. Nejednak roditeljski tretman u tim obiteljima povezan je s kvalitetom sestrinsko/bratskog odnosa, kao i s razvojem internaliziranih i eksternaliziranih problema kod djece tipičnog razvoja. U radu su prikazana i ograničenja klasičnih teorija i dosadašnjih istraživačkih nacrti, a koja se odnose na zanemarivanje dvosmjernog utjecaja roditeljskih stilova i ponašanja te ponašanja djeteta, kao i na nesklad između teorijskih koncepata i načina mjerenja konstrukata. Na kraju rada istaknute su smjernice za buduća istraživanja te kako postojeće spoznaje mogu pridonijeti programima podrške roditeljstvu djece s i bez teškoća u razvoju.

**Ključne riječi:** roditeljski stilovi, roditeljska ponašanja, sestra/brat, djeca s teškoćama u razvoju

**Abstract:** The aim of this paper was to provide a narrative review of research on parenting styles and behaviours towards typically developing children who have a sibling with developmental disabilities. The paper presents a model of parenting styles and the dimensions that describe parental behaviours and their determinants. After defining the construct of unequal parental treatment, research on its association with developmental outcomes in children are described. The second part of the paper presents a detailed review of findings on unequal parental treatment in families with a child with developmental disabilities. A review of relevant research suggests that unequal parental treatment is often observed in families with a child with developmental disabilities and is manifested in the following contexts: in the perception of typically developing children that their parents do not devote equal attention and time to them as they do to siblings with developmental disabilities, in the involvement of typically developing children in caregiving for their sibling with disabilities, and in the lack of autonomy felt by typically developing children. Unequal parental treatment in these families is associated with the quality of sibling relationships, as well as with the development of internalising and externalising problems in typically developing children. This paper also discusses the limitations of classical theories and research designs associated with the neglect of the bidirectional paths between parenting styles / behaviours and child behaviour, as well as the mismatch between theoretical concepts and methods of measurement of constructs. Finally, guidelines for future research are highlighted, along with recommendations on how existing knowledge can contribute to supporting programmes on the parenting of children with and without disabilities.

**Keywords:** parenting styles, parental behaviours, siblings, children with disabilities

## UVOD

Odnos s roditeljima jedan je od ključnih čimbenika razvojnih ishoda djeteta, a istraživanja pokazuju da taj odnos može biti značajno promijenjen ako je u obitelji prisutno dijete s teškoćama u razvoju (Chan i Goh, 2014; Hinek i Tokić Milaković, 2019). Unatoč velikoj zastupljenosti obitelji koje imaju dijete s teškoćama u razvoju, istraživanja roditeljskih ponašanja i stilova u tim obiteljima podzastupljena su (Thompson-Hodgetts i sur., 2024). Ipak, dosad provedene studije sugeriraju razlike u roditeljskim stilovima i ponašanjima prema djeci tipičnog razvoja u odnosu na djecu s teškoćama u razvoju (Gau i sur., 2010).

Općenito, utvrđeno je da su u obiteljima s djetetom s teškoćama u razvoju roditelji više usmjereni na zadovoljavanje potreba djece s teškoćama u razvoju, nego djece tipičnog razvoja (Chan i Goh, 2014; Hinek i Tokić Milaković, 2019). Neka djeca tipičnog razvoja u usporedbi sa životom svojih vršnjaka smatraju da ne žive „normalan obiteljski život“ (Vella Gera i sur., 2021) te izvještavaju da su u velikoj mjeri uključeni u kućanske poslove i brigu oko djece s teškoćama u razvoju (Floyd i sur., 2009; Gupta i Singhal, 2005; Meyer i Vadasy, 2008; Shojaee i sur., 2020; Skotko i Levine, 2006). Osim što često osjećaju da ih roditelji zanemaruju (Pit-Ten Cate i Loots, 2000), osjećaju i da im roditelji „pokazuju manje ljubavi“ te da su hladniji prema njima (Rohner, 2004; Rohner i sur., 2012).

S obzirom na to da u Hrvatskoj nema dovoljno istraživanja koja se bave roditeljskim stilovima i ponašanjima prema djeci tipičnog razvoja sa sestrom/bratom s teškoćama u razvoju, cilj je ovoga rada dati narativni pregled literature o toj temi. Kako se literatura o razlikama u roditeljstvu bavi roditeljskim stilovima, ali i ponašanjima, u nastavku će biti opisan model roditeljskih stilova, kao i dimenzije koje opisuju roditeljska ponašanja te njihove odrednice. Zatim će biti definiran konstrukt nejednakog roditeljskog tretmana i bit će opisana njegova povezanost s razvojnim ishodom. U drugom dijelu rada bit će prikazan detaljan pregled spoznaja o nejednakom roditeljskom

## INTRODUCTION

The relationship with parents is one of the key factors that influences a child's developmental outcomes. Research shows that this relationship can be significantly altered if there is a child with developmental disabilities in the family (Chan & Goh, 2014; Hinek & Tokić Milaković, 2019). Despite the high prevalence of families with a child with developmental disabilities, research on parental behaviours and styles in these families is lacking (Thompson-Hodgetts et al., 2024). However, studies conducted so far suggest differences in parental styles and behaviours towards typically developing children compared to children with developmental disabilities (Gau et al., 2010).

Generally, it has been established that in families with a child with developmental disabilities, parents are more focused on meeting the needs of the child with developmental disabilities than those of typically developing children (Chan & Goh, 2014; Hinek & Tokić Milaković, 2019). Some typically developing children perceive that they do not lead a “normal family life” compared to their peers (Vella Gera et al., 2021) and report being involved in household chores and caring for siblings with developmental disabilities too (Floyd et al., 2009; Gupta & Singhal, 2005; Meyer & Vadasy, 2008; Shojaee et al., 2020; Skotko & Levine, 2006). Besides often feeling neglected by their parents (Pit-Ten Cate & Loots, 2000), they also feel that their parents “show less love” and are colder towards them (Rohner, 2004; Rohner et al., 2012).

Since there is insufficient research in Croatia on parental styles and behaviours towards typically developing children with siblings with developmental disabilities, the aim of this paper was to provide a narrative review of the available literature on this topic. As the research on parenting differences addresses both parental styles and behaviours, the following section will describe the model of parental styles and the dimensions that describe parental behaviours and their determinants. In addition, the construct of unequal parental treatment will be defined and its association with developmental outcomes will be described. The second part of the paper will present a detailed review of the findings on

tretmanu u obiteljima s djetetom s teškoćama u razvoju.

### **Model roditeljskih stilova i dimenzije roditeljskih ponašanja**

Iako se u literaturi roditeljstvo počinje spominjati 1920-ih godina, o njemu se intenzivno govori tek 1960-ih kada se Diana Baumrind (1966) počela baviti tom temom, pa je neki autori nazivaju „majkom roditeljskih stilova“ (Tokić, 2008). Baumrind opisuje tri roditeljska stila, temeljena na različitom stupnju roditeljske kontrole i topline: permisivni, autoritarni i autoritativni. Permisivan roditelj dopušta djetetu da samo određuje svoje ponašanje i ne zahtijeva od djeteta da se pridržava društveno dogovorenih pravila ponašanja, drugim riječima, pokazuje nisku roditeljsku kontrolu (i visoku roditeljsku toplinu). Autoritaran roditelj visoko vrednuje poslušnost i u odgoju najčešće upotrebljava kazne i prisile, drugim riječima, pokazuje visoku roditeljsku kontrolu (i nisku roditeljsku toplinu). Autoritativan roditelj visoko vrednuje i autonomiju djeteta i disciplinu u pogledu određenih pravila ponašanja, a u odgoju upotrebljava potkrepljenja uz objašnjenja kako bi mijenjao i usmjeravao djetetovo ponašanje. Drugim riječima, pokazuje visoku roditeljsku kontrolu (i visoku roditeljsku toplinu). U svojem istraživanju, Baumrind (1967) je ispitala učinke triju opisanih roditeljskih stilova na razvojne ishode djece. Utvrdila je kako su najzrelija i najviše prilagođena djeca imala roditelje koji su pokazivali kontrolu, bili zahtjevni, ali koji su istovremeno i mnogo komunicirali s djecom te bili vrlo brižni prema djeci, što su obilježja autoritativnog roditeljskog stila.

Pionirske studije Diane Baumrind potaknule su istraživače da detaljnije ispituju procese socijalizacije u obitelji i njihove učinke. Dva desetljeća kasnije, nadovezujući se na Baumrindine koncepte roditeljske kontrole i topline, Maccoby i Martin (1983) definiraju dvije osnovne dimenzije roditeljskog ponašanja: (1) zahtjevnost, koja uključuje roditeljske postupke s ciljem socijalizacije djece i poštivanja društvenih i kulturoloških normi te (2) responzivnost, koja se odnosi na emocionalnu toplinu prema djetetu i podršku

unequal parental treatment in families with a child with developmental disabilities.

### **Model of parental styles and dimensions of parental behaviours**

Although topics related to parenting have been noted in the literature as early as the 1920s, it was not until the 1960s that it was discussed extensively, particularly by a researcher named Diana Baumrind (1966), earning her the nickname “the mother of parenting styles” (see Tokić, 2008). Baumrind (1966) described three parenting styles based on different levels of parental control and warmth: permissive, authoritarian, and authoritative. Based on her classification, the permissive parent allows the child to determine their own behaviour and does not require the child to adhere to socially agreed-upon rules of behaviour; in other words, they exhibit low parental control (and high parental warmth). The authoritarian parent highly values obedience and typically employs punishment and coercion in upbringing, thus demonstrating high parental control (and low parental warmth). The authoritative parent highly values both child autonomy and discipline regarding certain behavioural rules, using reinforcement with explanations to modify and guide the child’s behaviour. In other words, they demonstrate high parental control (and high parental warmth). In her research, Baumrind (1967) examined the effects of these three parenting styles on children’s developmental outcomes. She found that the most mature and well-adjusted children had parents who exhibited control, were demanding, but also communicated extensively with their children and were very nurturing, which are characteristics of the authoritative parenting style.

Pioneering studies by Diana Baumrind prompted researchers to further examine the processes of family socialisation and their effects. Two decades later, building on Baumrind’s concepts of parental control and warmth, Maccoby and Martin (1983) defined two fundamental dimensions of parental behaviour: (1) demandingness, which includes parental actions aimed at socialising children and adhering to social and cultural norms and (2) responsiveness, which relates to emotional warmth towards the child and support for the child’s independence, confidence-build-

djetetu u osamostaljivanju, stjecanju samopouzdanja i individualnosti. Dvije dimenzije ponašanja u međusobnoj interakciji rezultiraju različitim roditeljskim stilovima; uz permisivni, autoritarni i autoritativni, Maccoby i Martin uvode i zanemarujući roditeljski stil. Permisivni stil obilježava niska zahtjevnost i visoka responzivnost, autoritarni visoka zahtjevnost i niska responzivnost, autoritativni visoka zahtjevnost i visoka responzivnost, dok zanemarujući stil uključuje nisku zahtjevnost i nisku responzivnost.

Model roditeljskih stilova dalje razrađuju Darling i Steinberg (1993), koji roditeljskom stilu dodjeljuju ulogu kontekstualne varijable. Prema autorima, nužno je konceptualno razdvojiti roditeljski stil i roditeljska ponašanja / roditeljske prakse, pri čemu roditeljski stil moderira povezanost između roditeljskih ponašanja i djetetovih razvojnih ishoda. Ovu pretpostavku autori su i empirijski potvrdili u istraživanju u kojem su ispitali odnos roditeljske akademske uključenosti (roditeljsko ponašanje), roditeljskog stila i školskog uspjeha djeteta (Steinberg i sur., 1992). Povezanost između akademske uključenosti roditelja i školskog uspjeha bila je veća kod roditelja koji su visoko autoritativni, nego kod roditelja koji su nisko autoritativni. Moguće je da su autoritativniji roditelji učinkovitiji tijekom razgovora s djetetom o školi jer, primjerice, pomažu djeci pri organizaciji vremena i zadataka, više koriste argumente i objašnjenja te potiču raspravu, navode autori. Premda su Darling i Steinberg (1993) konceptualno razdvojili roditeljski stil i roditeljska ponašanja, u literaturi se često ta dva pojma ne razlikuju te se upotrebljavaju kao istoznačnice ili se u nacrtima istraživači bave samo jednim od koncepata, zanemarujući drugi (premda bi ispitivanje obaju koncepata istovremeno pridonijelo sveobuhvatnosti istraživačkog nacrta)<sup>1</sup>.

Oko dimenzije roditeljske kontrole, koju je uvela Baumrind, a koju su Maccoby i Martin razradili i nazvali dimenzijom zahtjevnosti, postoje prijepori u literaturi još od 1990-ih godi-

ng, and individuality acquisition. The interaction of these two dimensions of behaviour results in different parenting styles, and therefore, alongside permissive, authoritarian, and authoritative styles, Maccoby and Martin (1983) introduced the neglectful parenting style. The permissive style is characterised by low demandingness and high responsiveness, the authoritarian style by high demandingness and low responsiveness, the authoritative style by high demandingness and high responsiveness, while the neglectful style involves low demandingness and low responsiveness.

The model of parenting styles is further elaborated by Darling and Steinberg (1993), who assigned the role of contextual variables to parenting styles. According to the authors, it is essential to conceptually distinguish between parenting style and parenting practices/behaviours, with parenting style moderating the relationship between parental behaviours and child developmental outcomes. This assumption was empirically confirmed in a study where the relationship between parental academic involvement (parental behaviour), parenting style, and child academic achievement was examined (Steinberg et al., 1992). The association between parental academic involvement and child academic achievement was higher for parents who were highly authoritative than for those who showed low authoritative style. The authors suggested that it is possible that more authoritative parents are more effective in discussing school matters with their children because, for example, they help children organise their time and tasks, use more arguments and explanations, and encourage discussion. Although Darling and Steinberg (1993) conceptually distinguished between parenting style and parenting behaviours, in the literature, these two concepts are often undifferentiated and used interchangeably, and sometimes, researchers focus only on one concept in their designs, neglecting the other (although examining both concepts simultaneously would contribute to the comprehensiveness of the research design)<sup>1</sup>.

<sup>1</sup> U daljnjem pregledu navodit će se radi li se o varijabli roditeljskog stila ili roditeljskog ponašanja prema tome kako su varijable nazvane u originalnim radovima čiji se pregled radi.

<sup>1</sup> Henceforth, in the review, we will specify whether we are dealing with parenting style or parental behaviour based on how the variables are named in the original papers under review.

na. Pokušaj jasnije konceptualizacije roditeljske kontrole radi Barber, koji razlikuje bihevioralnu i psihološku kontrolu (Barber, 1996). Bihevioralna kontrola odnosi se na kontroliranje ponašanja djeteta, kada roditelji postavljaju granice i pravila koja su jasna i konkretna te u skladu s uvjerenjima i normama roditelja (Barber, 1996). Psihološka kontrola, s druge strane, uključuje pokušaje manipuliranja djetetom i zadiranja u djetetovu psihološku/emocionalnu autonomiju (Barber, 1996). Nadalje, Grolnick i Pomerantz (2009), vodeći se viđenjem roditeljstva u okviru teorije samoodređenja (Deci i Ryan, 1985), razlikuju roditeljsku kontrolu i roditeljsku strukturu. Dok se kontrola, prema autorima, odnosi na pritisak, intruziju i dominaciju roditelja prema djetetu, struktura se odnosi na roditeljsko vođenje – dosljedna pravila, predvidljivost, jasna očekivanja i povratne informacije te se ne bi trebala označavati pojmom kontrole. Autori zaključuju kako bi se dimenzija kontrole, kakva je dotad bila konceptualizirana u literaturi, zapravo trebala razdvojiti na dvije dimenzije – kontrolu i strukturu, a ne višestruke oblike/vrste kontrole (poput, primjerice, psihološke i bihevioralne kontrole). U skladu s modelom Grolnick i Pomerantz (2009), danas je u literaturi struktura zastupljena kao treća dimenzija roditeljskog ponašanja.

Studije sustavno pokazuju da je autoritativni roditeljski stil povezan s pozitivnim razvojnim ishodima kod djece, primjerice, višim samopoštovanjem, boljim mentalnim zdravljem, boljim socijalnim razvojem i višim akademskim postignućem (npr. Maccoby i Martin, 1983). Permisivni roditeljski stil povezan je s većom pojavnosti internaliziranih i eksternaliziranih problema, ali i s višim socijalnim vještinama i aktivnim rješavanjem problema (npr. Wolfradt i sur., 2003). Autoritarni roditeljski stil povezan je s negativnim razvojnim ishodima, poput povišene agresivnosti te različitih oblika psihopatologije (npr. Wolfradt i sur., 2003). Najslabiji razvojni ishodi pojavljuju se kod zanemarujućeg roditeljskog stila pa su takva djeca, uz veću pojavnost internaliziranih i eksternaliziranih problema, općenito sklonija i niskoj samoregulaciji, slabo

Since the 1990s, there have been several debates in the literature regarding the dimension of parental control that was introduced by Baumrind and further elaborated by Maccoby and Martin as the dimension of demandingness. An attempt at a more definitive conceptualisation of parental control was made by Barber, who distinguished between behavioural and psychological control (Barber, 1996). Here behavioural control refers to regulating the child's behaviour, where parents set clear and specific boundaries and rules consistent with their beliefs and norms (Barber, 1996). Psychological control, on the other hand, involves attempts to manipulate the child and intrude on the child's psychological/emotional autonomy (Barber, 1996). Furthermore, Grolnick and Pomerantz (2009), guided by the perspective of parenting within the self-determination theory (Deci & Ryan, 1985), differentiated between parental control and parental structure. According to the authors, control was related to pressure, intrusion, and domination by parents over the child, while structure pertained to parental guidance - consistent rules, predictability, clear expectations, and feedback, that should not be labelled as control. The authors concluded that the dimension of control, as conceptualised in the literature thus far, should be categorised into two dimensions - control and structure, rather than multiple forms/types of control (such as, for example, psychological and behavioural control). In line with the model proposed by Grolnick and Pomerantz (2009), structure is now represented as a third dimension of parental behaviour in the literature.

Studies consistently show that the authoritative parenting style is associated with positive developmental outcomes in children, such as higher self-esteem, better mental health, improved social development, and higher academic achievement (e.g., Maccoby & Martin, 1983). The permissive parenting style is associated with a higher prevalence of internalised and externalised problems, as well as higher social skills and active problem-solving abilities (e.g., Wolfradt et al., 2003). The authoritarian parenting style is associated with negative developmental outcomes, such as increased aggression and various forms of psychopathology (e.g., Wolfradt et al., 2003). The weakest develop-

socijalnoj odgovornosti i lošem školskom uspjehu (Lamborn i sur., 1991). U pogledu dimenzije roditeljske topline općenito, utvrđeno je da prevladava ovisnička ponašanja i devijantnost (Barnes i Farrell, 1992) te razvoj depresivnosti (Bean i sur., 2006). U pogledu dimenzije roditeljske kontrole, pokazalo se da je bihevioralna kontrola (ako nije ekstremna) povezana s pozitivnim razvojem djeteta, dok je psihološka kontrola povezana s rizikom za razvoj depresije i agresivnosti (Barber i sur., 2005). U novije vrijeme, Kuppens i Ceulemans (2019) ispitali su interakcijski učinak majčinog i očevog roditeljskog stila. Očekivano, kad oba roditelja imaju autoritativni stil, to ima najbolji učinak za djecu. Kad majka ima jedan roditeljski stil, a otac drugi, tada su učinkovitije one kombinacije u kojima jedan od roditelja ima autoritativni stil (nego kad nijedan roditelj nema autoritativni stil) jer pozitivni utjecaj autoritativnog stila ublažava neučinkovitost drugih odgojnih stilova.

Procesni model odrednica roditeljskog ponašanja (Belsky, 1984) pretpostavlja tri skupine čimbenika koji utječu na roditeljska ponašanja: (1) karakteristike roditelja (dob, spol, osobine ličnosti, uvjeti u kojima su odrastali, znanja i uvjerenja, psihopatologija), (2) karakteristike djece te (3) kontekstualni čimbenici. Belskyjev model višestruko je potvrđen u istraživanjima (Taraban i Shaw, 2018). Primjerice, potvrđeno je da postoji intergeneracijski prijenos roditeljskog ponašanja, odnosno da su roditelji skloni u svojim roditeljskim ponašanjima oponašati vlastite roditelje (Capaldi i sur., 2003). Zatim, metaanalizom je potvrđena korelacija između temeljnih pet osobina ličnosti i roditeljskih ponašanja (Prinzle i sur., 2009) te između depresije kod majki i roditeljskih ponašanja (Lovejoy i sur., 2000). Kognicije vezane za roditeljstvo kod majki i očeva određuju roditeljska ponašanja i njihov učinak na razvojne ishode djece (Goodnow i Collins, 1990). U sustavnom preglednom radu Yaffea (2023) pokazalo se da su majke sklonije autoritativnom roditeljskom stilu nego očevi, dok su očevi skloniji autoritativnom roditeljskom stilu nego majke. Značajnom se pokazala i dob roditelja: stariji roditelji u prosjeku su emotivno stabilniji, imaju višu samoregulaciju

mental outcomes are observed in neglectful parenting style, as children with such parenting styles, besides the higher prevalence of internalised and externalised problems, are generally prone to low self-regulation, poor social responsibility, and academic underachievement (Lamborn et al., 1991). In terms of the dimension of parental warmth overall, it has been found to prevent addictive and deviant behaviours (Barnes & Farrell, 1992), as well as the development of depression (Bean et al., 2006). Regarding the dimension of parental control, behavioural control (if not extreme) has been linked to positive child development, while psychological control has been associated with the risk of developing depression and aggression (Barber et al., 2005). More recently, Kuppens and Ceulemans (2019) examined the interaction effect of maternal and paternal parenting styles. As expected, when both parents have an authoritative style, it has the best effect on children. When the mother has one parenting style and the father has another, the combinations where one parent has an authoritative style are more effective (compared to when neither parent has an authoritative style) because the positive influence of the authoritative style mitigates the ineffectiveness of other parenting styles.

The process model of determinants of parental behaviour (Belsky, 1984) assumes that there are three groups of factors influencing parental behaviour: (1) parental characteristics (age, gender, personality traits, upbringing conditions, knowledge and beliefs, psychopathology), (2) child characteristics, and (3) contextual factors. Belsky's model has been extensively confirmed in research (Taraban & Shaw, 2018). For example, it has been confirmed that there is intergenerational transmission of parental behaviour, meaning parents tend to mimic the parenting behaviours of their own parents (Capaldi et al., 2003). Additionally, meta-analysis has confirmed correlations between the Big Five personality traits and parental behaviours (Prinzle et al., 2009), as well as between maternal depression and parental behaviours (Lovejoy et al., 2000). Parenting cognitions of mothers and fathers determine parental behaviours and their subsequent impact on children's developmental outcomes (Goodnow & Collins, 1990). In a systematic review by Yaffee

i razvijenije strategije suočavanja sa stresom, što određuje njihova roditeljska ponašanja (Castillo i sur., 2011; Van Holland de Graaf i sur., 2018; Verhoeven i sur., 2007).

Karakteristike djeteta kao odrednica roditeljskog ponašanja nešto su manje istraživana, a istraživači su se uglavnom usmjerili na osobinu negativne emocionalnosti – komponente temperamenta koja se odnosi na djetetovu sklonost da burno reagira na okolinske stresore. Dobiveni su dokazi da je djetetova negativna emocionalnost povezana s roditeljskim ponašanjem koje obilježava manje roditeljske topline i više roditeljske kontrole (Paulussen-Hoogeboom i sur., 2007). U pogledu kontekstualnih čimbenika, metaanalizom je utvrđena pozitivna povezanost kvalitete braka i kvalitete roditeljstva (Erel i Burman, 1995). Socijalna podrška uglavnom je povezana s roditeljstvom koje rezultira boljim razvojnim ishodima djece, osobito kod majki slabih prihoda (Green i sur., 2007). U skladu s prethodnim nalazom, potrebno je naglasiti i da je u većini istraživanja području roditeljskih stilova i ponašanja socioekonomski status roditelja bio moderator odnosa između drugih odrednica i roditeljskih stilova/ponašanja (Taraban i Shaw, 2018).

### **Nejednak roditeljski tretman i njegova povezanost s razvojnim ishodima**

Nejednak roditeljski tretman (engl. parents' differential treatment) odnosi se na različito roditeljsko ponašanje prema djeci unutar iste obitelji, ponajprije u pogledu roditeljske topline/responzivnosti, roditeljske kontrole/zahtjevnosti, količine vremena koje provode s djetetom i vrste aktivnosti te raspodjele kućanskih poslova (McHale i sur., 2000). Istraživanja nedvojbeno pokazuju kako djeca još od vrlo rane dobi pomno prate i uspoređuju vlastiti odnos s roditeljima i odnos svojih sestara/braće s roditeljima (npr. Dunn i Munn, 1985). Iako suvremene društvene norme snažno potiču jednakost u roditeljskom tretmanu, podaci sugeriraju da gotovo da ne postoje obitelji s više djece u kojima se roditelji jednako ponašaju prema svoj svojoj djeci (Daniels i Plomin, 1994; Jeannin i Van Leeuwen, 2015). Premda su uzroci nejednakog roditeljskog tretmana često razumljivi

(2023), it was shown that mothers are more inclined toward an authoritative parenting style than fathers, while fathers are more inclined toward an authoritarian parenting style than mothers. Parental age has also proved to be a significant factor: older parents tend to be more emotionally stable, have higher self-regulation, and have developed more coping strategies: all these factors influence their parental behaviours (Castillo et al., 2011; Van Holland de Graaf et al., 2018; Verhoeven et al., 2007).

There is little research on child characteristics as a determinant of parental behaviour, with researchers mainly focusing on the trait of negative emotionality – a temperament component related to a child's tendency to react strongly to environmental stressors. Evidence has been found that a child's negative emotionality is associated with parental behaviour that is characterised by less warmth and more control (Paulussen-Hoogeboom et al., 2007). Regarding contextual factors, a meta-analysis found a positive association between marital quality and parenting quality (Erel & Burman, 1995). Social support is generally associated with parenting, resulting in better developmental outcomes for children, especially among low-income mothers (Green et al., 2007). Consistent with previous findings, it is important to emphasise that in most studies in the field of parenting styles and behaviours, parental socioeconomic status has been a moderator of the relationship between other determinants and parenting styles/behaviours (Taraban & Shaw, 2018).

### **Unequal parental treatment and its association with developmental outcomes**

Unequal parental treatment refers to differential parental behaviour toward children within the same family, primarily in terms of parental warmth/responsiveness, parental control/demandingness, amount of time spent with the child and types of activities, and distribution of household chores (McHale et al., 2000). Research unequivocally shows that children from a very young age carefully observe and compare their own relationship with their parents to the relationship between their siblings and their parents (e.g., Dunn & Munn, 1985). Although contemporary social norms strongly encourage equality in parental treatment, there are

zbog različitih potreba koje imaju različita djeca (i u različitim razvojnim fazama), istraživanja pokazuju da nejednak tretman može imati negativne posljedice za djecu (npr. Shanahan i sur., 2008).

Negativne posljedice nejednakog tretmana za djecu očituju se u dva pogleda. Prvi se odnosi na negativne posljedice po dobrobit djeteta – najčešće onog djeteta prema kojem roditelji pokazuju manje afektivnosti i pažnje. Primjerice, utvrđeno je da djeca koja doživljavaju strožu roditeljsku disciplinu i manje roditeljske topline nego njihove sestre/braća izvještavaju o nižem samopoštovanju i više internaliziranih simptoma (npr. Daniels i sur., 1985). Također, utvrđeno je da je nejednak roditeljski tretman povezan i s više eksternaliziranih simptoma (Richmond i sur., 2005). Druga su posljedica nejednakog roditeljskog tretmana promjene u sestrinsko-bratskom odnosu. Tako je, primjerice, utvrđeno kako je smanjenje roditeljske topline prema djetetu povezano sa smanjenjem topline u sestrinsko-bratskom odnosu (Shanahan i sur., 2008). Brody i suradnici (1992) pokazali su i razlike s obzirom na spol roditelja: premda u svom istraživanju nisu dobili ukupnu razliku u pojavnosti nejednakog tretmana kod majki i očeva, nejednak tretman očeva imao je veći učinak na sestrinsko-bratski odnos.

Na temelju dosadašnjih podataka, istraživači zaključuju da se općenito najveće i najozbiljnije posljedice za djecu, i u pogledu mentalnog zdravlja i u pogledu sestrinsko-bratskog odnosa, javljaju ako se nejednak roditeljski tretman manifestira u domeni roditeljske emocionalne topline (McClellan i sur., 2024; McHale i sur., 2000). McHale i suradnici (2000) utvrdili su da za domenu količine vremena koje roditelji provode s djetetom i domenu raspodjele kućanskih poslova posljedice nisu toliko jednoznačne te da ovise o spolu djeteta, redoslijedu rođenja i razvojnoj fazi u kojoj je dijete. Autori moguće objašnjenje takvog nalaza vide u tome što su te dvije domene, za razliku od domene roditeljske topline, manje relevantne za percepciju odnosa između roditelja i djeteta. Također, nejednak roditeljski tretman u te dvije domene može se lakše objasniti „objektivnim“ razlozima, poput zajedničkih interesa roditelja i djeteta. Na ovom mjestu potrebno je naglasiti da se nejednak rodi-

almost no families with multiple children where parents behave equally towards all their children (Daniels & Plomin, 1994; Jeannin & Van Leeuwen, 2014). While the causes of unequal parental treatment are often understandable due to the different needs of different children (at different developmental stages), research shows that unequal treatment can have negative consequences for children (e.g., Shanahan et al., 2008).

The negative consequences of unequal treatment for children manifest in two aspects. The first relates to the negative effects on the child's well-being, more often, the child who receives less affection and attention from parents. For example, it has been found that children who experience stricter parental discipline and less parental warmth than their siblings report lower self-esteem and more internalising symptoms (e.g., Daniels et al., 1985). Additionally, unequal parental treatment has been associated with more externalising symptoms (Richmond et al., 2005). The second consequence of unequal parental treatment is changes in sibling relationships. For instance, reduced parental warmth towards a child is associated with reduced warmth in sibling relationships (Shanahan et al., 2008). Brody et al. (1992) also found gender differences: although they did not find an overall difference in the prevalence of unequal treatment between mothers and fathers in their study, unequal treatment by fathers had a greater impact on sibling relationships.

Based on the existing data, researchers concluded that the most significant and serious consequences for children, both in terms of mental health and sibling relationships, occur when unequal parental treatment manifests in the domain of parental emotional warmth (McClellan et al., 2024; McHale et al., 2000). McHale et al. (2000) found that the consequences with respect to time spent with the child and the distribution of household chores were not as straightforward, and that they depend on the child's gender, birth order, and developmental stage. The authors suggested that these two domains, unlike the domain of parental warmth, are less relevant to the perception of the parent-child relationship. Additionally, unequal parental treatment in these two domains can be more easily explained by “objec-



teljski tretman u istraživanjima dominantno ispitivao putem percepcije djeteta, stoga je podložan subjektivnosti. Kowal i Kramer (1997) pokazali su da je 75% djece koja su percipirala nejednak tretman u svojim obiteljima izvještavalo kako ne smatraju da je taj tretman nepravedan te su opravdavali takvo roditeljsko ponašanje razlikama između sestara/braće i sebe. Također, ista djeca su izvještavala i o boljem sestrinsko/bratskom odnosu nego djeca koja su smatrala da je nejednak tretman nepravedan.

Kada govorimo o uzrocima nejednakog roditeljskog tretmana, također možemo primijeniti Belskyjev (1984) Procesni model odrednica roditeljskog ponašanja. U pogledu osobina roditelja, istraživanja su utvrdila kako su značajne odrednice nejednakog roditeljskog tretmana mentalno zdravlje roditelja (npr. Henderson i sur., 1996) ili pojedine crte ličnosti (npr. Daniels i Plomin, 1985). U pogledu kontekstualnih čimbenika, značajnima su se pokazali sukobi u partnerskim odnosima, broj djece u obitelji, kao i socioekonomski status (npr. Jenkins i sur., 2003). Kao mogući posredujući faktor kod gore navedenih kontekstualnih čimbenika navodi se doživljeni stres. Što se tiče osobina djeteta, pokazalo se da nejednak tretman može biti povezan sa spolom djeteta. Dok neka istraživanja upućuju da su roditelji skloni većoj popustljivosti prema sinovima (npr. McKinney i Renk, 2008), druga istraživanja govore suprotno (npr. Keresteš, 1999; Xu i sur., 2018). Nadalje, utvrđena je povezanost s obzirom na redosljed rođenja pa će tako roditelji biti skloniji više kontrolirati prvorodenu djecu (Jeannin i Van Leeuwen, 2015). Konačno, dijete s teškoćom u razvoju u obitelji može znatno promijeniti roditeljska ponašanja (Hutchison i sur., 2016) te je logično pretpostaviti kako se u takvim obiteljima češće javlja nejednaki roditeljski tretman. U nastavku rada daje se pregled istraživanja roditeljskih ponašanja prema različitoj djeci unutar iste obitelji kada ta obitelj ima dijete s teškoćom u razvoju, odnosno ispitivanja razlike u ponašanju prema djeci tipičnog razvoja i njihovim sestrama/braći s teškoćama u razvoju.

ive” reasons such as shared interests between parents and children. It is important to note that unequal parental treatment in research has predominantly been examined through the perception of the child, making it susceptible to subjectivity. Kowal and Kramer (1997) showed that 75% of children who perceived unequal treatment in their families reported that they did not consider such treatment as unfair, and they could justify such parental behaviour based on the differences between their siblings and themselves. Additionally, the same children reported better sibling relationships than children who perceived unequal treatment as unfair.

When discussing the causes of unequal parental treatment, Belsky’s (1984) Process Model of Determinants of Parental Behaviour can also be applied. Regarding parental characteristics, research has found that significant determinants of unequal parental treatment include parental mental health (e.g., Henderson et al., 1996) or certain personality traits (e.g., Dunn & Plomin, 1986). In terms of contextual factors, conflicts in marital relationships, the number of children in the family, and socioeconomic status have been shown to have a significant effect (e.g., Jenkins et al., 2003). Perceived stress is mentioned as a possible mediating factor in the above-mentioned contextual factors. Regarding child characteristics, it has been found that unequal treatment may be associated with the child’s gender. While some studies suggest that parents tend to be more lenient toward sons (e.g., McKinney & Renk, 2008), other studies suggest the opposite (e.g., Keresteš, 1999; Xu et al., 2018). Furthermore, a correlation has been found with respect to birth order, with parents being more inclined to control firstborn children (Jeannin & Leeuwen, 2014). Finally, a child with developmental disabilities in the family can significantly alter parental behaviours (Hutchison et al., 2016) and it is logical to assume that unequal parental treatment is more common in such families. In the following sections, we review the research on parental behaviours toward children within the same family when that family has a child with developmental disabilities, as well as research on differences in behaviour toward typically developing children and their siblings with developmental disabilities.

## Nejednak roditeljski tretman u obiteljima s djetetom s teškoćama u razvoju

Dosadašnja istraživanja pokazuju kako postoji razlika u roditeljskim stilovima između roditelja koji imaju dijete s teškoćom u razvoju i roditelja koji imaju dijete tipičnog razvoja (npr. Hutchison i sur., 2016). Sealy i suradnici (2023) navode kako je vjerojatnije da će roditelji prema djeci s teškoćama u razvoju imati autoritarni ili permisivni roditeljski stil, nego autoritativni roditeljski stil. Pokazalo se da je jedan od uzroka toga doživljaj povećane ranjivosti djeteta. Primjerice, Pinquart (2013) je proveo metaanalizu kojom je usporedio roditeljske stilove prema djeci s kroničnim bolestima i djeci tipičnog razvoja te je pokazao da se roditelji prema djeci s kroničnim bolestima češće ponašaju „prezaštitnički“ i da ih više kontroliraju nego što to čine prema djeci tipičnog razvoja. Drugi je čimbenik općenito viša razina stresa kod roditelja djece s teškoćom u razvoju, koja je posljedica suočavanja s dijagnozom te brojnih izazova roditeljstva djeteta s teškoćom u razvoju. Također, mnogi roditelji zbog tako visoke razine stresa razvijaju različite probleme s mentalnim zdravljem (Sealy i sur., 2023). Visoka razina stresa i povezani problemi s mentalnim zdravljem roditelja, kao što je već spomenuto, predstavljaju važnu odrednicu roditeljskih stilova i ponašanja (Lovejoy i sur., 2000). Kako oba čimbenika smanjuju samoregulaciju i općenito kognitivne kapacitete roditelja, moguće je da to dovodi do suboptimalnog roditeljskog ponašanja, odnosno stilova koji su povezani sa slabijim razvojnim ishodima.

Istraživanja provedena u istočnim kulturama upućuju na to da su razlike u roditeljskim stilovima prema djeci s teškoćama u razvoju i djeci tipičnog razvoja kulturalno univerzalne. Primjerice, Ueda i suradnici (2020) ispitali su poveznicu roditeljskog stila i stresa japanskih roditelja djece s autizmom i njihovih sestara/braće tipičnog razvoja. Pokazalo se da su roditelji koji su pod većim utjecajem stresa podložniji primjenjivati autoritarni i permisivni roditeljski stil. Nadalje, Tripathi (2015) je u Indiji proveo istraživanje kojim je ispitao razlike u roditeljskom stilu prema djeci s teškoćama u razvoju i njihovima sestara-

## Unequal parental treatment in families with children with developmental disabilities

Previous research shows that there is a difference in parenting styles between parents who have a child with developmental disabilities and parents who have a typically developing child (e.g., Hutchison et al., 2016). Sealy et al. (2023) state that parents are more likely to adopt authoritarian or permissive parenting styles towards children with developmental disabilities rather than authoritative parenting styles. One of the reasons for this is the perceived increased vulnerability of the child. For example, Pinquart (2013) conducted a meta-analysis comparing parenting styles towards children with chronic illnesses and typically developing children and showed that parents tend to be more “overprotective” and exert more control over children with chronic illnesses than they do towards typically developing children. Another factor is the generally higher level of stress experienced by parents of children with developmental disabilities, resulting from coping with the diagnosis and the numerous challenges of parenting a child with developmental disabilities. Additionally, many parents develop various mental health problems due to such high levels of stress (Sealy et al., 2023). High levels of stress and related mental health problems in parents, as mentioned earlier, are important determinants of parenting styles and behaviours (Lovejoy et al., 2000). Since both factors reduce parental self-regulation and cognitive capacities, it is possible that this leads to suboptimal parenting behaviour, or styles associated with poorer developmental outcomes.

Research conducted in Eastern cultures suggest that differences in parenting styles towards children with developmental disabilities and typically developing children are culturally universal. For example, Ueda et al. (2020) examined the link between parenting style and stress among Japanese parents of children with autism and their typically developing siblings. It was found that parents who were under greater stress were more likely to use authoritarian and permissive parenting styles. Furthermore, Tripathi (2015) conducted a study in India examining differences in parenting style towards children with developmental disabilities and their typically

ma/braći tipičnog razvoja. Autor potvrđuje da su roditelji koji imaju djecu s teškoćama u razvoju pod većim stresom od njihovih vršnjaka, što je utjecalo na roditeljski stil. Majke koje su bile pod većim stresom pribjegavale su permisivnom roditeljskom stilu, a one koje su imale djecu s ozbiljnijim simptomima autizma pribjegavale su autoritarnom stilu.

Različite vrste teškoća u razvoju djeteta mogu utjecati na to da se roditelji različito ponašaju. Gau i suradnici (2010) uspoređivali su roditeljske stilove prema djetetu s autizmom i sestri/bratu tipičnog razvoja. Pokazalo se da će više kontrolirajućih i zaštitničkih ponašanja imati prema djetetu s teškoćama u razvoju. Slične nalaze dobili su i Mohammadi i Zarafshan (2014). Ku i suradnici (2019) navode kako će roditelji više kontrolirati dijete s autizmom zbog njegovih teškoća komunikacije i socijalizacije. Nasuprot tome, Sealy i suradnici (2023), u svom istraživanju nisu pronašli razlike u roditeljskim stilovima prema djeci tipičnog razvoja i djeci s oštećenjem sluha. Čini se da su razlike utvrđene za obitelji koje imaju djecu s autizmom posljedica toga što djeca s autizmom iskazuju najviše izazovnih ponašanja pa su zbog toga roditelji u takvim obiteljima izloženi najvećim razinama stresa (npr. McStay i sur., 2014).

Općenito, istraživanja (percepcije) razlika u roditeljskim stilovima i ponašanju prema djeci unutar iste obitelji kad ta obitelj ima dijete s teškoćama u razvoju pokazuju kako se sestre/braća djece s teškoćama u razvoju osjećaju da ih roditelji zanemaruju te da s njima provode manje vremena (Baron-Cohen i Bolton, 2000; Hinek i Tokić Milaković, 2019). S obzirom na potrebe djece s teškoćama u razvoju te da briga o njima iziskuje mnogo više energije, uključenosti, planiranja i organiziranja od brige za djecu tipičnog razvoja (Opačak, 2023), roditelji manje vremena i energije ulažu u odnos s djetetom tipičnog razvoja (Chan i Goh, 2014). Zbog toga je očekivano da se u takvim obiteljima često javlja nejednaki roditeljski tretman u različitim domenama. Chan i Goh (2014) proveli su istraživanje sestara/braće tipičnog razvoja i majki u obiteljima s djetetom s autizmom, u kojem su

developing siblings. The author confirmed that parents of children with developmental disabilities experienced greater stress than their peers, which in turn influenced their parenting style. For example, mothers who experienced higher levels of stress tended to adopt permissive parenting styles, while those with children with severe autism symptoms tended to adopt authoritarian styles.

Different types of developmental disabilities in children can influence how parents behave differently. Gau et al. (2010) compared parenting styles towards a child with autism and a typically developing sibling. It was found that parents exhibited more controlling and protective behaviours towards the child with developmental disabilities. Similar findings were reported in Mohammadi and Zarafshan (2014). Ku et al. (2019) suggested that parents may exert more control over a child with autism since they exhibit communication and socialisation-related disabilities. In contrast, Sealy et al. (2023) did not find differences in parenting styles towards typically developing children and children with hearing impairments in their study. It seems that the differences observed in families with children with autism are due to the fact that children with autism exhibit the most challenging behaviours, resulting in high levels of stress among parents in such families (e.g., McStay et al., 2014).

Generally, research on perceptions of differences in parenting styles and behaviours towards children within the same family (when that family has a child with developmental disabilities) shows that siblings of children with developmental disabilities often feel neglected by parents and spend less time with them (Baron-Cohen & Bolton, 2000; Hinek & Tokić Milaković, 2019). Considering the needs of children with developmental disabilities and the fact that caring for them requires much more energy, involvement, planning, and organising than caring for typically developing children (Opačak, 2023), Chan and Goh (2014) noted that parents invest less time and energy into their relationship with typically developing children. Therefore, it is expected that unequal parental treatment often occurs in such families in various domains. Chan and Goh (2014) conducted a study of typical siblings and mothers in families with a child with autism, in which mothers reported that they often take typ-

majke izvijestile da djecu tipičnog razvoja često uzimaju „zdravo za gotovo“. Geuze i suradnici (2023) u istraživanju su roditelja koji imaju dijete tipičnog razvoja i dijete s teškoćama u razvoju utvrdili da sudionici izvještavaju kako su svjesni nejednakog roditeljskog tretmana i da bi se željeli „podijeliti na pola“ kako bi mogli zadovoljiti potrebe obaju djeteta. Hinek i Tokić Milaković (2019) ustanovile su da roditelji imaju dvostruke standarde prema djeci tipičnog razvoja i bratu s autizmom. Sudionici istraživanja izvijestili su da majke više vremena provode s bratom s autizmom te da „nisu mogle ispunjavati njihove želje zbog obaveza oko brata s autizmom“.

Istraživanja pokazuju kako u djece tipičnog razvoja koja percipiraju da im roditelji poklanjaju manje pažnje nego njezinom/njegovom sestri/bratu s teškoćama u razvoju, takvo roditeljsko ponašanje može izazvati osjećaje ljubomore i zavisti, krivnje, anksioznosti, ali i suosjećanja (McHale i Pawletko, 1992; Moore i sur., 2002). Djeca tipičnog razvoja izvještavaju da se osjećaju ljubomorno zbog vremena i energije koju roditelji posvećuju njihovoj sestrama i braći s teškoćama u razvoju (Múries-Cantán i sur., 2023). Deavin i suradnici (2018) u metaanalizi također izvještavaju da sestre/braća tipičnog razvoja osjećaju ljubomoru zbog toga što roditelji više vremena i energije provode sa sestrom/bratom s teškoćama u razvoju i zbog nejednakog roditeljskog tretmana u ostalim domenama. Nadalje, drugi autori navode da su djeca tipičnog razvoja upravo zbog nejednakog roditeljskog tretmana u većem riziku za razvoj internaliziranih ili eksternaliziranih problema (Milevsky i Singer, 2022; Rossiter i Sharpe, 2001). Ipak neka istraživanja navode da razvojni ishodi sestara/braće tipičnog razvoja ovise o roditeljskom stilu prema tom djetetu. Primjerice, Platt i suradnici (2014) ispitali su ishode autoritativnog i autoritarnog roditeljskog stila na dobrobit sestara/braće tipičnog razvoja djece s teškoćama u razvoju. Roditelji autoritativnog roditeljskog stila potaknuli su svoju djecu tipičnog razvoja da im pomognu oko skrbi za sestru/brata s teškoćama u razvoju i svakodnevnih aktivnosti, dok je autoritarni stil bio u većoj mjeri povezan s eksternaliziranim

ically developing children “for granted”. Geuze et al. (2022) studied parents with typically developing children and children with developmental disabilities and found that participants were aware of unequal parental treatment and would like to “split themselves in half” to meet the needs of both children. Hinek and Tokić Milaković (2019) reported that parents have double standards towards typically developing children and brothers with autism. Research participants reported that mothers spend more time with the sibling with autism and “couldn’t fulfil their wishes because of obligations regarding the sibling with autism”.

Research shows that typically developing children who perceive that their parents pay less attention to them than to their sibling with developmental disabilities may experience feelings of jealousy and envy, guilt, anxiety, but also empathy (McHale & Pawletko, 1992; Moore et al., 2002). Typically developing children report feeling jealous of the time and energy parents devote to their siblings with developmental disabilities (Múries-Cantán et al., 2023). In a meta-analysis, Deavin et al. (2018) also reported that typical siblings felt jealous because parents spend more time and energy with the sibling with developmental disabilities and they reported unequal parental treatment in other domains as well. Furthermore, other authors have noted that typically developing children are at greater risk for developing internalising or externalising problems due to unequal parental treatment (Milevsky & Singer, 2022; Rossiter & Sharpe, 2001). However, some studies suggest that developmental outcomes of typical siblings depend on the parental style towards that child. For example, Platt et al. (2014) investigated the outcomes of authoritative and authoritarian parenting styles on the well-being of typical siblings of children with developmental disabilities. Parents with an authoritative parenting style encouraged their typically developing children to assist in everyday activities and caring for their sibling with developmental disabilities, while the authoritarian style was more strongly associated with externalising disorders in typical siblings. It is also worth noting that a qualitative study on the experience of growing up with a sibling with developmental disabilities in seven typically developing children showed

poremećajem kod sestara/braće tipičnog razvoja. Potrebno je napomenuti i da je kvalitativno istraživanje iskustva odrastanja s djetetom s teškoćama u razvoju kod sedmero djece tipičnog razvoja pokazalo da se sestre i braća ne osjećaju manje voljenima u odnosu na sestru/brata s teškoćama u razvoju, ali izvještavaju o tome da ih roditelji različito doživljavaju (Dervishaliaj i Murati, 2014).

#### *Skrb o sestrama/braći s teškoćama u razvoju*

Jedna od specifičnih domena u kojoj se očituje nejednaki roditeljski tretman u obiteljima s djetetom s teškoćom u razvoju je skrb o sestrama/braći s teškoćama u razvoju koja se očekuje od djece tipičnog razvoja. Prethodnim se istraživanjima pokazalo da roditelji koji imaju dijete s teškoćama u razvoju teško usklađuju obiteljske i radne obaveze (Brown i Clark, 2017; Ombla i sur., 2023; Stewart, 2013). Majke izvještavaju da im obaveze oduzimaju mnogo slobodnog vremena i mogućnosti da se posvete drugim članovima obitelji, pa tako i djeci tipičnog razvoja (e.g. Geuze i sur., 2023). Neka djeca tipičnog razvoja izvještavaju da roditelji od njih imaju mnogo veća očekivanja u odnosu na njihove vršnjake koji nemaju sestru/brata s teškoćama u razvoju, dok druga izvještavaju da roditelji nemaju velika očekivanja od pomoći u kućanskim poslovima, ali zbog osjećaja da su ta djeca već preopterećena čuvanjem i pomoći oko skrbi o sestri/bratu s teškoćama u razvoju (Gold, 1993; Tsao i sur., 2012). Sangha i suradnici (2023) proveli su kvalitativno istraživanje intervjuima u koje su uključili djecu tipičnog razvoja sa sestrom/bratom s teškoćama u razvoju. Pokazalo se da djeca tipičnog razvoja svakodnevno pomažu roditeljima i preuzimaju odgovornost u pojedinim situacijama za skrb o sestri/bratu s teškoćama u razvoju, npr. pripremaju obroke, brinu se o farmakološkoj terapiji i slično te da to može biti vrlo iscrpljujuće. Također su autori dokazali da su roditelji djece tipičnog razvoja očekivali da prioritiziraju potrebe i želje sestre/brata s teškoćama u razvoju u odnosu na svoje slobodno vrijeme. Hadjidakou i suradnici (2010) izvještavaju da djeca tipičnog razvoja sa

that siblings did not feel less loved compared to their sibling with developmental disabilities, but reported that parents perceived them differently (Dervishaliaj & Murati, 2014).

#### *Care for siblings with developmental disabilities*

One specific domain where unequal parental treatment manifests in families with a child with developmental disabilities is the expectation that typically developing children will participate in taking care of siblings with developmental disabilities. Previous research has shown that parents who have a child with developmental disabilities struggle to balance family and work obligations (e.g., Brown & Clark, 2017; Ombla et al., 2023; Stewart, 2013). Mothers have reported that their obligations consume much of their free time and limit their ability to devote time to other family members, including typically developing children (e.g., Geuze et al., 2022). Some typically developing children have reported that parents have much higher expectations of them compared to their peers who do not have a sibling with developmental disabilities, while others have reported that parents do not have high expectations of them helping with household chores, based on the feeling that these children are already overwhelmed with caregiving and assistance with their sibling (Gold, 1993; Tsao et al., 2012). Sangha et al. (2023) conducted qualitative interviews with typically developing children who have siblings with developmental disabilities and found that typical children help parents daily and take responsibility in certain situations for the care of their sibling, such as preparing meals, managing pharmacological therapy, and so on, which can be very exhausting. The authors also demonstrated that parents of typically developing children expected them to prioritise the needs and desires of their sibling with developmental disabilities over their own free time. Hadjidakou et al. (2010) reported that typically developing children who have siblings with developmental disabilities spend about 30% of their free time taking care of their sibling with developmental disabilities.

Typically developing children consider themselves “adults” because of their responsibilities and

sestrom/bratom s teškoćama u razvoju oko 30% slobodnog vremena provode skrbeći o djetetu s teškoćama u razvoju.

Djeca tipičnog razvoja sebe smatraju „odraslim osobama” zbog obaveza vezanih za sestru/brata s teškoćama u razvoju i vremena koje provode skrbeći za njih. Brennan i suradnici (2013) provedli su longitudinalno istraživanje u periodu od tri godine u koje su uključili djecu tipičnog razvoja, dobi od pet do 16 godina, sa sestrom/bratom s teškoćama u razvoju. Pokazalo se da su djeca tipičnog razvoja razvila snažnu percepciju sebe kao odgovorne osobe za skrb o djeci s teškoćama u razvoju. Upravo zbog percepcije pojačane odgovornosti za pomoć roditeljima i skrb o djeci s teškoćama u razvoju, djeca tipičnog razvoja sebe smatraju tzv. „socijalnim ljepilom”. Pokazalo se i da, zbog skrbi za dijete s teškoćama u razvoju, djeca tipičnog razvoja često zanemaruju školske obaveze i žrtvuju svoje slobodno vrijeme (Woodgate i sur., 2016). Više istraživanja naglašava da djeca tipičnog razvoja sebe nazivaju „mamom” ili „malom mamom” zbog odgovornosti koje imaju u kući i skrbi za dijete s teškoćama u razvoju (e.g. Jurić, 2023).

Zbog pojačane skrbi za sestru/brata s teškoćama u razvoju, djeca tipičnog razvoja imaju i manje autonomije od svojih vršnjaka (Leane, 2019). Osim što imaju manje mogućnosti donositi odluke o svojem slobodnom vremenu zbog zadataka o skrbi za sestru/brata s teškoćama u razvoju, čak i ako izlaze, neki izvještavaju da moraju povesti sestru/brata sa sobom (Dervishalijaj i Murati, 2014). Manjak autonomije u istraživanjima se povezuje s negativnijim odnosom između roditelja i njihove djece (Bámaca-Colbert i sur., 2012). Dva su moguća razloga zašto ova djeca imaju manje autonomije; osim što roditelji očekuju pomoć od njih, djeca tipičnog razvoja i sama osjećaju obavezu pomoći roditeljima za skrb o sestri/bratu s teškoćama u razvoju (Cuskelly i Gun, 2003; Milevsky i Singer, 2022). U nedavnom istraživanju sestre/braća tipičnog razvoja izvještavaju da često svoje dnevne rutine i obaveze prilagođavaju potrebama obitelji (Reimers i sur., 2023). Štoviše, McClellan i suradnici (2024) ispitali su utjecaj nejednakog roditeljskog

time spent related to caring for their sibling with developmental disabilities. Brennan et al. (2012) conducted a longitudinal study over a period of three years involving typically developing children, aged five to 16 years, who have siblings with developmental disabilities. It was found that typically developing children developed a strong self-perception as responsible individuals for caring for children with developmental disabilities. It is precisely because of the perception of increased responsibility in terms of helping parents and caring for children with developmental disabilities that typically developing children consider themselves the “social glue” in different situations. It was also shown that, because of the time and effort spent in caring for a child with developmental disabilities, typically developing children often neglect their school obligations and sacrifice their free time (Woodgate et al., 2016). Several studies emphasise that typically developing children refer to themselves as “mom” or “little mom” because of the responsibilities they have at home, including caring for the child with developmental disabilities (e.g., Jurić, 2023).

Due to an increase in responsibilities related to taking care of a sibling with developmental disabilities, typically developing children have less autonomy than their peers (Leane, 2019). Besides having fewer opportunities to make decisions about their free time due to tasks related to caring for their sibling with developmental disabilities, some even report that they must take their sibling with them when they go out (Dervishalijaj & Murati, 2014). This lack of autonomy can result in a more negative relationship between parents and their children (Bámaca-Colbert et al., 2012). There are two possible reasons why these children have less autonomy: besides parents expecting help from them, typically developing children also feel obliged to help parents with caring for their sibling with developmental disabilities (Cuskelly & Gun, 1993; Milevsky & Singer, 2022). In a recent study, typically developing siblings reported that they often adjust their daily routines and obligations to the needs of the family (Reimers et al., 2023). Moreover, McClellan et al. (2024) examined the impact of unequal parental treatment on typically developing children with siblings with developmental disabilities and found that younger siblings reported

tretmana na djecu tipičnog razvoja sa sestrom/bratom s teškoćama u razvoju. Mlađi sestre/braća izvijestili su da se osjećaju bližima s roditeljima ako pomažu roditeljima skrbiti oko djeteta s teškoćama u razvoju.

#### *Informiranje o teškoći u razvoju sestre/brata*

Nasuprot prethodno opisanim nalazima, neka djeca tipičnog razvoja koja imaju sestru/brata s teškoćama u razvoju izvještavaju da nejednaki roditeljski tretman doživljavaju manje negativno od svojih vršnjaka (McHale i sur., 2005). Neki autori u svojim istraživanjima navode da je informiranje o vrsti teškoće u razvoju važno da djeca tipičnog razvoja shvate razloge nejednakog roditeljskog tretmana (Deavin i sur., 2018). Sestre/braća tipičnog razvoja ističu da im se i percepcija prema sestri/bratu s teškoćama u razvoju promijenila nakon što su naučili o njemu i njegovim teškoćama u razvoju. Coffman i suradnici (2021) u svoje su istraživanje uključili djecu tipičnog razvoja sa sestrom/bratom s autizmom. Pokazalo se da su djeca tipičnog razvoja manje, odnosno pozitivnije, percipirala agresivna ponašanja djece s autizmom nakon što su ih roditelji informirali o teškoći u razvoju. Informiranje roditelja o autizmu djeci tipičnog razvoja pomoglo je da shvate razloge nepoželjnih oblika ponašanja. Također, neki se roditelji zalažu za to da sestre/braća tipičnog razvoja budu uključeni u plan intervencije (Tsao i sur., 2011).

Nažalost, brojnim se istraživanjima zaključuje da roditelji izbjegavaju s djecom tipičnog razvoja razgovarati o teškoći u razvoju (e.g. Mikecin, 2023). Roditeljska šutnja pojam je koji se u literaturi može pronaći, a objašnjava pokušaj roditelja da zaštite dijete tipičnog razvoja tako što ne razgovaraju o teškoći u razvoju unutar obitelji (Malcolm i sur., 2013). Briga je uzajamna, pa tako i djeca tipičnog razvoja izvještavaju da s roditeljima ne razgovaraju o brigama i problemima zbog prisutnosti djeteta s teškoćama u razvoju unutar obitelji, ne žele ih dodatno zamarati (Wennick i Huus, 2012). Otvorena komunikacija, podrška u obitelji može pomoći sestrama/braći tipičnog raz-

vojajući se bližima s roditeljima ako pomažu roditeljima skrbiti oko djeteta s teškoćama u razvoju.

#### *Informing about the developmental disabilities of siblings*

Contrary to earlier findings, some typically developing children who have siblings with developmental disabilities reported experiencing less negative unequal parental treatment than their peers (McHale et al., 2005). Some authors have suggested that acquiring more information about the type of developmental disability is important for typically developing children to understand the reasons for unequal parental treatment (Deavin et al., 2012). Typically developing siblings emphasise that their perception of their sibling with developmental disabilities changed after they found out more about him or her and their disabilities. Coffman et al. (2021) included typically developing children with siblings with autism in their study and found that typically developing children perceived aggressive behaviours of children with autism less negatively after their parents informed them about the developmental disability. Information provided by the parents about autism helped typically developing children understand the reasons for undesirable behaviours. Additionally, some parents advocate for the inclusion of typically developing siblings in the intervention plan for children with disabilities (Tsao et al., 2011).

Unfortunately, numerous studies have concluded that parents avoid discussing developmental disabilities with typically developing children (e.g., Mikecin, 2023). Parental silence is a concept found in the literature where parents attempt to protect typically developing children by not discussing the developmental disabilities of their siblings within the family (Deavin et al., 2007; Malcolm et al., 2013). Since concern is often mutual, typically developing children have also reported that they do not discuss concerns and problems with their parents due to the presence of a sibling with developmental disabilities within the family, especially since they do not want to burden them further (Deavin et al., 2007; Wennick & Huus, 2012; Hutson, 2007). Open communication and family support can help typical siblings understand devel-

zvoja razumjeti teškoću u razvoju i razloge nejednakog roditeljskog tretmana (Tsao i sur., 2012).

### *Razlike u nejednakom roditeljskom tretmanu s obzirom na spol roditelja*

Djeca tipičnog razvoja u obiteljima koje imaju dijete s teškoćama u razvoju izvještavaju da su bliži s očevima nego majkama. Gau i suradnici (2010) pronalaze da su djeca tipičnog razvoja od svojih očeva dobivala više ljubavi nego njihove sestre/braća s teškoćama u razvoju. Dok majke češće preuzimaju brigu oko djeteta s teškoćama u razvoju, očevi zadovoljavaju potrebe i skrbe o sestrama/braći tipičnog razvoja. Karakteristike djeteta utječu na uključenost očeva, stoga se u literaturi može pronaći podatak da su očevi više uključeni u skrb o djetetu s kojim se lakše oporoditi (Brown i sur., 2011; Kardum, 2021). Bez obzira na podjelu oko skrbi unutar obitelji, očevi izvještavaju da su izrazito emocionalno povezani sa svojom djecom s teškoćama u razvoju. Premda su i dalje prisutni u zadovoljavanju nekih potreba djece s teškoćama u razvoju, ipak veću ulogu imaju majke. U istraživanju Šarko (2020), ispitana su očeva roditeljska ponašanja i stavovi djece s oštećenjem vida te je utvrđeno da, iako majke provode više vremena s djecom s teškoćama u razvoju, očevi se sve više uključuju u obiteljski život. Najveći broj očeva izvještava da najviše vremena s djecom s teškoćama u razvoju provode vozeći ih na terapije (Šarko, 2020). Nadalje, Bulić i suradnici (2012) navode da su očevi više uključeni u aktivnosti pisanja domaćih zadaća i igranja, a manje u aktivnosti skrbi o sebi. Općenito, malo je domaćih i stranih empirijskih spoznaja o roditeljskom stilu očeva djece s teškoćama u razvoju. S obzirom na navedena istraživanja, razlog nejednakom roditeljskom tretmanu majki može biti u smislu podrške koju očevi pružaju majkama u skrbi oko njihove djece (Carpenter i Towers, 2008). Koliko je poznato, dosad nisu provedena sustavna istraživanja o tome kako različita uključenosti očeva u odgoj djece s teškoćama u razvoju i djece tipičnog razvoja utječe na njihove razvojne ishode.

developmental disabilities and the reasons for unequal parental treatment (Tsao et al., 2012).

### *Differences in unequal parental treatment based on parents' gender*

Typically developing children in families with a child with developmental disabilities report being closer to their fathers than their mothers. Gau et al. (2010) found that typically developing children received more love from their fathers than their siblings with developmental disabilities. More often, mothers take care of the child with developmental disabilities and fathers meet the needs and care for the typically developing siblings. The characteristics of the child influence the father's involvement, and previous studies have shown that fathers are more involved in the care of the child with whom they can interact more easily (Brown et al., 2011; Kardum, 2021). Regardless of the division of care within the family, fathers reported being emotionally connected to their children with developmental disabilities. Although they are involved in meeting certain needs of children with developmental disabilities, mothers play a greater role. Šarko (2020) examined fathers' parenting behaviours and attitudes of children with visual impairments and found that, although mothers spent more time with children with developmental disabilities, fathers were increasingly involved in family life. The majority of fathers reported spending most of their time with children with developmental disabilities by driving them to therapy sessions (Šarko, 2020).

Furthermore, Bulić et al. (2012) stated that fathers are more involved in homework and play activities, and less in self-care activities. Overall, there is limited empirical knowledge about the parenting style of fathers of children with developmental disabilities, both in Croatia and across the world. Given the aforementioned research, the reasons for unequal parental treatment exhibited by mothers may be in terms of the support fathers provide to mothers in caring for their children (Carpenter & Towers, 2008). As far as we know, systematic research has not been conducted on how different levels of the father's involvement



Angažiranost majki u skrbi djece s teškoćama u razvoju razlog je većoj stopi nezaposlenosti majki od očeva djece s teškoćama u razvoju (Ombla i sur., 2013; Setlzer i sur., 2001) ili rada na skraćeno radno vrijeme (Opačak, 2023; Vatne i sur., 2022). Neke majke čak izvještavaju da su spremne odreći se posla da budu kod kuće s djecom s teškoćama u razvoju (Gau i sur., 2010). Bilo bi važno istražiti različite uloge i angažman roditelja u skrbi oko djeteta s teškoćama u razvoju i u ta istraživanja uključiti i očeve (Billen i sur., 2023). Za razliku od roditelja s djecom tipičnog razvoja, roditelji djece s teškoćama u razvoju dnevno u prosjeku imaju 1,5 sati manje vremena za sebe (Bourke-Taylor i sur., 2010; Lujikx i sur., 2017; Opačak, 2023). Bulić i suradnici (2012) izmjerili su tjedni broj sati koji majke provode skrbeći za dijete s teškoćama u razvoju u odnosu na majke djece tipičnog razvoja. Pokazalo se da majke djece s teškoćama u razvoju mnogo više sati provode u aktivnostima skrbi za dijete s teškoćama u razvoju (85,67 sati) od majki djece tipičnog razvoja (71,67) (Opačak, 2023).

## KRITIČKI OSVRT I SMJERNICE ZA BUDUĆA ISTRAŽIVANJA

Klasični modeli/teorije roditeljskih stilova i roditeljskih ponašanja fokusirani su na to kako roditeljski stilovi i ponašanja utječu na dijete i kakve to posljedice ima na emocionalne i bihevioralne razvojne ishode kod djece i kasnije mentalno zdravlje u odrasloj dobi. No već je dugo poznato da je odnos roditeljskih stilova i ponašanja i ponašanja djeteta dvosmjernan, odnosno da i karakteristike djeteta utječu na to kakav roditeljski stil i ponašanja imaju roditelji (Crouter i Booth, 2003; Patterson i Fisher, 2002). Roditeljsko ponašanje oblikuje npr. djetetovo ponašanje, temperament, zdravstveno stanje, dob i spol djeteta kao i okolinski faktori (npr. odnos među ostalim članovima obitelji, okolnosti u kojima obitelj živi). Hipotezu o dvosmjernom utjecaju roditeljskih i dječjih ponašanja trebalo bi svakako uzeti u obzir prilikom primjene klasičnih teorija/modela roditeljskih stilova i ponašanja na populaciju roditelja djece s teškoćama u razvoju. Možemo pretpostaviti da su razlike u rodi-

in raising children with developmental disabilities and typically developing children affect subsequent developmental outcomes.

The extent of a mother's engagement in caring for children with developmental disabilities is a reason for a higher rate of unemployment among mothers than fathers of children with developmental disabilities (Ombla et al., 2013; Setlzer et al., 2001) or working part-time (Opačak, 2023; Vatne et al., 2022). Some mothers even reported that they were willing to give up their jobs to stay home with their children with developmental disabilities (Gau et al., 2010). It would be important to investigate the different roles and engagement of parents in caring for children with developmental disabilities, as well as to include the role played by fathers in these studies (Billen et al., 2023). Unlike parents of typically developing children, parents of children with developmental disabilities have on average 1.5 hours less time for themselves per day (Bourke-Taylor et al., 2010; Lujikx et al., 2017; Opačak, 2023). Bulić et al. (2012) measured the number of hours per week that mothers spend caring for a child with developmental disabilities compared to mothers of typically developing children. It was found that mothers of children with developmental disabilities spend many more hours in caregiving activities for the child with developmental disabilities (85.67 hours) than mothers of typically developing children (71.67) (Opačak, 2023).

## CRITICAL REVIEW AND GUIDELINES FOR FUTURE RESEARCH

The classical models/theories of parenting styles and parental behaviours focus on how parenting styles and behaviours affect the child, as well as the consequences on the emotional and behavioural developmental outcomes in children and future mental health in adulthood. However, it has long been known that the relationship between parenting styles and behaviours and child behaviour is bidirectional, meaning that the characteristics of the child tend to influence the parenting styles and behaviours of parents (Crouter & Booth, 2003; Patterson & Fisher, 2002). Parental behaviour is shaped by, for example, the child's behaviour, temperament, health status, age, and gender of the child,

teljskim stilovima i ponašanjima prema djetetu s teškoćama u razvoju i sestri/bratu tipičnog razvoja zapravo dokaz u prilog tom dvosmjernom utjecaju. Činjenica je da teškoće u razvoju djece imaju utjecaja na obiteljsku dinamiku i odnose između članova obitelji kao i na okolnosti života obitelji (npr. promjene rutina u svakodnevnom životu, dodatno financijsko opterećenje, promjena ili manjak socijalnih odnosa). Isto tako priroda teškoće u razvoju djeteta može utjecati na probleme u ponašanju djece i uzrokuje ili je u komorbiditetu sa zdravstvenim problemima, a može narušavati i mentalno zdravlje djece. Karakteristike i ponašanje djece s teškoćama u razvoju kao i specifični okolinski faktori mogu dvosmjerno utjecati na roditeljska ponašanja odnosno stilove prema djeci s teškoćama u razvoju što dokazuju razlike u roditeljskim stilovima/ponašanjima prema djeci s teškoćama u razvoju i njihovim sestrama/braći tipičnog razvoja.

Drugo je ograničenje/kritika metodološko i odnosi se na to da postoji nesklad između teorijske konceptualizacije i toga kako se konstrukt mjeri u samom istraživanju, primjerice, govori se o roditeljskom stilu, a upitnikom se mjere roditeljska ponašanja ili obrnuto. Kako je nejednak roditeljski tretman u istraživanjima dominantno ispitivan putem percepcije djeteta, podložan je subjektivnosti. Stoga bi buduća istraživanja trebala primjenjivati točne i specifične mjere konstrukata koji se ispituju te uključiti i objektivne mjere. Ograničenja dosadašnjih istraživanja su da u najvećoj mjeri uključuju dječju perspektivu, a kada se ispituje roditeljska perspektiva najčešće uključuju majke. S ciljem dobivanja sveobuhvatnije slike potrebno je ispitati i perspektivu očeva. Dosadašnje spoznaje ukazuju da se roditelji različito ponašaju prema djevojčicama i dječacima, stoga bi buduća istraživanja trebala uključivati djecu obaju spolova.

S obzirom na specifične karakteristike pojedinih teškoća u razvoju i njihov utjecaj na funkcioniranje i ponašanje djece u nacrtu istraživanja trebalo bi uključiti djecu s različitim vrstama teškoća u razvoju. Nadalje, važno je u istraživanja uključiti i usporedivu skupinu dijada sestara i braće tipičnog razvoja. Također, koliko je pozna-

as well as environmental factors (e.g., relationships among other family members, circumstances in which the family lives). The bidirectional influence of parental and child behaviours should definitely be considered as a hypothesis when applying classical theories/models of parenting styles and behaviours to the population of parents of children with developmental disabilities. We can assume that differences in parenting styles and behaviours towards children with developmental disabilities and their typically developing siblings provide evidence in favour of this bidirectional influence. It is a fact that children's disabilities affect family dynamics and relationships among family members, as well as the family's living circumstances (e.g., changes in daily life routines, additional financial burden, changes or lack of social relationships). Similarly, the nature of the child's disability can affect behavioural problems in children and cause or be comorbid with health problems, while simultaneously undermining the mental health of children. Characteristics and behaviour of children with disabilities, as well as specific environmental factors can bidirectionally influence parental behaviours or styles towards children with disabilities, as evidenced by differences in parenting styles/behaviours towards children with disabilities and their typically developing siblings.

Another limitation/critique is methodological, focusing on the mismatch between theoretical conceptualisation and how the construct is measured in actual research. For example, although parenting style is being addressed, the questionnaire measures parental behaviours, or vice versa. Since unequal parental treatment in research is predominantly examined through the child's perception, it can be subjective. Therefore, future research should use accurate and specific measures of the constructs being examined and include objective measures. The limitations of existing research are that it largely includes the child's perspective, and when the parental perspective is examined, it mainly focuses on the mothers. In order to obtain a more comprehensive picture, it is necessary to examine the fathers' perspective as well. Existing findings indicate that parents behave differently towards girls and boys, so future research should also include children of both genders.

to, dosad nije sustavno ispitano mijenjaju li se roditeljski stilovi i ponašanja prema djeci tipičnog razvoja sa sestrom i bratom s teškoćama u razvoju kroz vrijeme, primjerice možda se očekuje da se promijene za dijete tipičnog razvoja tijekom odrastanja, ali da za dijete s teškoćama u razvoju ne mijenjaju ili se mijenjaju u manjoj mjeri (npr. prezaštitničko i kontrolirajuće ponašanje).

## ZAKLJUČAK

Ovim preglednim radom utvrđeno je da postoje značajne razlike u roditeljskim stilovima i ponašanjima prema djeci tipičnog razvoja sa sestrom/bratom s teškoćama u razvoju te da sestre/braća tipičnog razvoja često percipiraju nejednak roditeljski tretman. Jedna je od specifičnosti nejednakog tretmana u ovakvim obiteljima što su sestre/braća tipičnog razvoja angažirani u skrbi o djetetu s teškoćama u razvoju, što im oduzima slobodno vrijeme i smanjuje autonomiju. Nejednak roditeljski tretman u obiteljima s djetetom s teškoćom u razvoju može utjecati na kvalitetu sestrijsko/bratskog odnosa, ali i na razvojne ishode djece tipičnog razvoja.

S obzirom na to da je bratsko/sestrinski odnos potencijalno najdugovječniji odnos s krvnim srodnikom, a činjenica je da će neka djeca s teškoćama u razvoju trebati skrb tijekom cijelog života, od velike je važnosti njegovati ove odnose na obostranu dobrobit i djece tipičnog razvoja i djece s teškoćama u razvoju. Podrška roditeljstvu vrlo je važna jer se intervencijama mogu oblikovati roditeljska ponašanja. Spoznaje proizašle iz ovog rada mogu unaprijediti servise podrške obiteljima djece s teškoćama u razvoju uključivanjem tema o specifičnim izazovima roditeljstva djece s teškoćama u razvoju i djece tipičnog razvoja iz istih obitelji. Unaprjeđenje roditeljskih vještina može pozitivno utjecati na svu djecu iz obitelji s djetetom s teškoćama u razvoju, a onda posredno i na sestrijsko/bratski odnos djece tipičnog razvoja i djece s teškoćama u razvoju.

Rezultati znanstvenih istraživanja mogu pridonijeti praksi i obogatiti podršku roditeljstvu djece tipičnog razvoja i djece s teškoćama u razvoju uvodeći teme o povoljnim i nepovoljnim ishodi-

Given the specific characteristics of individual disabilities and their impact on children's functioning and behaviour, future research should include children with different types of disabilities. Furthermore, it is important to include a comparable group of siblings of typically developing sisters and brothers in such research studies. Additionally, as far as we know, there is a lack of research systematically examining whether parenting styles and behaviours towards typically developing children with siblings with developmental disabilities change over time. For example, we might expect changes in parental style and behaviour towards typically developing children as they grow up, but little or no changes with respect to children with developmental disabilities (e.g., overprotective and controlling behaviour).

## CONCLUSION

This review has identified significant differences in parenting styles and behaviours towards typically developing children who have siblings with developmental disabilities, and typical siblings often perceive unequal parental treatment. One of the specificities of such unequal treatment in these families is that typical siblings are involved in taking care of the child with developmental disabilities, which tends to limit their free time and reduce their autonomy. Unequal parental treatment in families with a child with developmental disability can affect the quality of sibling relationships, as well as the developmental outcomes of typical children.

Considering that sibling relationships are potentially the longest-lasting relationships with blood relatives, and the fact that some children with disabilities will need care throughout their lives, it is crucial to nurture these relationships for the mutual well-being of both typically developing children and children with disabilities. Parenting support is very important because interventions can shape parental behaviours. Insights from this work can improve support services for families of children with developmental disabilities by addressing the specific challenges of parenting children with developmental disabilities,

ma roditeljskih stilova i ponašanja te promovirati autoritativni stil roditeljstva. Kroz savjetovanja, edukacije, treninge i grupe podrške roditelje se može uputiti na čimbenike koji mogu utjecati na nejednaki roditeljski tretman u obiteljima s djetetom s teškoćama u razvoju i nepovoljne ishode za razvoj djece, kao i njihove međusobne odnose. Jedan od primjera verificiranog programa koji potiče kompetencije roditelja djece s teškoćama u razvoju u Hrvatskoj je UNICEF-ov Rastimo zajedno Plus koji roditelji ocjenjuju pozitivnim iskustvom (Herceg, 2023).

as well as typically developing children from the same families.

Improving parenting skills can positively impact all children in families with a child with developmental disabilities, and indirectly, sibling relationships between typically developing children and children with developmental disabilities. The results of scientific research can contribute to enriching everyday parenting practices and foster the support provided for parenting of typically developing children, as well as children with developmental disabilities by introducing topics on favourable and unfavourable outcomes of parenting styles and behaviours and promoting the authoritative parenting style. Through counselling, education, training, and support groups, parents can be directed to factors that may influence unequal parental treatment in families with a child with developmental disabilities and unfavourable outcomes for children's development, as well as their relationships with each other. One example of a validated programme that promotes the competencies of parents of children with disabilities in Croatia is UNICEF's „Growing Together Plus“: parents have rated this programme as a positive experience (Herceg, 2023).

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