



Emotional and Behavioural Problems (EBPs): Comparative Analysis for incidence in Only Child & A Child with Sibling

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ABSTRACT

Adolescence, a critical period of transition from childhood to adulthood, witnesses a vast number of challenges in various spheres of development. With India boasting the largest population of adolescents globally, understanding the dynamics of emotional and behavioural problems (EBPs) is of great importance (Mishra, 2019). This study aims to annotate the similarities and differences of EBPs in adolescents, focusing on their sibling status (Only Child, & Sibling child). The data was collected on 198 school students with age range 12-17 years. Youth Self-Report (YSR/11-18) was used to assess internalizing (Int), externalizing (Ext) and neither internalizing nor externalizing behaviours (NINE) EBPs. A cross-sectional analysis revealed significant variations in EBP profiles among adolescents in relation to their sibling status. More precisely, the results show that adolescents with siblings have more internalizing problems whereas adolescents that are a single child have more NINE, and Externalizing problems, recognizing the variance in EBPs related to the sibling status among adolescents', aligning with the contextual view of development. (Bronfenbrenner, 1979)

Key words: Adolescence, Emotional and Behavioural Problems, Sibling Status



INTRODUCTION

"Adolescere," a latin word, which means "to grow up or to grow into maturity," (Lerner & Steinberg, 2004). Adolescence has been defined as a transition phase from childhood to adulthood which involves multidimensional processes such as biological, cognitive, social and emotional changes (Crone, & Dahl, 2012). Due to such changes, adolescents are more at risk of facing various clinical challenges.

Additionally, when talking of Family Dynamics focusing on only child Vs child with sibling, the latter was found to be a prominent factor in determining adolescents' EBPs (McHale et al., 2012). Other findings also revealed that sibling relationships are often the longest-lasting and serve as a source of support and comfort. Current evidence suggests that siblings may be uniquely positioned to support, and promote resilience and well-being. (Homan, & Kong, 2023). Hence, sibling relationships are considered to have a special and powerful context for adolescents' development, characterized by strong positive features, such as; warmth and intimacy, as well as negative qualities like intense, potentially destructive conflict. For these reasons, sibling interactions may be both a risk and a protective factor for the development and maintenance of emotional and behavioral dysfunction. (Dirks et al., 2015)

The Hierarchical Taxonomy of Psychopathology (HiTOP) has emerged from the quantitative approach to psychiatric nosology. It identifies psychopathology constructs based on patterns of covariation among signs and symptoms (Ruggero, et al., 2019). This ranked classification of Psychopathology talks about five spectrums of psychopathology, being somatoform, internalizing, thought disorders, detachment, and externalizing (Conway, et al., 2022; Kotov et al., 2022). From these 5 spectrums, internalizing, and externalizing psychopathologies together, are also known as emotional and behavioural problems (EBPs), pointing towards comprehensive problems related to persons' emotional and behavioural aspects. and are highly prevalent among adolescents and substantiated differ for male and female (Lee, Chahal, Gotlib, 2024). Internalizing psychopathology ranges from symptoms of emotional lability, anhedonia, anxiousness, distress, and fear. In contrast, externalizing is characterized by symptoms like rule breaking, aggression, poor impulse control, and inattention. Disorders on the externalizing spectrum include attention deficit hyperactivity disorder, conduct disorder, borderline personality disorder, and substance use disorders (SUDs).

Emotional and behavioral problems comprise a wide range of maladaptive, distressing and deviant emotions, thoughts & behavior. (Cullinan, 2004) Internalizing problems includes those negative behaviors which an individual takes inwards, that may cause maladaptive emotions and thoughts. Internalizing disorders include those which are experienced internally by an individual and include problems with mood or difficulties associated with depression or anxiety. These fall more on the emotional side of EBD. Externalizing problems include that behaviour which is directed toward an individual's environment as a result affecting their normal functioning. Externalizing disorders are those behaviors that occur externally such as



aggression or disruptive and defiant behaviour. (Baker et al., 2008; Morgan et al., 2009; Roelofs et al., 2006)

Emotional and behavioral problems (EBPs) are classified into multiple disorders under the two major diagnostic tools i.e. the DSM-5 and ICD-11. According to DSM-5, EBPs involves; neuro-developmental disorders, depressive disorders, anxiety disorders, trauma and stressor-related disorders, disruptive, impulse-control, and conduct disorders, and substance-related and addictive disorders, among others. Whereas, ICD-11 includes; mood disorders, anxiety disorders, neuro developmental disorders, behavioral and emotional disorders and impulse control disorders into EBPs

Adolescents with emotional problems may suffer from extreme irritability, annoyance or rage in addition to depression and anxiety, showing quick and sudden changes in mood and emotional outburst, symptoms might overlap across other emotional problems. Notably, emotional and behavior problems among adolescents are increasing all over the world at a rapid rate. (Fernandes, 2023).

Since the prevalence of emotional and behavioural disorders among children and adolescents is associated with other conditions such as sleep problems (Fulfs, et al., 2024), addiction (Bitto et al., 2024), etc. yielded considerable attention in clinical, educational researches regarding its prevalence, associated conditions, and factors. In the present study, effort has been made to describe the EBPs in relation to sibling status of adolescents.

OBJECTIVE

To study the impact of children's sibling status on Emotional and Behavioral Problems (EBPs).

METHODOLOGY

SAMPLE

The study was conducted on a sample of 198 divided into 2 categories comprising 99 children with siblings and those who are a single child. The sample of present study consists of individuals who fall in the age group of 13-18 years drawn from schools within Delhi. The sample was conducted manually providing questionnaires to the sample population through purposive sampling technique.

Inclusion Criteria

- School Students should fall in the age group of 13-18 years would be included in the study.



- For children with no siblings, data was only collected from only child, belonging to nuclear families.
- Those who give consent were included in the study.

Exclusion Criteria

- Individuals reporting Disability were excluded from the study.
- First-borns were excluded from the study.
- Children having any kind of psychotic disorder were not a part of this study.

RESEARCH DESIGN

Cross sectional research design was used to compare emotional and behavioural problems in adolescents with relation to their sibling status.

MEASURES

Youth Self-Report TM (2001); YSR developed by Achenbach (2001) was carried out to assess EBPs using narrow-band syndrome.

PROCEDURE:

The researcher commenced the data collection by forming rapport with the research participants where they were briefed about the purpose and importance of the study. The participants were explained about their right to withdraw from the study anytime they wish to, and they were also explained about their right of confidentiality. The informed consent was taken from participants before filling up the questionnaires which were handed to them through hardcopy. The data was analysed by using descriptive and inferential (Independent t-test) statistics with the help of statistical tool SPSS version 25.

RESULT

The aim of the study is to find out the prevalence of EBPs specifically in relation to child sibling status i.e. only child or have siblings on the basis of data driven evidence obtained from Delhi and Delhi NCR region of India. After analysing descriptive and Independent t-test analysis the findings revealed the specific pattern of EBPs with respect to both groups as following-



Table 1 Summary of t-test (Independent) Descriptive Analysis for Sibling Status on Measure of EBPs (YSR)

<i>Measures</i>	<i>sibling</i>		<i>Only</i>		<i>t Value</i>	<i>p</i>
	<i>Mean</i>	<i>SD</i>	<i>Mean</i>	<i>SD</i>		
<i>Int</i>						
<i>Anx</i>	<i>18.13</i>	<i>5.312</i>	<i>10.79</i>	<i>6.105</i>	<i>9.029</i>	<i>0.081</i>
<i>Dep</i>	<i>18.41</i>	<i>4.536</i>	<i>7.89</i>	<i>3.922</i>	<i>17.465</i>	<i>0.402</i>
<i>SC</i>	<i>18.66</i>	<i>4.680</i>	<i>9.67</i>	<i>5.455</i>	<i>12.445</i>	<i>0.003</i>
<i>Ext</i>						
<i>RBB</i>	<i>11.26</i>	<i>6.236</i>	<i>17.62</i>	<i>5.054</i>	<i>7.875</i>	<i>0.003</i>
<i>AB</i>	<i>12.12</i>	<i>6.302</i>	<i>16.13</i>	<i>5.578</i>	<i>4.741</i>	<i>0.023</i>
<i>NINE</i>						
<i>SP</i>	<i>9.92</i>	<i>4.591</i>	<i>17.51</i>	<i>5.620</i>	<i>10.402</i>	<i>0.059</i>
<i>TP</i>	<i>10.39</i>	<i>6.696</i>	<i>17.69</i>	<i>5.291</i>	<i>9.334</i>	<i>0.390</i>
<i>AP</i>	<i>8.71</i>	<i>3.996</i>	<i>18.22</i>	<i>4.756</i>	<i>15.241</i>	<i>0.023</i>

Int - Internalising problems, *Ext* - Externalizing problems, *NINE* – Neither Internalizing nor Externalizing, *Anx*- anxiety, *Dep*- depression, *SC*- Somatic Concerns, *RBB*- Rule Breaking Behaviour, *AB*- Aggressive Behaviour, *SP* - Social problems, *TP* - Thought Problems, and *AP* - Attention Problems.



For Internalising (Int) and its subscales, specifically somatic complaints ($t=12.445$, $p < .01$), the result is analysed to be significant. Accordingly, it can be concluded that a child with siblings has a higher probability of emotional problems such as feeling anxious, depressed, as well as complaining of headaches, vomiting, eyestrain etc.

With regards to problems involving externalizing, and its sub-scales namely; rule breaking behaviour ($t=7.87$, $p < .01$), and aggressive behaviour ($t=4.741$, $p < .05$), t values are found to be significant. Consequently, only child groups are found to be more prone to behavioural problems characterised by lying, cheating, stealing, truanting, breaking rules, disobedience, fighting, demanding, arguing, teasing etc.

Moreover, concerning to NINE, and its sub-scales such as thought problems (TP) ($t=9.334$, $p < .05$) and attention problems ($t=9.33$, $p > .05$), are found to be significant, therefore only child group exhibited dependability, troubling with others, inattentiveness, confused, impulsive etc. in terms of their thought and attention difficulties

Overall, this finding addresses that children with sibling groups exhibit more internalising problems in comparison to only child group. On the contrary, only child group shows comparatively more externalising and NINE problems.

DISCUSSION

The presented study explored the incidence of emotional and behavioural problems (EBPs) with respect to "only child/single child" and "Child with Sibling" status among adolescents residing in Delhi and NCR region of India. These EBPs analyzed across range of several domains described under three broad, and eight narrow band syndrome into youth Self-Report (YSR) i.e. internalizing problems (such as anxiety, depression, and somatic concerns), externalizing problems (rule-breaking and aggressive behavior), and other behavioral concerns considered into NINE (social problems, thought problems, and attention problems).

Results highlighted that, the somatic concerns show a statistically significant difference in favour of children with sibling groups. However, for Rule-breaking behavior, and aggressive behavior problems results are found to be significantly highly favourable for the only child group as reporting higher levels of externalizing behavior. Consistently, the only child group also reported comparatively higher levels of attention problems.

Overall. The present finding suggests that sibling status is associated with higher levels of internalizing problems in comparison to Single child. Analogously, **Bansal and Saliya (2022)** found that social-emotional competency was higher in only children when compared to children with siblings.

In a similar context, **a previous study by Yang et al. (1995)** found children with siblings status as significantly higher in fear, anxiety, and depression than only children, regardless of birth order. Sibling status is negatively correlated with rule-breaking behavior, social problems, thought problems, and attention problems, and aggressive behavior.

Consistently, **Bohannon (1898)** also indicated that sibling children are more adjusted than only children and also there are significant differences on the dimensions of neuroticism, extraversion and openness to experiences. In the same study, it was found that adjustment is



comparatively low in an only child. It indicates that being an only child is a disadvantage in itself as they are always over pampered, and given undivided love which in turn leads to some form of maladjustment in important areas of functioning. Also, since sibling children are high on neuroticism, extraversion and openness to experiences, it indicates how having a sibling affects the overall development of an individual which has a crucial role to play in how an individual perceives and interacts with others, and how open he/she is to new ideas and experiences.

Consistently, in another recent study by **Shoaib et al. (2024)** further investigated the trends of Emotional and Behavioral Problems (EBPs i.e., Anxiousness, Academic Problems, Aggression, Social Withdrawal, Feeling of Rejection, and Somatic Problems) in association with personal variables (age, sex, birth order, sector of school, academic grade, number of family members, siblings, hobbies, and Physical Playing) in EBPs. Results disclosed that the number of family members had a significantly weak negative relationship with anxiousness; while the number of siblings, duration of physical play and studying had a significant positive relationship with all EPBs. in addition, academic grades, sector of school, birth order and hobbies played a significant role in EPBs.

Besides these inconsistent trade, EBPs have important implications for clinical and educational psychologists, and health and educational policy makers. Hence, given centre attention to the present research in different domains.

In context to present findings, Alfred Adler introduced the birth order theory (Greene & Clark, 1970) in the 20th century. This theory addressed that the order in which children are born in a family affects the child's behaviour in terms of their personality.

In association with siblings with gender and EBPs, **Tay et al. (2024)** addressed that 7–25% of siblings had scores within the clinical range. Gender wise analysis further revealed that brothers had higher levels of Internalizing Problems than sisters, whereas sisters had higher levels of Externalizing Problems than brothers. In the same line, **Sultan and Malik (2020)** also investigated birth order as a predictor of resilience, forgiveness, Locus of Control (LOC), and deceptive communication and revealed that first born were significantly more resilient and less forgiving than second, middle, and last born. Moreover in the same study last born were found to be significantly less accommodating for deception communication than first, second, and middle born.

Likewise, a developmental psychologist quoted that an only child is a “disease in itself”, because of their spoiled and selfish behaviour which can continue in their adulthood leading to difficulties for the child and others around them **Ruggeri (2024)**, further substantiated the present finding.

To conclude, adolescents with siblings have more internalizing problems whereas adolescents that are a single child have more NINE, and Externalizing problems. Overall the finding is exclusive in terms of recognizing the variance in EBPs related to the sibling status among adolescents', aligning with the contextual view of development (**Bronfenbrenner, 1979**). Future research could further explore the mechanisms behind these differences, such as the impact of sibling rivalry, parental attention, and socialization on psychological outcomes.



CONCLUSION

The findings suggest that sibling relationships play a nuanced role in shaping emotional and behavioral health outcomes. While the presence of siblings might contribute to internalizing problems, it appears to mitigate some externalizing and attention-related issues. These findings could have implications for parenting strategies, mental health interventions, and educational practices aimed at supporting children based on their sibling status.

Conflict of interest: The Authors declare that there is no conflict of interest.

Acknowledgements: We are thankful to all the participants for providing their valuable time for this research.

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