

:research

Sibling Placement in Out of Home Care



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It should be noted that reading about and engaging with material that explores the issue of self harm and suicidality may lead to experiences of distress. This should be acknowledged and support sought if required.

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● ● Background

The significance of sibling relationships for children and young people in out-of-home care is well documented by national and international scholars (Luu, Conley, Wright & Cashmore, 2020). These relationships offer an opportunity for children to experience **relational permanence** (Mitchell, Tucci & Macnamara, 2020) when they cannot live at home. The sibling relationship may be one of the only lasting connections that children and young people in out-of-home care have access to, in light of what is known about instability and disruption in placements (McPherson Gatwiri, Macnamara, Mitchell & Tucci, 2018).

The United Nations Convention on the Rights of the Child, article 8.1, states that State Parties undertake to respect the right of the child to **preserve his or her identity**, including nationality, name, **and family relations as recognised by law without unlawful interference** (UNCROC, 1989). This article refers to the critical nature of family relationships and the need for ongoing contact and relationship. Reflecting on their own lived experience in out-of-home care, Herrick and Piccus (2005) suggest that:



Permanent, unconditional relationships are essential components to a child's growth and development since they afford a child the opportunity to make mistakes and still be loved. These relationships validate the child's fundamental worth as a human being because the love he or she receives does not have to be earned. Permanent, unconditional relationships can also produce hope and motivation in an individual. Foster children do not always have these permanent, unconditional relationships because of abusive family circumstances and the unstable nature of foster care itself. However, one natural means of fostering long-term relationships for children in substitute care is through maintaining their sibling connections. (Herrick et al., 2005, p. 851)



THIS RESEARCH BRIEF WILL:

- **Examine what we know about sibling placement in Australia**
- **Present highlights from the international research on siblings**
- **Explore findings about ways to support siblings in out-of-home care**
- **Apply a trauma lens to placement decision making, and**
- **Consider research and practice implications**

A NOTE ABOUT DEFINITIONS. Much of the literature reviewed for this research brief defines siblings as those who are blood-related only. We recognise that this definition is limited and may exclude significant relationships that children and young people define as their siblings. We note that a wider perspective is offered by the Child Welfare Information Gateway, who suggest that siblings may include

- Full or half-siblings, including any children who were relinquished or removed at birth;
- Step-siblings;
- Adopted children in the same household, not biologically related;
- Children born into the family and their foster/adopted siblings;
- Other close relatives or nonrelatives living in the same kinship home;
- Foster children in the same family;
- Other relatives or non-relatives with whom they live or have lived

(Child Welfare Information Gateway, 2019 p.3).

A clear practice implication of these expanded perspectives is for practitioners to consult children and young people about who they consider their siblings to be.

● What do we know about siblings in placement in Australia?

According to the most recently published Australian data:



Nationally, the number of children in out-of-home care at 30 June (2020) increased from 43,100 to 46,000 between 2017 to 2020, although the rate remained relatively stable at 8 per 1,000 children. As of 30 June 2020, the vast majority (92%) of children in out-of-home care were in home-based care, mostly with relative or kinship carers (54%), or in foster care (37%). Another 6.6% were living in residential care, mainly used for children with complex needs. Approximately 30,600 (67%) of the 46,000 children in out-of-home care at 30 June 2020 had been in long-term care (2 years or more) (AIHW, 2021 p.49).

Whilst the Australian Institute of Health and Welfare report annually, on numbers of children and young people entering and exiting the child protection and out-of-home care systems, **they do not report on sibling placements**. The extent to which children and young people are placed together or apart from siblings in out-of-home care across Australia, is therefore largely unknown. Some recent research findings begin to paint the picture for us.

One Australian study (Luu et al., 2020) involving a case file analysis on 89 finalised adoptions from out-of-home care over a one-year period, examined the living situations and sibling networks of those children and young people who had experienced adoption. Complex networks of sibling relationships were identified, with about one in four adoptions involving siblings remaining together. A key finding in this study was that of **high levels of sibling estrangement for children and young people in care**. A predictor of regular contact between sibling's post-adoption was noted to be the pattern of contact that was established pre-adoption. Overall, the study found that children in kinship care were those most likely to be placed with siblings and recommended that where siblings in care are separated, that resources are made available to support connections over time (Luu et al., 2020).

In what was reported to be the first Australian study, examining the issue of sibling placement in foster care, Wise (2011) outlined the Brother and Sisters in Care project. 116 carer families were surveyed across 12 home-based care programs in regional and metropolitan Victoria and under the auspice of Anglicare Victoria. Telephone surveys were conducted with 95 foster carers, caring collectively for about 144 children. Wise (2011) found that most of the 144 children and young people (73.6%) had a sibling, yet **only 16% of those with siblings in care were placed with all of their siblings**. In addition, where siblings were not placed together, the frequency of contact between them was found to be poor, with almost half of the cohort with siblings (45 children) having no or irregular contact with their siblings only. This study culminated with a series of recommendations to government to “ensure current and future generations of foster children are not further traumatised by losing important relationships and a natural source of lifelong support” (Wise, 2011, p.6).

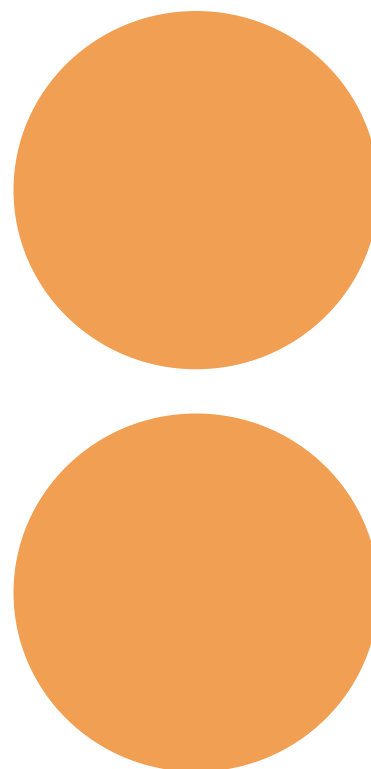
Four years after the Victorian research reported these findings (Wise, 2011), a major Australian study involved **1160 children and young people** in the care system, investigated the incidence of sibling placements. They were classified as being either **together (not separated), splintered (partially separated), or split (separated)** across Australian states and territories (McDowell, 2015, p.24).

Results varied by state and territory, however, the study reported that for those children and young people who had siblings in care:



29.0% (n = 252) lived with all their brothers and sisters in care (Together); 35.4% (n = 308) resided with some of their siblings, but others were in other placements (Splintered); and 35.6% (n = 309) did not live with any siblings in care (Split) (McDowall, 2015, p.32).

This study, reporting on young people’s perspectives, confirmed earlier research that **when children and young people were placed together or in ‘splintered’ arrangements with their siblings that the placement trajectory was more stable.** It also highlighted the particularly vulnerable cohort of young people who were placed alone and whose siblings were not in the care system. Kinship placements revealed a greater number of ‘together’ placements, with children and young people with disabilities, and older young people (15-17 years) more likely to be ‘split’ (McDowall, 2015). This Australian study also examined the views of caseworkers across various jurisdictions via a review of case records. Case workers’ comments within case files indicate some of the barriers to facilitating contact or placing siblings together. These included excessive caseloads, limiting capacity to search for and locate siblings, conflictual relationships between carers inhibiting contact, geographical constraints, and limited resources (McDowall, 2015).



● Sibling placements in ● First Nations contexts

The Aboriginal Child Placement Principle, enshrined in state and territory legislation, was developed as a response to the growing recognition of the damaging impact of colonisation and subsequent large-scale separation of First Nations children from family and community (AIHW, 2021). The intent of the principle was to ensure that, should a First Nations child be unable to remain safely at home with their family, that an alternate family placement would be the first consideration, ensuring ongoing connection to family and to country. In this context, First Nations children should be afforded opportunities to remain with or connected to their sibling groups.

RECENT AUSTRALIAN INSTITUTE OF HEALTH AND WELFARE DATA REVEALS THAT:

- about 18,000 Indigenous children were living in out-of-home care at 30 June 2019 (a rate of 54 per 1,000)
- nearly two-thirds (63%) of Indigenous children in out-of-home care were living with Indigenous or non-Indigenous relatives or kin or other Indigenous caregivers
- about 8,100 Indigenous children in out-of-home care were required to have cultural support plans at 30 June 2019, and 77% of them had current, documented, and approved cultural support plans, which include details such as the child's cultural background and actions taken to maintain their connection to culture

(AIHW, 2021, p.49).

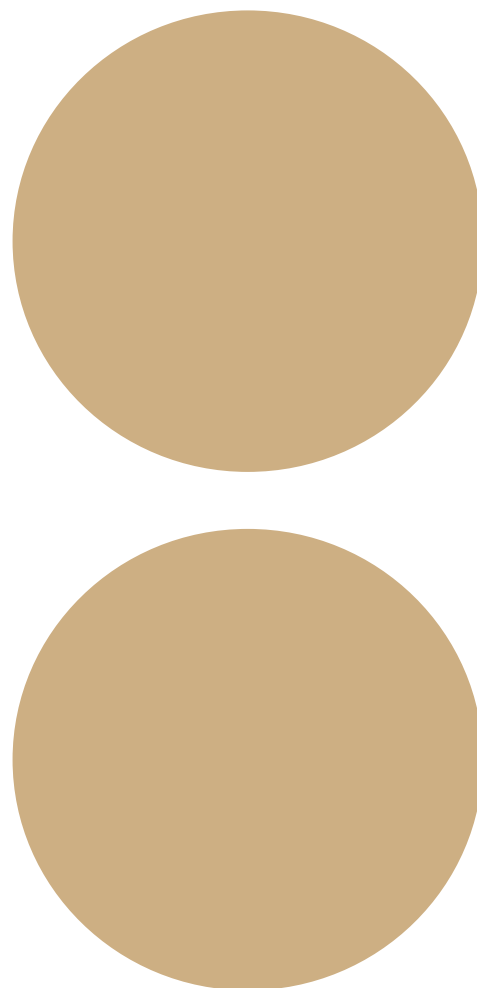
As indicated earlier, the AIHW does not report on sibling placements or connections. One small Australian study, conducted in Victoria explored the extent to which First Nations children in kinship care were able to maintain family relationships and cultural connections (Kiraly, James & Humphreys, 2014). First Nations focus group participants conveyed a strong and inclusive definition of “family” that privileged the “imperatives of family obligations” (Kiraly et al., 2014, p. 27). It was evident that this perspective included the critical importance of sibling connection and relationship. The study concluded with “the view that properly assessed and supported kinship care (inclusive of sibling groups) can assure the well-being of Indigenous children and support their family and cultural connections” (Kiraly et al., 2014, p.30). For First Nations children who are placed within the wider out-of-home care system, away from family and community, relationships may have been damaged and cultural connections broken (Bamblett, Long, Frederico & Salamone, 2014).

International Research

A major international review of existing outcomes research in relation to sibling placements in out-of-home care located 36 studies which investigated the association between sibling placement and child placement stability or wellbeing (DiGiovanni & Font, 2021). The findings regarding child outcomes are mixed, with no clear evidence that siblings placed together in out-of-home care is associated with enhanced wellbeing. There was, however, **an association found between sibling placement and stability, with these authors identifying four studies that suggested that where siblings were placed together, they were significantly less likely to experience placement breakdown** than those who were placed separately (DiGiovanni et al., 2021). Notably, one of these studies was conducted in Australia (McDowell, 2015).

In a study involving residential care, researchers compared the self-esteem and well-being of young people who were placed with their siblings in residential care and those who were placed separately to their siblings (Davidson-Arad & Klein, 2011). This study, undertaken in Israel involved a total of almost 200 young people in the sample and found that young people who were placed with their siblings reported **greater wellbeing overall than those who were separated** (Davidson-Arad et al., 2011). These authors argue that their findings are supportive for a case for placements where siblings remain 'intact' as those that are more likely to produce better outcomes. The experience of closeness to siblings, in terms of the both living situation and opportunity for a stable, lasting relationship was also found to have a positive impact on the development of self-esteem and quality of life.

Research investigating the separation of siblings in out-of-home care and subsequent criminal behaviours has produced some interesting findings (Novak & Benedini, 2020). One North American study analysed the behaviours of 380 young people separated from at least some of their siblings versus those who remained in placement with siblings. There was **significantly more criminal behaviour in the group who had lived apart from their siblings**. Researchers concluded that this may be important for policy makers to consider the importance of preserving and strengthening sibling relationships in out-of-home care (Novak, et al., 2020).



Supporting siblings in out-of-home care

Whilst the prevailing research argues in favour of maintaining sibling connection in out-of-home care, there are few studies which suggest ways in which these connections can be best promoted and maintained. Sibling research across the general population may offer some useful insights. Kramer (2010) reviewed the available research and proposed a framework for understanding and promoting sibling group prosocial behaviour amongst the general population. This framework proposes the 'essential ingredients' of successful sibling relationships as including a suite of competencies, each supported by research. **These competencies are outlined below (see figure 1.) and could form the basis of targeted intervention to support and maintain sibling connectedness:**

Figure 1. An Emerging List of Essential Competencies for Prosocial Sibling Relationships in Early Childhood (Kramer, 2010, p.82)

COMPETENCY	DESCRIPTION
Positive Engagement	Play, conversation, mutual interests, enjoyment, and fun. Identify the sets of activities that accommodate the differing developmental levels of all siblings.
Cohesion	Recognise and value instances of help, support, protectiveness, cooperation, loyalty, trust, and pride.
Shared Experiences that Build Support	Appreciate siblings' unique knowledge of one another and their family to strengthen bonds, whilst avoiding such knowledge to disadvantage siblings. Value both shared and independent interests.
Social and Emotional Understanding: perspective-taking	Decentering, learn to assess and respect siblings' unique views, needs, goals, and interests in addition to one's own.
Emotion Regulation	Identify and manage emotions and behaviours in emotionally challenging and frustrating situations.
Behavioural control	Refrain from behaviours that siblings find undesirable (e.g.; bossiness, bossiness, teasing, embarrassing in front of friends...).
Forming neutral or positive attributions	In ambiguous situations, children may form hostile attributions about the intent of siblings' behaviours, children must learn to check or correct faulty attributions.
Conflict management, problem-solving	Conflicts are social problems that can be solved, yet children need to be explicitly taught these methods. Parental modelling and scaffolding of effective conflict management strategies (e.g.; collaborative problem solving, mediation, are essential for child learning).
Evaluating parental differential treatment practices	Discuss the impact of forms of parental differential treatment that are perceived as unfair and adjust parental behaviours so that children's unique needs are met

Whilst limited, a small number of targeted intervention programs for siblings in out-of-home care are documented in the contemporary literature (McBeath, et al., 2014). One example of a program for siblings in foster care targeted young people aged 7-15 years (McBeath, et al; 2014). Known as the Supporting Siblings in Foster Care program the 12-week course, implemented in Oregon USA, has a focus on skill-building and community-based activities for siblings (Mc Beath, Kothari, Blakeslee, Lamson-Siu, Bank, Linares, Waid, Sorenson, Jimenez, Pearson & Shlonsky, 2014). Skill-building sessions target social skills for individual siblings and ways to reduce sibling conflict. Activity-based sessions address issues of self-regulation, cooperation, communication, and skills in approaching trustworthy adults (e.g., foster parents) about issues. Research investigating the impact of this targeted intervention is yet to be published.

A second program targeting younger sibling dyads between 5 -11 years has also been documented (Mc Beath, et al., 2014). This 8-week intervention, implemented in New York City USA, aimed to strengthen relationships for siblings placed together in foster care settings. The program is known as ‘Promoting Sibling Bonds’ and aims to build children’s prosocial competencies, equip foster parents with conflict mediation skills that support those competencies, and promote new skills being used in the foster care home. Early results were reported to be showing promise, with a reduction in aggression from the older child toward the young child commonly reported by foster carers (Mc Beath, et al., 2014).

● Applying a trauma lens to sibling placement decisions

Research suggests that where siblings are supported to develop positive, engaged relationships in their formative years, they are more likely to maintain supportive relationships over their life course (Kramer, 2010). The placement of siblings in out-of-home care, however, involves many complexities that may not be readily apparent. A significant number of these sibling groups have suffered complex trauma within their families of origin. Complex trauma is defined here as the exposure to multiple traumatic events, often of an invasive, interpersonal nature, and the wide-ranging, long-term impact of this exposure (Tucker, Finkelhor, Shattuck & Turner, 2020). These events are typically severe and pervasive, such as abuse (physical, emotional) and/or profound neglect. They usually begin early in life and can disrupt a child’s development and their formation of a self.

The trauma, abuse, and neglect that siblings experience may impact on **individual development. However, it may also damage individual sibling’s capacity to benefit from relationships with adults, and the growth of healthy sibling connections.** There is a gap in the literature surrounding trauma and sibling relationships. A scoping review conducted by Katz & Hamma (2016) revealed that there is a scarce body of knowledge regarding the sibling relationship in the context of child abuse, trauma, and violence. Most of the studies that this review identified, focused only on the effects of child abuse on the out-of-home care placement. This is despite research pointing to the importance of sibling relationship to children’s wellbeing and the tremendous effect that sibling relationships may have on their lives, both in childhood and adulthood.

Studies that have explored abuse of siblings within their families of origin, have found that in families featuring family violence or physical abuse of children by the parents, siblings are noted to use physical aggression against each other more frequently (Green, 1984; Katz, 2014). Most recently, Tucker, Finkelhor, and Turner (2020) found that an inconsistent-harsh parenting style, family adversity, witnessing family violence, and child abuse were predictive of sibling victimisation in a representative sample of children from the USA.

One outcome study of a therapeutic intervention into sexual abuse showed an improvement in almost every aspect of the life of the victim within an 18-month follow-up but at the same time an increase in the amount of conflict with siblings (Gomes-Schwartz, Horowitz, & Cardarelli, 1990). Rivalry and jealousy were reported for some, but not all neglect cases (Petri, Radix & Wolf, 2012). Rivalry was most prominent in families with some, albeit insufficient, emotional, and material resources provided by the parents (Petri et al., 2012).

In cases of intrafamilial sexual abuse, rivalry, jealousy, and envy between siblings were reported in case studies and psychotherapy samples (De Young, 1981). Jealousy and envy occurred particularly in the context of the increased attention, gifts, and privileges that the abused child received from the perpetrator (De Young, 1981).

Tucker, Finkelhor, and colleagues (2013) summarised the impacts associated with sibling victimisation as including depression, anxiety, self-harm, and delinquency. In a nationwide USA study examining children’s exposure to violence, these authors identified high levels of sibling aggression and victimisation across the general population, peaking at a rate of 46% for 6-9-year-old boys. More recent research suggests that sibling sexual abuse has the potential for significant, long-term consequences for physical health, mental health, and relationship difficulties, and can be at least as damaging as sexual abuse by a parent (Yates, 2017).

Trauma can have devastating effects on a child’s physiology, emotions, ability to think, learn, and concentrate, impulse control, self-image, and relationships with others, including their relationships with their siblings. Leavitt and colleagues (1998) described a helpful typology of relationships between children who have been traumatised. They describe four types of relationships:

The “Absent” Sibling Relationship

In the “**absent**” sibling relationship, traumatised children have failed to form enough connection to an adult even to seek out other relationships. In such instances, siblings fail to initiate any kind of meaningful attachment with each other. The children behave as though their siblings mean very little to them beyond serving as an interchangeable playmate.

The “Adult Lockout” Sibling Relationship

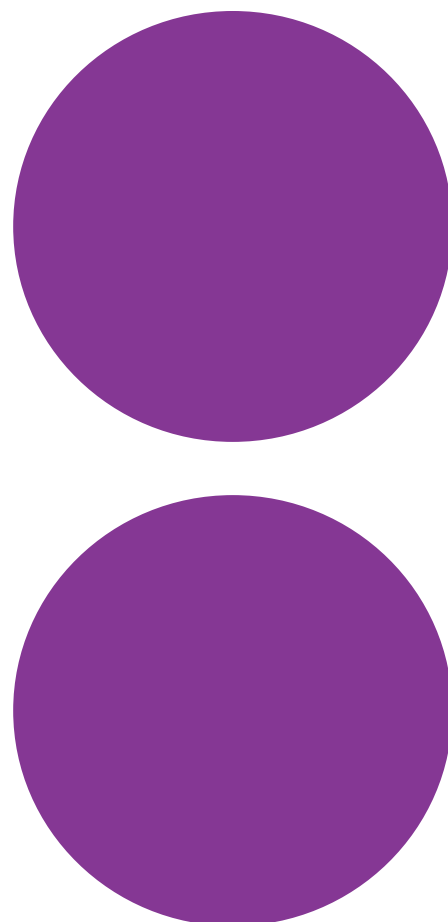
In the “**adult lockout**” sibling relationship, traumatised siblings develop a bond with one another that serves as a substitute for or even a barrier to the parent-child attachment. When parents fail to supply appropriate care or when they create an environment of aggression, children may instinctively turn to a sibling as a substitute parent or as a buffer against the aggression.

The “Half and Half” Sibling Relationship

Many siblings have a genuine but extremely problematic sibling process due to their dysfunctional attachments to their caregiver. Much of this type of sibling interaction revolves around siblings using one another to re-enact the difficulties characteristic of the primary relationship.

The “Trauma Shield” Sibling Relationship: All for One and One for All

Traumatised siblings living in a violent context may use each other as a “**trauma shield.**” When siblings develop the trauma shield defenses. These defenses bring with them the disadvantage of interfering with healthy development but the advantage of giving children a way to manage untenable circumstances (Leavitt et al, 1998).



● ● Concluding thoughts

A trauma-informed lens adds to the complexity of decision-making in respect to sibling placements. On the one hand, a trauma-informed practice perspective values family relationships and opportunities for children and young people to build their sense of identity through lasting connection to their family members, including siblings (Mitchell et al, 2020). At the same time, there may be a range of reasons to separate siblings. There may be legitimate safety concerns should siblings live together or issues of unresolved trauma that may be exacerbated by close living arrangements (Herrick et al, 2005).

Further research needs to be undertaken to look at outcome results in trauma treatment with siblings.



THERE IS ALSO A NEED TO DEVELOP A WIDER RANGE OF THERAPEUTIC INTERVENTIONS THAT HELP THESE CHILDREN AND YOUNG PEOPLE IN THE FOLLOWING WAYS:

- 1. Reducing conflict (hostility rivalry/jealousy/ competitiveness, and hostility/aggression)**
- 2. Increasing positive connection (warmth and affection)**
- 3. Building more adaptive sibling connections (relationship flexibility)**
- 4. Helping the sibling group to express shared traumatic content (putting the picture together)**

Finally, Care Teams, conceptualised as “horizontal teams in the vertical world of out-of-home care” (Macnamara 2020, p.219) should be well placed, given their objective to holistically address the needs of the children and young people that they serve, to **prioritise a pro-active approach in relation to sibling groups in out-of-home care**. This approach should be founded on the child or young person’s understanding as to who their siblings are, and constructed on the basis of a holistic and comprehensive understanding of their trauma history, as individuals and as siblings.



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