

# Siblings in out-of-home care

## Time to rethink?

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*Following a review of the literature on siblings in out-of-home care in the US and the UK, this article discusses the importance of placing siblings together, the challenges faced by agencies when caring for sibling groups, and the need to rethink sibling care in Australia and create a new service structure.*

There has been limited attention in Australia to the situations of siblings who are placed in out-of-home care. Indeed, it is extremely difficult to establish exactly how many of the 16,923 children in out-of-home care in 2000 entered care in the company of a sibling or joined a sibling or siblings already in care (Australian Institute for Health and Welfare, 2001). The annual reports of the state and territory child care and protection agencies detail the number of children placed in care and the reason for this action. These reports, however, do not provide information about how many children in care have siblings or whether any siblings are in care. Moreover, there is no indication as to how many children who are admitted to care with siblings are then placed together or separately.

The lack of data suggests that limited attention is being given to the importance of keeping siblings admitted to care together, even though such an approach is clearly reflected in policy and standard documents and in some State legislation. If relevant data were more extensively and systematically collected, more attention and prominence would be likely to be given to the crucial issue of joint placement of siblings.

Following a review of literature on sibling placement in the US and the UK, the authors discuss the importance of placing siblings together, the challenges faced by agencies when caring for sibling groups, and the consequent need to rethink sibling care in Australia and move toward a new service structure for these children and their families.

### THE LITERATURE IN THE US AND THE UK

Reports from the US and the UK indicate that a significant and increasing proportion of children in care are placed with siblings. In this section, we focus on studies that demonstrate this trend.

In the US, placing siblings together when they must enter foster care is either mandated by state law or is the strong preference of both voluntary and public child welfare agencies (Maluccio, Ainsworth & Thoburn, 2000). Gleeson (1999) notes that the use of kinship care escalated in the 1990s. For example, data from the state foster care information system in California indicate that 60% of children in care have siblings, although they are not necessarily placed together (California Department of Social Services, 1997). In a Maryland study, Dubowitz, Feigelman and Zuravin (1993) found that 68% of children with brothers and sisters had at least one sibling placed with them. Scannapieco, Hegar and McAlpine (1997) also reported in their comparative study of kinship care and non-family foster care in several states that 45% of the children in kinship care were placed with one or more siblings.

Turning to the UK, the Children Act 1989 (England and Wales) also requires that:

... so far as it is reasonably practical and consistent with (the child's) welfare that ... where the authority are also providing accommodation for a sibling of his, they are accommodated together. (Children Act 1989, Section 23 [7])

Kosonen (1996) reviews a number of studies of siblings in care in the UK, and concludes that,

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... although 80% of children in care have siblings, only between one-quarter and one-third of them are living with one or more siblings (p. 81).

The most recent picture painted by Brandon, Thoburn, Lewis and Way (1999), in their 12-month study of 105 consecutive child protection cases in four different local authorities during 1993/1994, is similar. In their study, 25 children were already living apart from at least one sibling before the case report. After the care and protection meeting that occurred as a consequence of the report,

... less than half of the 80 who had a sibling lived with all their siblings and 24 who were away from at least one sibling had some contact, two had indirect contact and seven had no contact with their siblings. Information on ten children was not available (Brandon, Thoburn, Lewis & Way, 1999, pp. 144).

A slightly different study that examined the relationships of children entering care in one British county over a period of four and a half years found that 31% of these children came into care with one sibling and 15% with two or more siblings (Wedge & Phelan, 1986). In a later study of sibling groups Wedge and Mantle (1991) indicate that their study sample (n = 160) consisted of 56 dyads (2), 13 triads (3), one tetrad (4) and one pentad (5). Of these children 60 were full siblings and 11 were step or half siblings. Kosonen (1994;1996) also reports that in a Scottish study (n = 337) 285 of the children had siblings. In this group there were 37 dyads, 18 triads, one tetrad and one pentad. These particular studies draw attention to the composition of sibling groups who enter care and, in doing so, emphasise the complexity of making provision for siblings so that they can be together while in care.

In sum, at both the practice and legislative levels, placement of siblings together is encouraged – and to some extent required – both in the US and UK. As yet, this requirement has not been embodied in Australian state or territory legislation. In the rest of this article, the authors discuss first the importance of placing siblings together, and then the circumstances under which practitioners may recommend placing

siblings separately. These are major issues, as the process of separating siblings on admission to care adds to the trauma of separation from their birth parents. Before proceeding, however, there is need to consider the issue of who is a sibling and related questions.

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#### WHO IS A SIBLING AND RELATED QUESTIONS

While it is obvious that immediate brothers and sisters are siblings, the issue of who else might be categorised in this way is less clear (Staff, Fein & Johnson, 1993). Do we, for example, include stepbrothers and stepsisters under the sibling category? Siblings in out-of-home care come from situations in which de facto relationships and remarriage make blended family groups exceedingly common. As Gambrill (1997, p. 571) observes: 'there are many kinds of families, including stepfamilies, nuclear families, extended families, gay/lesbian families and single parent families'.

Another complication is that children in these family groups may carry different surnames and may arrive in care at different points in time. What do we do if this happens? Do we try to reunite newly arrived siblings with those already in care? For those groups where the sibling relationship has been diluted through changed parental relationships, maybe all we can do is ensure that these siblings are aware of each other's existence. In these circumstances the care system could guarantee the opportunity for regular but occasional contact between stepbrothers and sisters

much like in an ordinary separated family network.

For research and other practical purposes it seems that we have to limit our definition of sibling groups. The working definition that we suggest is that *a sibling group consists of children who have at least one parent in common, either father or mother, and who are brothers or sisters and stepbrothers or stepsisters and who may be of any age.* This definition is also applicable for indigenous kin groups who may identify different categories of people as brothers and sisters.

#### THE IMPORTANCE OF PLACING SIBLINGS TOGETHER

Following a comprehensive review of the multi-disciplinary literature on sibling rivalry, sibling incest, siblings in therapy, sibling relationships with unrelated peers, adult siblings and siblings from poor and disempowered families and the implications for child placement, Hegar and Scannapieco (1999) conclude that sibling relationships are of immense importance. In adult life they are a major source of emotional support for many adults. The same is true for sibling relationships for children, including those in out-of-home care. For the latter children, being with a sibling confirms a child's continuing membership of a family, albeit one that cannot be together at this time. Moreover, studies of children going into care have demonstrated the importance of maintaining sibling ties, preferably through keeping them together, and thus avoiding further damage that can result from multiple separations (Ward, 1984). In particular, keeping very young siblings together and involving them in joint play therapy can help promote family connectedness and emotional well being (Maluccio, 1999). Other investigators have demonstrated that placement with a sibling can be a source of emotional and social support (Cutler, 1984) and promote social skills and social competence (Smith, 1998). Furthermore, there is indication that children separated from their siblings may be at greater risk of becoming emotionally disturbed and more disruptive in school (Cutler, 1984). Children in care think

frequently about their siblings, worry about them, and long to have contact with them (McCauley, 1996).

It should also be emphasised that being with a sibling provides the opportunity for attachment to another family member and reinforces family connectedness. As noted elsewhere:

attachment is a vital component for healthy child development as it provides a secure base from which the essential striving for autonomy stems (Maier, 1982). On the other hand, connectedness is an essential component of identity that becomes particularly important for older children and adolescents (Howe and Hinings, 1987). Family connectedness helps provide an answer to the question – ‘Where did I come from?’ and ‘Who am I?’ In doing so connectedness creates a link to the past and to the future and helps to promote the child’s development and preparation for adulthood. (Ainsworth & Maluccio, 1998a, p. 5).

Evidence to support the importance of siblings for children in out-of-home care can be found in research from the field of residential care of children and youths. In one such study, the authors noted that the children who grew up in residential care and who were compared with a group of late adoptees,

... valued greatly being kept with their siblings, and they had some very harsh and bitter things to say in cases where they were unnecessarily split, sometimes for sheer administrative convenience (Triseliotis & Russell, 1984, p. 182).

The researchers also indicated that the siblings were often responsible for the main nurturing in situations where little warmth was available. In that respect, being with a sibling in the face of the trauma of being removed from parental care can be seen as a protective factor that may mitigate against further loss of identity and help to sustain emotional well being.

The ‘Bringing them home’ report about the stolen generation in Australia (Human Rights and Equal Opportunity Commission, 1997) as well as the accounts of child migrants (Humphreys, 1995) provide case examples of the negative effects of separation from siblings, including psychiatric

problems, developmental delays, and other adjustment problems. These materials provide eloquent testimony to the immeasurable long-term harm that such separations can cause, especially since at the same time the young people are also separated from their parents, extended families, and communities.

An interesting comparison can also be made between the issue of placing sibling groups together in care and the issue of children in divorce situations where the custody of siblings may be split between parents (Kaplan, Hennon & Ade-Ridder, 1993). In considering the issue of split custody, these authors highlight the way in which it increases the potential for the child to lose contact with their siblings. They also highlight how this reduction in contact and the loss of a sense of connectedness can have consequences for sibling relationships across the life cycle. The same is true when siblings entering care are placed separately.

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### **WHEN SHOULD SIBLINGS BE PLACED SEPARATELY?**

As previously noted, the Children Act (England and Wales) 1989 states, and the US foster care practice demands, that where a child care and protection agency is providing accommodation for siblings, they are to be accommodated together wherever possible. This position acknowledges that there may be circumstances when it would be unwise, if not harmful, to accommodate siblings together. The question is, under what circumstances would this apply?

In response to this question, we would emphasise that the central issues, as in all child protection situations, involve

safeguarding each child’s safety and providing optimal opportunities for her or his growth and development. More precisely, a key question is, if placed together, is there a guarantee that none of the children will be subjected to any form of physical, sexual or emotional abuse by another sibling? To ask this question so starkly may sound alarmist, but it is not. For example, there is important research on sexual abuse of siblings, in particular sibling incest (Adler & Schultz, 1995; Doyle, 1996; Worling, 1995). Obviously siblings where incest is an issue should not be placed together unless the issue is fully resolved and the incest is clearly in the past. There is also a limited literature about sibling violence (Reid & Donovan, 1990) and sibling emotional abuse (Whipple & Finton, 1995). These are circumstances that would also point to the need for separate placements. In fact, in Australia in the year 1999-2000, there were 342 cases of substantiated abuse and neglect where the perpetrator was a sibling (AIHW 2001, p.23). It is possible that some of these perpetrators were adults abusing under age siblings.

Of course this should not be seen to imply that there should be no contact between siblings under these circumstances. What it does indicate is that the safety consideration must be paramount in these situations. Sibling contact, even if only supervised contact, remains crucial since connectedness to siblings is of lifelong importance (Kosonen, 1994; 1996)

There are interesting similarities between the reasons for not placing siblings together and situations of domestic violence victims. In domestic violence situations, the issue of safety of the adult victim (and children) is the paramount concern. Domestic violence victims are discouraged from remaining in situations in which they may again be subject to abuse (Partnership Against Domestic Violence, 1999). This is the stance that should be adopted when there is evidence that one sibling is abusing another sibling. The sibling who is being abused should not be placed in a situation where the abuse may continue.

Other circumstances, such as siblings arguing or fighting or being in constant conflict with each other, are sometimes cited as the rationale for placing

siblings separately in out-of-home care. The issue of the negative influence of one sibling on another via shared acts of disobedience or delinquency is also offered as justification for this separation. It is doubtful if these reasons provide sufficient justification for this practice, given the harmful impact that this can have. Instead, the existence of conflict or behaviour problems should be seen as treatment issues that have to be dealt with, and which are not necessarily resolved by placing siblings separately.

### RETHINKING SIBLING CARE

When it is necessary to admit sibling groups into care, child care and protection agencies face a difficult issue. The research points to keeping sibling groups together, unless there are very clear and serious reasons for not doing so. However, the practical problems associated with keeping siblings together are enormous, especially when the sibling group consists of more than two children who may be of different ages or at different developmental phases.

In the face of these practical problems, many children who are part of a sibling group are placed separately (Kosonen, 1996; Wedge & Mantle, 1991). Using information from the Wedge and Mantle (1991) and Kosonen (1996) studies in the UK, it can be estimated that somewhere between 19 and 30 per cent of children admitted to out-of-home care belong to triad, tetrad or pentad sibling groups. If the examples in these studies are in any way typical of the out-of-home care population, it can be projected that in 2000 between 3215 and 5077 children in care in Australia are from sibling groups of this size. It is also likely that many of these siblings are placed separately.

Together with the evidence that siblings are frequently separated when placed in foster care, there is some indication that such sibling groups are more frequently placed in residential care than children who are not admitted to care as part of a sibling group (Kosonen, 1996). Indeed, it is most unlikely that a child admitted to care for the first time would be admitted to residential care rather than family foster care, unless he or she were part of a sibling group. This suggests

that children in sibling groups are being treated very differently from other children for whom admission to care is deemed appropriate. It may be that at this time residential care is the only viable option for these children, given the inability of agencies to recruit foster carers to look after large sibling groups.

In light of the evidence that separating siblings is potentially harmful as well as likely to lead to the inappropriate use of residential care, it is time to rethink sibling care. A key question is, how might services for sibling groups who need foster care be improved? One possible response to the problem of making both short term and long term foster care provision for siblings might be to focus a particular service on the group and locate it close to where the siblings normally reside. This means that the service should be taken to the sibling group rather than the sibling group being separated and taken to the service.

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In situations in which a foster or kinship family is not available, an interesting service design would involve the following. Firstly, an agency might rent and furnish a house close to the siblings' original home address. The rental property would vary according to the size of the sibling group. This house would then become the ongoing residence of the sibling group and be exclusively reserved for them until they reach maturity. Secondly, the agency would employ adult caretakers on a 24-hour, seven-day a week, live-in or work-in/live-out basis for the sibling group, depending on the particular situation. Thirdly, the closeness of the residence to the

siblings' original address could help to preserve their family, community and school connections, with proper supports from the agency. It would also help to facilitate efforts at family reunification, as parents would only have to visit one venue to see all their children. In situations where full reunification is not possible, it would help to ensure that an optimal safe level of parental and family connectedness is maintained where appropriate (Ainsworth & Maluccio, 1998b).

Under such care arrangements the cost of providing adult caregivers should decline as the siblings move toward maturity. As each young person reaches the age of majority, they could become joint tenants with the agency of the property and make a proportional financial contribution, when possible. The agency could continue to accept responsibility for the rental property until such time as it becomes appropriate to discontinue this support. Once all the siblings were joint tenants of the property, the agency would withdraw.

Such an approach to service would give the sibling group a sense of permanency and enhance their identification with this home and with each other. It should ensure a declining cost to the agency for sibling care. Importantly, it also has the potential to reduce the number of changes in placement that siblings may experience. With this type of service arrangement, a change of adult carers would not have to lead to a change of placement.

### CONCLUSION

Much has been written from the perspective of child welfare about the importance of parent-child attachment (Howe, 1995) and most practitioners would subscribe to the importance of these bonds. Increased recognition of the importance of family connectedness has also led to a reshaping of child welfare services so that a family focus is increasingly evident in these services (Ainsworth & Hansen, 2000). A paramount goal of child care and protection authorities should be to preserve family and sibling ties as appropriate. Ideally, this should be through joint placement of siblings. The sanctioning of segregated placements that allow only limited contact between

siblings should be discouraged, except where clearly justified (Begun, 1995).

The above proposal for improving the provision of out-of-home care for sibling groups is in line with these positions. Issues of the financial cost and sustainability of such an approach by agencies providing out-of-home care for sibling groups are of course a concern. This proposal may not be the best or only way to proceed. Nevertheless, it is time to rethink out-of-home care for sibling groups. Furthermore, the proposed approach offers a way in which the principle of keeping sibling groups together might be operationalised. This approach also has value in that it builds on a sound theoretical understanding of what issues must be addressed for children in out-of-home care. It also responds to the importance of maintaining attachment to siblings (and parents) as well as to place (Ainsworth, 1998), thus providing a secure base from which the essential striving for autonomy stems, as well as a sense of continuing identity and connectedness to siblings and family. These are worthy professional goals that reflect the real needs of sibling groups in out-of-home care. ♦

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