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Link to published version (if available): 10.1177/1049731518783859

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Abstract

**Purpose:** The study investigated whether sibling relationships influenced the outcomes of a sample of adoptive placements in England and Wales that had broken down post order or were in crisis. **Method:** The study used secondary analysis drawing on in-depth interviews with 41 families who had experienced an adoption disruption and 42 families who described the adoptive placement as being in crisis in England and in Wales. The families contained 214 adopted and birth children. **Results:** Siblings placed together were statistically more likely to disrupt in comparison with sequential placements. Only 18 of the 83 families described normal sibling relationships. Placements intended to maintain sibling relationships had not done so. **Conclusion:** Assessments need to pay more attention to sibling dynamics. Children’s relationships might be better supported by separate placements with planned contact. Interventions are needed to improve sibling relationships.
Sibling Relationships in Adoptive Families that Disrupted or Were in Crisis

In 2014, findings from two linked studies on adoption disruption in England and Wales were published (Selwyn, Wijedasa, & Meakings, 2014; Wijedasa & Selwyn, 2014). Using national administrative datasets on over 40,000 children adopted from care over an 11-12 year period, the studies reported low rates of post order adoption disruption of 3.2% in England and 2.6% in Wales. Disruption was defined as when an adopted child had left their adoptive home under the age of 18 years old and was not expected to return. The findings were followed up by in-depth interviews with adoptive parents to understand more about their experiences of disruption and whether it could have been avoided. Since publication, social workers have requested information on the impact of the sibling relationships in the adoptive families. The original analysis found that the presence of adopted siblings was not associated with disruption. However, the variable “siblings” was treated as a binary (yes/no presence of adopted siblings) and tested against disruption (yes/no). The complexity and influence of sibling relationships on outcomes was not examined. Here, a re-analysis of the interview data is presented focusing on the sibling relationships.

**Literature Review**

In England and Wales, adoption is used as an intervention for about 6% of young children in care who are unable to live with their families (Department for Education, 2017; StatsWales, 2017). Legislation (Children and Families Act, 2014) supports joint sibling placements when in a child’s best interests, but whether siblings should be placed together or apart has been hotly debated (Department for Education, 2014). Young people who have aged out of care feel they have suffered by being separated from their siblings in the care system (e.g., [http://siblingstogether.co.uk](http://siblingstogether.co.uk))
whilst adoption support agencies (e.g., Family Futures, 2015) argue for more careful assessment of sibling groups rather than assuming that joint placements are best.

Research reviews (Hegar, 2005; Jones, 2016; Shlonsky, Webster, & Needell, 2003) conclude that sibling placements can provide greater stability and a sense of connection and emotional continuity. Separation can have a life-long impact removing potential support in adulthood and leave a profound sense of loss and poorer mental health, especially for separated girls (Tarren-Sweeney & Hazell, 2005). However, the psychosocial benefits of sibling placements lack a strong research base given the methodological limitations of current studies (Tarren-Sweeney & Hazell, 2005; Waid, 2014).

Our understanding of adoptive sibling relationships is limited but so too is our understanding of normative sibling relationships. Most studies have examined biological sibling pairs growing up in two parent white families (Updegraff, 2017). Little is known about sibling relationships within larger sibling groups, the development of sibling relationships among different cultures (McGuire & Shanahan, 2010) or where siblings have experienced abusive and traumatic early experiences (Conger, Stocker, & McGuire, 2009).

**Normative Sibling Relationships**

Within normative families the sibling relationship is often characterised as ambivalent where intensely positive and negative feelings occur in the same relationship (Pike, Kretschmer, & Dunn, 2009). Siblings close in age (less than a three-year age gap) share more intimacy but also engage in more frequent conflict, as do larger sibling groups (Pike et al., 2009). Rivalry and conflict are common. Some studies report boy/boy pairs as being the most aggressive whilst others find the most sibling aggression in dyads with an older brother/younger sister (Aguilar, O’Brien, August,
Aoun, & Hektner, 2001). Differential treatment by parents is associated with greater conflict (Feinberg, Solmeyer, & McHale, 2012) and for the less favoured child poorer adjustment but only when the child perceives it as unfair (Kowal, Krull, & Kramer, 2007) and the quality of relationship with parents is poor overall (Feinberg & Hetherington, 2001). The birth of a new baby can also trigger jealousy (Volling, 2012). Yet moderate levels of conflict can help children learn to negotiate, manage disagreements, develop empathy and become more socially skilled (Stormshak, Bullock, & Falkenstein, 2009). From mid-adolescence, conflict and the dominance of the eldest child reduces, leading to the sibling relationship being described as unique “in that it transforms across development from hierarchical in early childhood, to egalitarian by adulthood” (Campione-Barr, 2017, p.7).

Whilst sibling conflict can bring positive benefits, it can also be harmful especially when a pattern of abusive behaviours develop based on a power imbalance (Wolke, Tippett, & Dantchev, 2015). Research on sibling bullying has been hampered by the lack of an accepted definition of bullying with claims that aggression has been trivialised as normal sibling behaviour (e.g., Krienert & Walsh, 2011; Wolke et al., 2015). Yet, being bullied is associated with conduct problems, substance misuse, performing poorly in school, relationship difficulty with peers (Button & Gealt, 2010; Mathis & Mueller, 2015) and poor adult mental health (Tucker, Finkelhor, Turner, & Shattuck, 2013).

**Sibling Relationships in Families Where There Is Abuse**

Sibling relationships occur within a family context and the occurrence of sibling bullying/violence is highest in families where domestic violence and child abuse are present (Brody, 2004; Kiselica & Morrill-Richards, 2007). The detrimental effects of children’s exposure to domestic violence have been extensively reported (e.g., Fong,
Hawes, & Allen, 2017), but the effects of witnessing parental violence to a sibling less so. Tiecher and Vitaliano (2011) found a greater negative impact on ratings of children’s depression, anxiety, somatization, anger-hostility, dissociation and “limbic irritability” of witnessing violence to siblings even after controlling for witnessing violence to mothers.

Sibling violence may occur because children imitate parental behaviours, but the chronic stressors associated with maltreatment can also lead to deficits in emotional regulation impairing sibling relationships (Cicchetti, 2013; Lee & Hoaken, 2007). Differential parental treatment can also be more extreme in abusive families. Poorer outcomes have been found for preferentially rejected children where one sibling is rejected by parents whilst the other siblings are accepted (Rushton & Dance, 2003).

When parents are physically and emotionally unavailable, roles can reverse with often the eldest child taking a parental role by having to carry out instrumental tasks (e.g., cooking) and expressive tasks (e.g., providing emotional support). Children taking on the parenting role are often described as parentified children with both positive and negative outcomes reported (Gass, Jenkins, & Dunn, 2007; Hooper, DeCoster, White, & Voltz, 2011). Negative outcomes (especially eating, anxiety and personality disorders) are more likely when a) children perceive their role as being unfair and unjust, b) receive no reciprocity and c) where their own capacity to regulate affect is limited (Jankowski, Hooper, Sandage, & Hannah, 2013). Although parentification is common amongst maltreated children, it has not featured in much social work research (Linares, 2006; Perkins & Stoll, 2016). Yet social workers, in daily practice, are concerned with its consequences and it is a reason why siblings are separated. Social workers worry that the children may “gang up” against the new adoptive parents preventing a parent from taking the “mothering” role (Herrick & Piccus, 2005; Leathers, 2005). Overall,
there is a lack of knowledge on the effects of trauma and abuse on sibling relationships, although it is likely that sibling relationships are as influential as parent-child relationships in shaping personality differences (Feinberg et al., 2012). Evidence suggests that aggression is more common when children have experienced domestic violence and maltreatment and children feel that, in comparison with their siblings, that they were unjustly and differentially treated by their parents.

Given that the majority (75%) of children being placed for adoption in England and Wales entered care as the result of maltreatment and had experienced domestic violence in their birth families (Selwyn et al., 2014) it is surprising that there is so little research on sibling conflict in adoptive homes or the role of sibling relationships in disruptions. To begin to address this gap in knowledge, a re-analysis of the interviews completed in 2014 with adoptive parents who had taken part in studies on adoption disruption was undertaken. Ethical approval was gained from the Ethics Committee, School for Policy Studies, University of Bristol.

Method

Purpose of the Secondary Analysis

The secondary analysis of interview data aimed to explore: the balance of sibling positive and negative interactions in troubled adoptive families, if sibling conflict had influenced parental decisions directly or indirectly to ask Children’s Services to remove an adopted child, and to gain greater understanding of the impact on the other children of living with a sibling whose behaviour was causing such concern.

Sampling

The two original studies (Selwyn et al., 2014; Wijedasa & Selwyn, 2014), the data from which are re-analysed here, used a mixed methods design to investigate post order disruption. Analyses of national administrative data was followed up with surveys
and face to face interviews with adopters. To identify the interview sample, a survey was sent by 13 local authorities to 630 adoptive parents who had adopted a child from foster care between 1st April 2002 and 31st March 2004. The years were selected to ensure that the adopted children would be adolescents, as the analysis of administrative data found that the greatest risk of disruption was during the teenage years. The short survey asked parents for demographic information, if the child was living at home, to rate how the adoption was going on a five-point scale, and if they would give consent to be interviewed.

The local authority surveys had a 34% response rate \((n = 379)\) with a very small number of disruptions reported \((n = 34, 9\%)\) but a much larger proportion \((n = 81, 21\%)\) of families describing themselves as struggling and in crisis. There was no way of knowing if those who returned were representative of the sampling frame. The same survey (but with no timeframe and open to anyone who had adopted a child from care) was also placed on the Adoption UK website (a national organisation run for adopters by adopters). Surveys were returned by 310 adopters with again a small number of disruptions \((n = 26, 8\%)\) and 25% of families reporting major difficulties and placements in crisis. Text comments from the parents who self-rated their placements as in crisis contained phrases such as, “a living nightmare” and “don’t know how much longer we can continue.”

From the survey responses, an interview sample was selected. Sixty disruptions were identified in the surveys with 45 parents consenting to be interviewed about their experiences. These were all selected. In addition, 45 families were selected for interview where the adoptive parents described the adoptions as in intact but in crisis. The families were the first 45 in the database who had children who were teenagers, giving a total sample of 90 adoptive families.
Procedure

Interviews were undertaken by two researchers usually in the adopter’s home and lasted between two and five hours. An investigator-based method (Brown, 1983; Quinton & Rutter, 1988) was used as it combines a qualitative approach to questioning with a quantitative treatment of data. The interview questions, mainly open ended in nature, were pre-coded into categories that produced numerically analysable data. Categories were decided based upon a literature review and our own knowledge of the field. Using this method, the interviewee is unaware of coding options and unlike a standardised interview demands rapport between interviewee and interviewer. For example, adoptive parents were asked if they thought the sibling relationship had any influence on the difficulties they had experienced. The interviewer used a five-point coding scale ranging from ‘no influence at all’ to ‘responsible for disruption/crisis’ to categorise the response. Post interview a case summary was written up and the interviews transcribed verbatim.

Adopters who had experienced a disruption were asked to focus on the adopted child who had left the family home and the intact/crisis families were asked to focus on the adopted child who was causing them the most concern. That child will be referred to as the index child in this article. Adopters were asked about: their motivation to adopt, preparation, matching, the emergence and progression of difficulties, support they had received, the agency response, sibling and family relationships and communication within the family. Adoptive parents gave vivid accounts of the difficulties they faced and were often distressed and tearful. They also appreciated the opportunity of being able to tell their “adoption story” from the beginning to the present day.

Analysis
During the interviews, adopters were asked four specific questions about sibling relationships. These were: Can you tell me how (name) gets/got on with your other children in the family? How do/did they behave towards the other children? Were you / are you concerned about the impact of (child/s) difficulties on the other children in your family and if yes, in what ways? To what extent do you think that the dynamics between the children in your family contributed to the difficulties you are experiencing with the adoption / the breakdown? Adopters also referred to sibling relationships in response to other interview questions. Therefore, all the transcribed interview text which referred to siblings was selected, and a new Word document created.

The a priori coding enabled the interview material to be classified into broad groupings of adoptive families where parents thought that sibling relationships were not responsible for their difficulties, those where there was some influence, and those where sibling relationships were held responsible for the disruption/crisis. To understand more about how sibling relationships had affected the adoptions the interview data were analysed using a thematic framework approach (Ritchie & Spencer, 1993). Four charts were created that responded to the four sibling questions. Raw interview data were extracted manually onto each of the charts and firstly summarised for each respondent examining the balance of positive and negative interactions in the sibling relationships and the types of interactions. The data reduction and display allowed the researchers to explore within-case and between-case analysis. Emerging and recurring patterns (themes) in the data were identified such as ‘violent sibling relationships’. Quotations were selected to ensure a range of the adopter’s views were presented and to deepen the reader’s understanding. The quantitative data were analysed in IBM SPSS Statistics.

It is important to note that adoptive parents who had experienced a disruption did not like the term “disruption” or “adoption breakdown”, as they said it implies a
SIBLING RELATIONSHIPS IN TROUBLED ADOPTIVE FAMILIES

finality. For most of the adoptive parents they continued to act as parents, visiting their child if they were in care, and still fighting to get them the support services they thought were needed. Parents preferred to talk about “parenting at a distance”, recognising that at the current time it was impossible for the child to remain in the family. Parents also felt that social workers assumed children would not return and were not working towards reunification.

The Sibling Sample for Secondary Data Analysis

The first task of the secondary analysis was to identify which of the 90 interviewed adoptive parents had been bringing up siblings. Defining who is a sibling is complex as there is no agreed definition (McBeath et al., 2014). Here, siblings are defined as the children with whom the index child grew up with in their adoptive family. Therefore, siblings were the birth children of the adoptive parents, related and unrelated adopted siblings who were either present at the time the index child was placed or who were born/placed for adoption subsequently. Siblings were identified by reading the interview transcripts.

A quarter of the index children had initially been placed as a single child but over time the adoptive parents had adopted more children or had a birth child. Only seven (8%) children had not lived with siblings. The seven “only” children were excluded from the sibling analysis leaving 41 families who had experienced at least one disruption and 42 intact/crisis families caring for 214 children (Table 1). There were no statistically significant differences in the number of children living in the households of the disrupted and intact/crisis families.

Table 1

The majority of the index children were white: just three children were of minority ethnicity. Fifty-three percent of the index children were male and 47% female
with no difference in the number of boys living in families in crisis ($n = 22$) or those that had disrupted ($n = 22$). The majority (95%) of the index children had been adopted by matched adoptive parents; 12 (29%) of whom were single parents. The adoptive parents had been recruited, assessed and prepared by Children’s Services: just two (5%) index children had been adopted by their former foster carers. All but two of the 41 disruptions were the eldest child in adopted sibling groups. Disruption was not statistically associated with the gender of the index children (22 boys and 19 girls) or the size of the sibling group but was associated with the sibling group (Table 2) being placed at the same time ($n = 41$), $\chi^2(2) = 2.54$, $p = .028$, Cramer’s $V = .12$ (small effect size).

<table>
<thead>
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<th>Table 2</th>
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<td>During the interviews, six adoptive parents revealed that in addition to the index child they had recently experienced another disruption. In all six families, the related siblings had been placed together and at the time of the interview the adoptive parents were living in a childless household.</td>
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Results

Characteristics of the Children

Information on children’s early experiences was provided by the adoptive parents and is therefore likely to be incomplete. Most (75%) of the children had been born into families where there was domestic violence and birth parents misused drugs and alcohol. Thirty-five percent of birth mothers had mental health problems, 25% had learning difficulties and 47% had spent time in care as a child. Less was known about the child’s birth father, although 70% were known to misuse drugs/alcohol and have a history of violence. Seven per cent of children (all in the intact/crisis families) had been removed at birth by Children’s Services, as they were born withdrawing from illegal
substances and a further five had been abandoned at birth. Adoptive parents were asked about the children’s exposure to maltreatment in the birth family home (Table 3). Disruption was statistically associated with the index child’s exposure to domestic violence and being sexual abused.

Table 3

Children not only witnessed their birth mothers being subject to domestic violence, but siblings being hurt too. For example, an adoptive parent gave an account of the index child being forced by a birth father to participate in holding down siblings while they were physically and sexually abused.

The index children were on average older at the time of the adoption order (Table 4) than most children who are adopted today, where the average is about 3 years 4 months (Department for Education, 2017; StatsWales, 2017). Within the sample there were also age differences. Children whose adoptions had disrupted were significantly older at every point in their care career compared to the children who were in the intact/crisis group (Table 4). After entry to care, all the children had been placed in foster care: none had been placed in residential care.

Table 4

Based on the accounts provided by adoptive parents, the sibling relationships were categorised into two main groups: normal sibling relationships where there was a balance of positive and negative interactions \((n = 18)\) and sibling relationships where there was an imbalance of positive and negative interactions \((n = 63)\). The quality of those relationships will now be outlined, as will parent’s accounts of whether sibling relationships affected the adoption disruption decision.

**Balanced Normative Sibling Relationships \((n = 18 \text{ families})\)**
Sibling relationships for five (13%) disrupted families and 13 (31%) intact/crisis families were described as normal with a balance of positive and negative sibling interactions. One parent said: “Very, very, normal… they argue, they play together, they care for each other” (Two unrelated female and male children adopted sequentially, intact/crisis). Another parent said of the sibling relationship: “Brilliant… very close. She's very supportive of her brother, loves him to bits… I'd say he's the most important person in her life” (Brother and sister placed together, eldest boy disrupted).

In six families, parents spoke with pride at the way their birth children had responded to the index child. In these families, birth children’s secure attachment to their parents seemed to enable them to support the adopted child. Parents described their birth children using humour to diffuse confrontations or acting as an advocate for the index child, as one parent explained:

She [birth child] is very loyal, very loving and faithful, and completely always championed [index child] and saw the best in her… You do need a champion in the house. Someone needs to speak out for the one that’s the most difficult to love. (Three female birth children and one female adopted child disrupted).

The disruptions that had occurred for the five families with normal sibling relationships were because of the child’s constant running away and wish to return to the birth family. Parents were generally positive about the benefits of a sibling placement and did not ascribe their parenting difficulties to having a sibling placement, as in this example:

I used to think we were mad taking these three on because they each needed such a huge amount of individual attention. But if they had been split that would have been a huge loss to them wouldn’t it?… [Youngest girl] is like the pivot
that the other two revolve around. She’s the one who holds them together. (Two brothers and a sister placed together intact/crisis).

**Imbalance of Positive and Negative Sibling Relationships (n = 65 families)**

Much more commonly and for the vast majority of parents the sibling interactions were not described as balanced. At one end of the spectrum was a family where the parents reported a complete absence of sibling conflict. The adoptive mother described her concerns:

They’re very close, to the point of being over reliant… We’ve never had arguing like I had with my sister… but it worries me because it’s very unhealthy. Tim was out at a friend’s house the other day, and William is pacing around here like a caged tiger, “When is Tim coming back? What do you think Tim will be doing now?”… He can’t say, “I’m missing Tim.” It’s all these indirect references… They miss each other terribly. (Two brothers placed together intact/crisis)

All the other parents reported predominantly negative sibling interactions or the swings between positive and negative interactions being extreme, as an adoptive mother explained:

Most of the time he hates us all… either he's trying to beat Brian up or he's absolutely protecting him to the hilt. (Two unrelated boys placed sequentially intact/crisis)

Negative interactions were more frequent and more severe when one child (usually the eldest) used their age and status to control their siblings. Power came from: being stronger, taller and developmentally more advanced than siblings, by having greater knowledge of the family background and what birth parents might say or do in any situation, and from having cared for their siblings in the birth family. Descriptions were of children who were unable to relinquish that caring role, perhaps because, as
previous research (Herrick & Piccus, 2005) has identified, the role bolstered their self-esteem, but there were also descriptions of parentified children who wanted to control every element of their sibling’s lives and whose anxiety was completely overwhelming and had become generalised to all kinds of caring situations outside the family, for example panicking if they saw a mother smoking near a pram.

In 12 families, parents could not describe any positive sibling interactions at all. For example, saying:

It’s the constant saying that she wishes I hadn’t adopted him, … she will hit him, kick him… She’ll go into his room and go through his stuff. Every time she walks past his bedroom door she will push it open and make some stupid comment, or be talking about her boobs in front of him… She’s gone into his room when he had a friend there … pulled down her trousers and knickers in front of him (Adopted female followed by unrelated male intact/crisis).

**Violence and aggression.** Sometimes sibling aggression had begun when a younger child arrived, especially if that infant needed more parental attention because of specific health needs, as in this example:

She would say, “Can I cuddle Elizabeth?”… and then she would push her under the water. Obviously, I was there as well, and she’d be like, “It’s an accident.”

It wasn’t an accident. (Unrelated female children placed sequentially, eldest female disrupted)

In other families, the index child refused to accept another adopted child as their sibling or expressed anger at their siblings for perceived injustices in their lives; blaming siblings for being taken into care, or feeling that they had accepted the abuse in their birth families to keep their siblings safe:
When the sexual abuse was happening [index child] took it [sexual abuse] so that [sibling] could hide… the youngest ‘owes’ the oldest … and he will give into his brother or he’ll give his brother things as if he’s trying to pay back. (Two birth children and two adopted brothers, intact/crisis)

Envy and rivalry motivated many of the violent attacks. Index children were envious of: a sibling’s ability to get a cuddle when they were unable to seek or accept close physical comfort, and were jealous of a sibling’s friendships, possessions, and aptitudes. One mother described the presence of a birth child as “eating away” at their adopted child.

**Differential parental treatment.** Siblings wanted to know which of them was the most loved by their adoptive parents. Most of the parents reported that the index children refused to accept that all the children were loved equally. Children carefully monitored the amount of parental attention they received paying particular attention to what happened at meal times. Parents described having to count out the biscuits or fries, as each child needed to know they were getting exactly the same as a sibling. For example, one parent said: “If we put out four biscuits, they were literally both counting constantly: ‘Who is that for? Who is going to have that?’… They would count the biscuits on the plate and count the people in the room” (Two brothers placed together, eldest disrupted).

Contact arrangements with birth mothers also exacerbated children’s feelings of rejection and unfairness. In some instances, the birth mother sent cards and letters to only one of the children and nothing to the other. Some adoptive parents (particularly those who had taken a sickly baby) acknowledged that they had felt more protective towards the youngest and had treated siblings differently. Other parents said that they had been forced to treat the children differently due to the difficulties in managing the
index child’s aggressive behaviour. Two parents had sent their birth children to boarding school to protect them from the violence.

**Family Life**

Daily life in the adoptive families \((n = 63)\) where sibling relationships were non-normative did not resemble ordinary family life. Adoptive parents practiced safe caring with locks on all the bedroom doors; siblings felt unable to bring friends home, afraid of what they might witness; and social activities were reduced. Parents spoke of splitting the parenting role with one parent focusing on the index child and the other parent caring for the siblings. In many families, siblings lived separate lives retreating to their bedrooms, eating apart from the index child and in four families all communication between the siblings had ceased.

When she was about 13 he stopped speaking to her and he withdrew completely. He didn't speak to her again till she left [2 years later]. We had to live and manage that. I found one day he'd devised a photo album and he'd cut her picture out of every picture and he made a photo album up of all of us but without her

(Adopted male followed by unrelated female adoptee, disrupted female)

Parents were concerned about the sibling aggression but also the harmful impact on the children of witnessing their parents being verbally and physically abused by the index child. Five parents had been hospitalised as a result of their injuries (strangulations, knife attacks). Parents worried that younger children would copy aggressive behaviour and were concerned that the children had been removed from violent birth families but social workers seemed to be unconcerned at the effects of witnessing violence in the adoptive home. The most frequently used social work intervention was to require adoptive parents to attend a six-week parenting programme.
Parents said they felt shamed and blamed for the violence that was taking place in their homes.

Siblings were described as having “lost out” because the index child took up all their parents’ emotional and physical time with siblings complaining to their parents, “You’ve got no time for us anymore.” The impact on siblings also spilled over into school. Parents said that children were embarrassed or felt stigmatised by teachers asking for the sibling’s help in managing the index child’s aggressive behaviour. In a family where the adoption had disrupted after the eldest son had committed serious sexual violent offences, the impact on the younger brother was described:

[Index child] was a nightmare because he stayed in touch with all his mates on Facebook… Older kids saying [to sibling], “Can't believe what a bitch your mum is. Why haven't you left with him?”… In the end he said, “I'm going to tell them the truth… My brother is a rapist and he's an evil bastard… I'm no longer in contact with him and haven't been for some time”. Very brave to say that (Two brothers placed together, eldest disrupted).

As siblings had grown up, the ease of the eldest to manipulate had reduced in some families. Younger children had developed their own personalities and some had begun to de-identify from their sibling. Little is known about how and why children choose to emulate or follow a different path from their sibling (Whiteman, Becerra, & Killoren, 2009). In this study, parents described children de-identifying because: they were able to physically match an older sibling’s strength and therefore resist a sibling’s demands, of not wishing to be associated with behaviour they disapproved of, or they had overtaken a sibling developmentally, as in this example:

Simon now struggles because he realises that Alex [index child] isn’t the capable brother that brought him up, … he’s actually very sad about it, and I
think it’s made him feel quite exposed, because Alex is the one person in his life that’s always been there. Now, he sees that Alex is so difficult and so incapable (Two brothers placed together intact/crisis).

In most of the families, parents thought that the children had been harmed by being placed together and thought the index children would have benefitted from being an only child with all the parental attention focused on them. Some of the parents who had birth children were full of guilt at what their children had endured. One said: “My children have suffered and there’s nothing I can do to compensate… It was our choice” (Two birth children and adopted male, intact/crisis).

Disruptions and the Impact on Siblings \( (n = 41) \)

Disruptions had occurred primarily because of the index child’s violence and aggression towards their adoptive parents (usually towards adoptive mothers) but violence in some families was also directed at fathers, siblings, grandparents and pets (Selwyn & Meakings, 2016). Parents directly attributed eight disruptions to the index child’s behaviour towards their siblings. Three of these eight disruptions involved siblings (two of whom later attempted suicide) who had been sexually abused by an older male parentified index child. Parents described these children’s early sibling relationships:

They were each other’s support and each other’s rock, and all the pictures that we have of them teeny tiny in foster care, with the birth family, they are locked together, huddled together, locked together with their arms round each other (Two brothers, eldest male disrupted)

Jo was one of these kids that had to change Bryony’s nappy and feed her. He just knew that his mum wasn’t going to look after this baby. So that was a worry for him (Brother and sister placed together, eldest male disrupted)
Adoptive parents thought the children had been placed together because social workers believed that the established relationship should be maintained. However, over time the sibling relationships had become harmful with the eldest boy dominating, controlling and using coercive behaviours including sexual abuse against their sibling.

In other disruptions, parents had been physically hurt and intimated by the index child but the realisation that they could not keep any of the children safe had triggered the disruption. Parents described the index child’s violence towards siblings as the “final straw” for example saying:

The reason he’s not living at home… is because he’s planned to kill Rachel.

He’s told us and the social worker how he’s going to stab her one night while we’re asleep… We’ve put up with all this violence… but we cannot take a risk with Rachel’s safety… and the school have noted he’s attacking little girls that look like Rachel (Two brothers and a sister placed together, eldest male disrupted)

Abusive sibling relationships had indirectly played a part in all but two of the disruptions. Parents said that they lived in fear of the index child and that fear is likely to have been transmitted to the siblings. Younger children had been moved to sleep in their parents’ bedroom to stay safe and were extremely anxious needing to know where the index child was at all times. Some older young people threatened to leave home saying to their parent:

Mum if [index child] is still here when I come home from college today I’m moving out. I don’t know where I’m going… I cannot watch you and dad beat up any more (Birth male child and adopted male disrupted)

Prior to the disruption parents had contacted social workers, mental health professionals and the police who, according to the parents, had ignored the impact of
the violent behaviours on the siblings. Indeed, after the index child had been removed, professionals rarely returned to speak to the remaining children. Parents who were managing their own feelings of relief, guilt, shame and sorrow felt ill-equipped to help other family members. Sibling’s exam results were said to have suffered, some experienced the disruption as a bereavement and needed treatment for mental health problems and two had been forced to move away from home because of the negative community response. Siblings were said to be confused, worried about the index child’s future and to have contradictory feelings of relief and anger towards the index child and towards their parents:

[Disruption] was a relief… it was sadness… it was awful because I think he [sibling] blamed me a lot as well. …and he said to me: “You have to remember, mum, you gave me a sister, and you took her away, and that’s the sadness.”

(Two male birth children and one adopted female disrupted)

Three of the index children who returned to care enticed their siblings to follow. Parents described their other children being manipulated by the index child with the promise of mobile phones on contract, freedom to come and go at will, skiing holidays and an en-suite bathroom:

[Index child] would say to [siblings] “I got £10 pocket money this week… I’m having a new phone next week.” She would purposely tell them, just to wind them up. And then they felt the grass was greener on the other side (Three related siblings placed together all disrupted).

In 10 of the 41 families, parents described siblings as being overjoyed when the index child had left saying: “They haven’t spoken to each other properly for three years. Robert says to [index child], ‘You ruined my life’” (Two brothers placed together eldest disrupted).
Discussion and Application to Social Work Practice

The sample for this study was drawn from adoptive parents who had adopted a child from care in England or Wales and had experienced a disruption or were in crisis. As such they are not typical of all adoptive families or of all sibling group placements but are likely to be typical of struggling families, as the same concerns were identified in England and in Wales. The views expressed were those of the adoptive parents and the views of the siblings themselves are unknown.

As these studies were the first national studies of adoption disruption, it was expected that poor sibling relationships might be a primary reason for disruption. That was not the case. Only eight of the 41 disruptions were directly attributed by parents to conflictual sibling relationships. These parents had coped with attacks on themselves but felt they were left with no option but to ask for the child to be removed when they could not keep a sibling safe.

However, the majority of disruptions and the placements that were in crisis, were indirectly influenced by abusive sibling relationships. Sibling relationships were a major cause of parental stress. It led parents to describe their families as “toxic” or “dysfunctional.” Only 18 parents described normal sibling relationships. The majority of siblings had been harmed either directly through sibling physical, sexual or emotional abuse and/or indirectly by witnessing violent behaviour, changes in parenting and family routines, stigmatisation, and isolation caused by a reduction in their friendships and social activities.

Unlike normative sibling relationships, the aggression had not diminished as the children grew up but had escalated and for some siblings was life threatening. Social work support was focused on the dyad of parent /child relationships and the impact on siblings seems to have been completely ignored and minimised. Adoption disruption is
often viewed by social workers as disastrous and to be avoided at all costs. However, the disruptions that had occurred had stopped siblings being further harmed and may have been a better course of action for some of the families that were still being supported to stay intact. Sibling placements had been planned with the intention of ensuring that their relationships endured but relationships may have better prospered by separate placements with planned contact. The assessment of sibling relationships prior to placement needs to be improved, becoming more systematic and using observation to consider the balance of positive and negative interactions.

We need to understand much more about the developmental impact of being a parentified child. Research (e.g., Jankowski et al., 2013) is suggesting that perceived unfairness functions as a mechanism of the parentification–mental health association. Many of the index children believed they were treated unfairly by their adoptive parents, perceived their life experiences as deeply unfair and compared themselves unfavourably to their siblings. It is a belief that needs to be considered during assessments of sibling groups and their experiences of parentification and interventions planned to resolve the feelings of injustice.

Some of the children seem to have been deeply affected by another adopted child (related or unrelated) joining the family. Volling’s review (2012) identifies how the birth of a baby can upset the eldest child’s feelings of uniqueness and perhaps there are additional challenges for adopted children. If an adopted child has been told that they were “chosen” for adoption because they were “special”, how do they make sense of a younger child joining the family? Does it reawaken feelings of rejection and/or lead to a loss of trust in their parents as their “specialness” is being replaced by another? Although siblings placed together were weakly statistically associated with disruption in comparison with those placed sequentially, the qualitative data suggested that it was not
the way the placement had occurred but the relationship between the siblings that mattered. Sequentially placed children were rarely a parentified child to an existing child in the family; a role held by the majority of the index children who had been placed jointly with siblings.

None of the children had received any interventions (pre or post adoption) to improve their sibling relationship. A systematic review of interventions for sibling conflict and aggression (Tucker & Finkelhor, 2015) identified only five programmes that showed some promise, but none had been used with clinical samples. A few intervention programmes have been developed for siblings in foster care (e.g., Kothari et al., 2017; McBeath et al., 2014) but are not used in the UK. The findings from this study suggest that social workers should heed Kramer’s (2010, p. 82) call and become “intentional” in their efforts to ensure children learn the skills that are necessary for normal sibling relationships. Maltreated children have often not been given the opportunity to learn those skills and interventions for those in foster and adoptive care in the UK need to be trialled. Adoption is a powerful intervention but on its own cannot be expected to repair dysfunctional sibling relationships. Sibling adoptive placements had been planned by social workers hoping to maintain and secure the sibling relationship, but for the majority in this sample sibling relationships were fractured and damaged by the joint placement.
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