

## **ASSESSING SIBLING ATTACHMENT IN THE FACE OF PLACEMENT ISSUES**

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**ABSTRACT:** With the advent of the Adoption and Safe Families Act of 1997 child welfare workers are faced with the task of placing sibling groups in potential adoptive homes shortly after their separation from biological families. At times, the number of children and/or their special needs present arguments against the conventional wisdom of maintaining the sibling group intact. This paper presents guidelines in the assessment of sibling attachment and in the decision-making process regarding placement.

**KEY WORDS:** assessing sibling attachment.

### **INTRODUCTION**

The *Adoption and Safe Families Act of 1997* emphasized the timely and permanent placement of children out of the foster care system. The document emphasized that families are to be strengthened with services and support so that children's safety and well-being are assured and reunification can take place as soon as possible. If, however, families are unable to respond to the services and the children's safety remains in question, then the law's provisions for termination of parental rights are set in motion. As a result of the contracted time lines for the maintenance of children in foster care, child welfare workers are frequently faced with the task of placing sibling groups in adoptive or legal risk homes just weeks after separation from their biological families. Ideally these homes will be the permanent placement should termination of parental rights be necessary.

Since the majority of adoptive parents prefer a sibling group no larger than two and often specify the ages of the children they are willing to adopt, the worker placing three or more children is faced with a formidable dilemma. Should the sibling bond take precedence over all other considerations? Do the particular behavioral and emotional needs of a child warrant

the splitting of the sibling group into separate adoptive homes? When sibling groups must be split how does one decide which siblings to place together? Complicating the question is the legal system's traditional preference for maintaining the sibling group intact. (Hegar, 1988). On the other hand, increasing data are emerging pointing to significant numbers of children in care with diagnosis of Attachment Disorder, Fetal Alcohol Effects, and various emotional disturbances which provide enormous challenges to adoptive parents throughout the family life cycle (Freundlich, 2000; Leavett et al., 1998; McNamara & McNamara, 1990; Randolph, 1997). Depending on the severity of the behaviors, siblings with such problems may not thrive together in placement (Fahlberg, 1991; Leavett et al., 1998; McNamara, 1990 et al.).

Although child welfare workers have always struggled with these questions, the guidelines set forth in the *Adoption and Safe Families Act of 1997* place a premium on timeliness in the decision making process. Recognizing the need for professional advice and sanction concerning the placement of siblings, courts may order a "sibling bonding assessment" to be performed by a social worker acting as therapist or professional consultant. The thoughtful professional will recognize this task as both important and complex. The ultimate recommendation may have far-reaching effects in the lives of the siblings and their adoptive families. An additional complication is that the players involved, including attorneys, caseworkers, and adoptive families often lack knowledge and experience concerning the social and psychological development problems of severely abused children—problems which often surface well after the adoption is finalized. These key persons frequently have concerns and agendas apart from the issue under study, namely, "Is it in the best interest of the siblings that they be raised in the same home?"

To date there is no instrument or definitive guide for conducting such an assessment. Therefore, this paper will present guidelines for use by the professional in evaluating sibling attachment and in making recommendations concerning placement. First, definitions of related concepts pertinent to sibling relationship and placement will be presented in conjunction with a literature review. This serves as introduction and background and is not meant to replace the professional's personal review and study of these important issues. Secondly, suggestions for procedures useful in evaluating relationships between siblings will be discussed. Finally, case examples illustrating scenarios in which sibling attachment was assessed for adoptive placement will be provided.

#### CHILD WELFARE AND THE SIBLING BOND

In recent decades, social workers have strived to maintain the sibling group intact whenever possible. Writers in the field of child welfare have

noted the benefits to the siblings in growing up together (Aldridge & Cautley, 1976; Depp, 1983; Richards, 1979; Ward, 1984; Wedge & Mantle, 1991) and avoiding the anxiety and sorrow engendered by separation (Grigsby, 1994). LePere et al. (1986) concluded “separation from siblings must be viewed as a serious loss for the child” (p. 9). However, experienced professionals have advised caution in placing siblings together when one or more of them present extreme emotional and behavioral problems. (Fahlberg, 1991; Richards, 1979; Ward, 1984). Hegar (1988) cites earlier writers who favored separation of the siblings for reasons of “dislike, serious environmental deprivation, individual behavioral disturbance on the part of one or more of the siblings, or individual needs of a sibling that cannot be met in a joint placement” (p. 115). The official counsel of the Child Welfare League of America regarding placement is to “obtain information about the relationships” between the siblings when there are several children in a family (1978, p. 35).

#### THE SIBLING RELATIONSHIP: CULTURAL AND PROFESSIONAL PERSPECTIVES

What is a sibling? The idea of “brother and sister” can vary across cultures. (Devore & Schlesinger, 1996; Goodluck, 1990; Green, 1999). For the purposes of this discussion, however, children will be considered siblings if they have at least one of their parents in common. The parents may be adoptive or birth parents and the children may be siblings by birth or adoption. The sibling bond has been recognized historically for the stability and support it can provide throughout the individual’s lifespan. Yet, little systematic research has been conducted which would bring to light the beneficial effects of sustaining sibling relationships over time or the effects of separation from a sibling (Banks & Kahn, 1997; Hegar, 1988).

The extensive research conducted by Banks and Kahn, however, has uncovered material pertinent to this discussion (1997). For example, they found that children spaced three years or less in age tend to form closer relationships than those born further apart in time. Secondly, they assert that bonding takes place among pairs of siblings. In sibling groups of three or more, children will “pair up” leaving a third child out. Even more crucial to the sibling bond, however, is the finding that the children must have high “access” to one another. Interestingly, this high access is often related to a second condition—that the children are deprived of reliable parental care, thus forcing them to turn to one another for support, companionship, and modeling. The earlier the sustained contact begins, the stronger the bond, especially when stress is introduced.

Child welfare workers have recognized this phenomenon when traumatized and neglected children, deprived of healthy parental nurturing

come into care. They “stick together,” defending and protecting one another, often interfering with the parenting attempts of their adult caregivers. The authors point out, however, that siblings raised with inadequate nurturing and negative role modeling are unable to demonstrate the loyalty and support for one another that would truly sustain them emotionally and further their growth through subsequent developmental stages. Moreover, in general “siblings cannot be adequate caregivers” (p. 139). In fact it is preferable that a child be raised by a parent with significant character flaws than by an older sibling (p.138). On the other hand, “the more available parents are both emotionally and physically, the less intense is the attachment between siblings” (p. 123).

A number of clinicians have illustrated these points with examples of children from traumatizing backgrounds, identifying patterns of sibling behaviors that served to protect against the abuse and neglect they suffered in former environments, but prevented their psychological growth in newer and healthier settings (Fahlberg, 1991; Leavett et al., 1998; McNamara, B. 1990; E. Randolph, personal communication, May 19, 2001). Given the opportunity to bond with a nurturing caregiver, the siblings choose to reenact their dysfunctional behaviors together. The authors recommend suspension of the problematic relationship, at least temporarily, so that bonding with caring adults is possible.

This sibling drama is in keeping with the comments of Banks and Kahn who noted that there seems to be room for only one established “role” per family member (1997). This has been demonstrated when one child is enacting a negative role in a foster family and improves upon placement separate from the “good” sibling. At times, however, the “good sibling” responds by changing roles, now that the part of the scapegoat has been vacated. In other instances, the imposed or adopted family role is deeply ingrained in the child’s identity and is not relinquished easily (McNamara, 1990).

The preceding description of problematic sibling relationships should not be confused with sibling rivalry, characterized by competitiveness, jealousy, and even aggressive conflict. Many authors consider the phenomenon of sibling rivalry a learning tool through which the child prepares for the negotiation of adult interactions (Banks & Kahn, 1997; Dunn, 1993; Lamb, 1982;). These writers emphasize that support, sharing, and affection can operate effectively between siblings despite their rivalry.

Over all in fact, researchers emphasize the positive aspects of the sibling relationship (Banks & Kahn, 1997; Donley, K.S., 1989; Viorst, 1986). It is usually the longest family relationship that the person will experience. Therefore, it is a vehicle through which the siblings can maintain a sense of their formative history and understand their own development and personhood. Through the process of sharing, competition, cooperation, comparison, and conflict with a sibling, the child gains of sense

of identity and an opportunity for early intimacy difficult to parallel. In addition, the presence of a sibling can mitigate the loss and anxiety engendered by separation from parents and subsequent foster care placement. (McNamara, 1990; Tizard, 1986). To summarize, the sibling relationship is described in the literature as a positive, sustaining influence. However, when attachment to parental figures has been insufficient, the bond between siblings may be characterized by unhealthy interaction and serve to inhibit the psychological growth and well being of the siblings involved.

### ATTACHMENT

As the previous discussion suggests, the quality of the relationship between siblings is incumbent upon the quality of the relationship between the sibling and primary caregiver. John Bowlby, pioneer in the study of attachment initially put forth his observations concerning the relationship between early maternal care and personality development in a paper delivered to the World Health Organization in 1951. His work in this area was extensive and formed the basis for what was subsequently labeled "Attachment Theory." His definition of attachment as an "affectional tie with some other differentiated and preferred individual who is usually conceived as stronger and wiser" has endured (1977, p. 203). Mary Ainsworth further contributed to the knowledge base through her research with mothers and infants by which she identified certain behaviors on the part of parent and child (1964). Nurturing acts on the part of the caregiver such as cuddling, face-to-face contact, cooing, and responding to the child's needs in a consistent, timely manner are examples of such "attachment behaviors." Normally, the child is soothed and responds to the caregiver by cuddling, cooing, and smiling in return. The mother, in turn, is rewarded by the child's responses. The infant develops basic trust as the cycle is repeated and the reciprocity he/she experiences becomes imprinted and part of the infant's human repertoire of social interaction to be built upon and expanded as the child grows and forms new attachments.

Ainsworth further clarified the concept of attachment through observations of mothers and their 12-month-old toddlers in a laboratory setting called the "strange situation." She eventually concluded that attachment could be "secure" or "insecure" with the latter categorization including several subtypes (1978). The securely attached toddler was consolable, friendly, and appropriately adventuresome while clearly identifying one caregiver (the mother in Ainsworth's studies) as the preferred attachment figure. Children whose behavior was identified as "insecurely attached" manifested a continuum of behaviors including irritability, agitation, fearfulness, lack of affectionate responsiveness, and failure to show

preference for any one attachment figure. Numerous studies followed by Ainsworth and other researchers in the field demonstrating a correlation between quality of attachment between caregivers and infants and the children's later development.

Interestingly, this connection had already been made a generation earlier through studies linking behaviors of juvenile delinquents (Bowlby, 1944a, 1944b) and of older children in foster care (Goldfarb, 1942) to their early experiences of maternal deprivation. These authors' descriptions of such behaviors as primary process lying, stealing, lack of empathy, and a seeming inability to discern right from wrong agree with those of later clinician/writers who described a constellation of such behaviors under the rubric, "Attachment Disorder" (Cline, 1972).

These findings have significance for the professional performing the assessment because a preponderance of severe attachment disordered behaviors presupposes an inability on the part of the child to bond with anyone including a sibling. Successful treatment of a child with Attachment Disorder requires a committed parent(s) willing and able to learn and implement a unique and intense reparenting process aimed at helping the child have a second chance at attachment. The process is long, demanding and without guarantee of success (Cline, 1995; Pickle & Allred, 1995). Randolph (1997) has compiled the following list of Attachment Disorder behaviors.

- Superficially charming
- Engages in power struggles over insignificant things
- Lies even when it is easier to tell the truth
- Is preoccupied with blood or fire
- Appears to be angry all the time and may be cruel to animals and siblings
- Has trouble making eye contact when adults want him or her to
- Has tremendous need to have control over everything
- Demands things, instead of asking for them
- Doesn't learn from mistakes and behaviors
- Tells others that parent abuses him or her
- Throws temper tantrums that last for hours
- Can't keep friends for more than a week
- Is very bossy with other children and adults
- Chatters nonstop, asks repeated questions about things that make no sense, mutters or is hard to understand

It is evident that a child who manifests even a few of these behaviors will present a first rate challenge to adoptive parents. For this reason placing two children with severe Attachment Disorder in the same home is not recommended (E. Randolph, personal communication, May 19, 2001). On

the other hand, the majority of children who enter the foster care system and who eventually become available for adoption have experienced some degree of trauma and abandonment. Most of these children will manifest attachment problems without exhibiting the full range and severity of attachment disorder behaviors. The motivated, emotionally grounded parent(s) should be adequate to work with these children under the supportive guidance of an experienced therapist.

### STEPS IN THE ASSESSMENT PROCESS

Professionals performing a “sibling bonding assessment” for the purpose of deciding sibling placement will arrive at their recommendations by researching three areas of the child’s history and present functioning. The questions to be answered are:

1. Do any of the children (a) present with a history of early attachment (b) manifest signs of Attachment Disorder?
2. Has the child (children) formed a healthy bond with the present caregiver?
3. What is the quality/nature of the attachment between the siblings?

These questions are answered through the following four steps.

#### *Step One: Obtain and Study Background Information*

Before attempting to assess attachment between siblings, the evaluator obtains a copy of medical, psychiatric, psychological, psychosocial, and educational evaluations as well as a history of the siblings’ placement. Previous evaluations may have diagnosed Attachment Disorder. These records may also contain useful information concerning siblings’ exposure to substances in utero, developmental delays, problematic behaviors, sleeping and eating patterns, etc. It is important to note the types of behaviors manifested by the children when they first came into care and whether those same behaviors are still present. For example, one sibling group was described by foster parents as “eating like animals, even dogfood” during their first few weeks in care but with education and modeling developed reasonably good table manners as well as tastes for “normal” food within the next six weeks. Behaviors indicative of a severe attachment disorder do not respond so quickly to good parenting. Especially important is the child’s early history, if available, and the level of trauma and abuse endured if known. The earlier the abuse, trauma, or abandonment, the more likely that severe behavioral problems will result (Perry et al., 1998).

*Interview with Foster Parents*

Caregivers descriptions of the siblings' behavior is essential as a first step toward evaluating the sibling bond. First, questions are posed concerning attachment behaviors in general. The *Randolph Attachment Disorder Questionnaire* is an excellent tool for rating attachment behaviors in a systematic fashion. Practitioners should use the instrument in conjunction with the manual explaining its use and should have previous training or at least have done extensive reading on Attachment Disorder. The instrument can be obtained through the Attachment Center Press in Evergreen, Colorado. If the instrument is not used, the evaluator may use the DSM-1V-TR(2000) classification of Reactive Attachment Disorder of Infancy or Early Childhood or the Attachment Disorder Behaviors list such as that presented above to guide the discussion with foster parents. Foster parents can also provide insight into the relationship between siblings. Patterns of play, shared activities, communication, enactment of roles, aggression, and cooperation between the siblings as described by the foster parent can be helpful. It should be noted, however, that the child's and adult's description of a sibling relationship may be widely divergent. While the parent may describe two siblings as being extremely close, the children may communicate a very different attitude.

*Interview with Child*

The purpose of the interview is to help the child express the level of attachment for adult caregivers as well as siblings. Siblings should be interviewed separately and if possible, more than once. A myriad of factors such as mood, trust level with the evaluator, or recent events in the home may all converge to influence the child's responses. In deciding how to pose questions, the evaluator will consider the age of the child and also follow the ethical principle of "least harm" (Loewenberg & Dolgoff, 1985) in phrasing questions to avoid setting up false expectations or needlessly increasing anxiety concerning future placement. Care should be taken not to instill a sense of responsibility or guilt in the child for placement of self or siblings based on the child's responses during the process. Rather, an honest introduction such as, "I am here because the court (or whoever the child recognizes as the "authorities") would like to know your feelings about what has happened to you and your feelings about the people in your life—your parents, foster parents, brothers and sisters, and anyone else who is important to you." Depending upon age and situation the child should be informed about the evaluator's limits in terms of decisions about placement.

In most cases children are more comfortable and informative one on one if invited to make a drawing or work with clay or another medium

while being interviewed. It is most helpful if the activity coincides with the purpose of the interview. For example, the child may arrange the family figures in the dollhouse, draw a picture of self and family, etc. Questions about closeness or preference of another person are posed indirectly. Evaluators will want to work on a set of questions appropriate to the child's age level which will yield information about which persons, including sibling(s), he/she most enjoys being with, sharing toys with, trusts with confidences, can count on for help when ill, in trouble, or afraid, etc. The questions can be presented in the form of a game, requiring the child to give the first person (or sibling) who comes to mind. Use at least twenty questions aimed at uncovering who the child trusts, feels affection for, relies upon, has fun with. Responses to such structured questions along with less structured interaction and observation will yield important information concerning the child's preference for attachment figures.

#### *Observations of Sibling Pairs or Groups*

As with interviewing, observing children in play or interaction on a one-time basis can be misleading (Cicirelli, 1995). A recent quarrel at home, the strange environment of the evaluator's playroom, and or the strangeness of the evaluator can all converge to influence siblings' interaction with one another. However, observing the siblings together more than once may yield more reliable information while engaging them in a game or activity requiring cooperation can shed light on the roles each enacts with the other.

### CASE STUDIES: THREE SIBLING BONDING ASSESSMENTS

The following three cases present examples of sibling relationships, therapeutic concerns and legal issues that may confront the evaluator performing the sibling bonding assessment.

#### CASE # 1: PREVIOUSLY ABSENT FATHER SUES FOR CUSTODY OF ONE OF THE SISTERS

Cynthia and Aracely came into care at ages six and three because of the death of their mother, Kelly. The girls had different fathers who had been absent from their lives since their infancy. Kelly had been battling cancer for several years and, realizing that she was near death, contacted Child Protective Services. Her parents, both deceased, had suffered from mental illness and were estranged from their own families, so that Kelly lacked these familial connections as well. It was Kelly's wish that her daughters be matched with suitable adoptive parents before

she died. The department responded with an adoptive family that seemed to match the ideal she had projected. Kelly and the adoptive parents developed a relationship during the last few weeks of Kelly's life, and the children were adjusting to their adoptive placement prior to her death. In keeping with the protocol for legal adoption, the biological fathers of Cynthia and Aracely were located. Aracely's father, in prison, signed the termination of parental rights. However, Cynthia's father expressed his wish to take custody of his daughter. This concerned the court for three reasons. First, Cynthia was bonding with her adoptive parents after the trauma of losing her mother. Second, Cynthia had no relationship with her biological father. Third, her move to biological father's home would mean separation from her sister.

#### *Assessment Process*

First, a review of case history revealed suspicion of mild neglect for both girls due to mother's illness and general lack of support systems. However, there was no evidence of abuse or trauma. It appeared that mother had been the consistent primary caregiver during the sisters' early years. Developmental assessments described both girls within normal limits developmentally except for Aracely's speech impairment, which was responding to therapy. There were no diagnoses of Attachment Disorder or other serious concerns. Next, the adoptive parents were interviewed. Their responses reinforced the absence of Attachment Disorder for both girls. In addition, they described a healthy bond between the girls who looked to the adoptive parents for security but related to one another as significant companions. In the beginning, Cynthia had served as a parental figure for her younger sister but had rather happily relinquished her responsibilities to her new parents. Since this interview was held in the home, it was possible to observe the nature of their interaction in this familiar place as well as their competitive, cooperative, and attention-seeking behavior. During this observation as well as a subsequent session in the evaluator's playroom, the girls looked for boundaries, affection, and security from the parental figures. They enjoyed cooperative play with one another but also sought time alone to pursue their own interests. This was particularly true for Cynthia who sought to explore articles of play appropriate to her age without interference from her younger sibling.

Interviews with the children demonstrated comfort with their adoptive parents and identification with their new living situation. They responded to structured questions about important figures in their lives, identifying "mom and dad" as significant sources of security, comfort, and confidence. Cynthia named her younger sister as a frequent preferred companion but appropriately identified schoolmates and teachers as also meeting her emotional and social needs. Aracely, not yet in school, looked to her older sister and new father as enjoyable playmates.

*Discussion*

This bonding assessment found the sisters to have a healthy attachment to one another built upon an adequate though admittedly imperfect early nurturing experience with biological mother. With this satisfactory foundation they were able to respond to the warmth as well as the limits provided by their adoptive parents. Developmentally, they were making great progress. Cynthia had relinquished her parental role with her sister as her sense of security and trust in adoptive parents increased. The case for maintaining the sisters together in their adoptive placement was strong despite the claims of the biological father. In an effort to avoid a legal standoff, jury trial, and further delay of the siblings' permanent placement, a mediation was ordered to explore the possibilities of open adoption. Father did relinquish parental rights in return for visiting privileges, a definite compromise made by both parties in the best interest of the children.

**CASE # 2: FOUR SIBLINGS, FOUR DIFFERENT FATHERS**

Marty (10), Teresa (8), Gerald (6), and Frankie (4) came into care after Frankie was observed to be standing unsupervised on a busy street corner one morning. The subsequent investigation found that the child had been locked in a large closet by older siblings before they left for school. This was the "supervision" plan used by the mother when a baby-sitter was not available. On this particular morning, he managed to escape and ran outside. The mother's longstanding drug addiction, lack of family support, and a history of documented neglect established the case for termination of parental rights that was accomplished in a timely manner. The children were initially in temporary foster care. The search was on for the children's fathers and/or adoptive placements. Looming large in the developing scenario was the issue of sibling bond. Should efforts be made to keep them together despite the four different fathers who might desire custody of their child? Or, if that scenario did not develop should the siblings be split into different adoptive placements? To provide some guidance to the assessment process, a sibling bonding assessment was court ordered.

*The Assessment Process*

The review of social, psychological and developmental evaluations confirmed that the neglect suffered by these four children had been long term and severe, dating back to the infancy of each child. It was possible that mother had ingested drugs during her pregnancies. The children had experienced multiple caregivers in the form of mother's boyfriends as well as physical and suspected sexual abuse. The stage had been set for possible Attachment Disorder and/or other serious emotional and behavioral prob-

lems. Only Teresa's experience had been different because she had lived over half of her life, including the first three years, with paternal grandmother.

Interview with foster mother revealed that during the year that the children had been in care, the two older boys had manifested some worrisome behaviors. Marty, quickly approaching puberty, was stealing and lying compulsively. Geraldo was aggressive with his first grade classmates. Frankie was not yet exhibiting severe behaviors and presented as a relatively healthy four-year-old who loved to play and interact with his older brothers. Teresa, on the other hand, avoided playing with her brothers and preferred visiting with paternal grandmother who wished to adopt her. Foster mother described the three boys as close and dependent on Marty who acted as the parental figure though frequently showing a poor behavioral example. Of the four children, Marty had perhaps suffered the greatest losses and most severe abuse and his behavioral profile included elements of Attachment Disorder.

Next, the children were interviewed. Because Teresa had a close bond with paternal grandmother, it was probable that she would be placed with her. Interviews with Teresa showed that she preferred grandmother on all dimensions to all other persons in her life. Teresa was clear that she enjoyed her brothers as playmates at times but wanted to live with grandmother. Marty conveyed that he missed mother, hoped that father would find him though father had never been part of his life. At the same time, he chose foster mother as the person that he preferred to meet his needs for security and comfort. He indicated that he would not depend on any adult, however, and his fantasy was to be allowed to live in his own apartment alone. He stated that he did not care about his siblings and was tired of being responsible for them. Geraldo and Frankie indicated a growing attachment for foster mom and a close relationship with each other.

On observing the children during two sessions, it was noted that Marty preferred to work alone at art, building, and fantasy. His fine motor skills were far advanced compared to those of his brothers, and he hungered for the opportunity to complete a work of art, place his name on it, and take a picture of it. Yet, when in the playroom with brothers, he assumed the role of caregiver, tying shoes and reminding brothers to wipe their noses and replace the caps on the markers. The brothers imitated his work and followed his lead. Unfortunately, Marty was consistent in his compulsive stealing in the playroom, lifting toys from shelf to pocket and then denying his obvious misdeed with an innocent look and lack of eye contact.

### *Discussion*

The case for grandmother's custody of Teresa was strong due to her early and continued contact with the child. The bonding assessment rein-

forced the hypothesis that Teresa was more attached to grandmother than to siblings or any other adult figure. Recommendations called for regular visits between Teresa and her brothers following her move to grandmother's.

Placement for the boys was a more complex matter. Their relationship was close but had been solidified out of deprivation of maternal care. Marty's role as parent was firmly entrenched and largely unconscious. Marty was the preferred attachment figure for his younger brothers but, as a ten-year-old suffering the effects of abuse and abandonment, he was not up to the task of supporting them emotionally. In fact his present behaviors predicted a tumultuous future for him, his siblings, and his adoptive family. In this case, the dilemma was partially solved when Frankie's father demanded custody of his son. He had been part of Frankie's life for the child's first two years and the interview and observations revealed that Frankie was comfortable and content in his presence. The healthy bond between father and son took precedence over the intense sibling attachment. Recommendations included regular visits between the boys.

Nevertheless, Frankie's departure represented another loss for Marty and Geraldo. It was recommended that these two siblings be adopted together. Although Marty's problems were of concern, Geraldo's interaction with peers was improving and he did not exhibit symptoms of Attachment Disorder. Committed and informed adoptive parents would be able to help both boys realize their potential attachment.

### CASE #3: SIX SIBLINGS WITH A HISTORY OF SEVERE NEGLECT; PARENTS INCARCERATED

Elsa (11), Tommy (9), Eugene (8), Lettie (7), Jonny (4), Timmy (4) had been in care for two years when the bonding assessment was requested. At the time of removal, both parents had been arrested. The court was working toward termination of parental rights with the mother still in prison and the father having left town with no forwarding address.

Alcoholism and drug abuse was suspected on the part of both parents with a high suspicion that the children were exposed to substances in utero. Mother tested borderline mentally retarded. Father was suspected to suffer from a mental illness. The children were malnourished at the time of removal and all exhibited speech impediments and developmental lags. Physical abuse was confirmed for some of the children and sexual abuse suspected. The family moved frequently and the children had sporadic school histories.

Upon entering foster care as one sibling group, the children managed to sabotage efforts of caregivers to provide adult direction and supportive care. Accustomed to caring for themselves, the children lapsed into familiar role of victim, parent, aggressor, etc. and bonded together in subsystems against one another and the caregivers. Frequent change of foster homes ensued, trying different

configurations of sibling groups together. All appeared to be hyperactive and were eventually placed on some type of medication, ranging from antidepressants to antipsychotics. The children did not discuss their parents. When allowed to visit mom in jail, they showed little evidence of a bond with her, paying attention instead to the toys provided by the caseworkers and playing /squabbling with each other.

Information relevant to individual children revealed the following: Elsa (11) was embedded in her role as parent. The younger children depended upon her and, true to her developmental stage, she was sporadic and immature in her care giving. She resented and rebelled against the adults who would attempt to usurp her parental role. Early in her succession of six placements, she accused a foster dad of molesting her, later stating it had been her little sister who had been molested and finally retracting the story. Tommy (10) was "second in command" after Elsa in the family although he too relied on Elsa for direction and comfort. A quiet, cooperative child, he had demonstrated less severe behavior than his siblings. Eugene (9) had challenged his succession of foster homes with aggressive behaviors and rages. In his present placement, he had destroyed property and had refuted attempts on the part of caregivers to extend security and comfort. A few months prior to the assessment, he had demonstrated a major shift in behavior, responding to the overtures made by foster mom to bond with him and was asking to be adopted into his present placement. Lettie (7) was severely delayed in her development. Her facial features reflected Fetal Alcohol Syndrome. In addition, Lettie was described as difficult to manage by present and former foster parents. She was cruel with animals, could not keep friends, lied habitually. Jonny and Timmy (4) were fraternal twins. Jonny seemed to be the brighter, better behaved, and better adjusted of the two. Timmy had temper tantrums; a more limited vocabulary, and was more hyperactive. Both boys, however, had slept so poorly during their first placement that they had been placed on medication at two years of age. The bonding assessment was recommended to "determine if the children will be able to function and not be affected emotionally by the separation through adoption into different homes."

### *Assessment Process*

This assessment required interviews and home visits to four different homes. In addition, each of the children was interviewed a second time in the evaluator's office. Each parent was asked to respond separately to the Randolph Attachment Disorder Questionnaire. In addition, they were asked to discuss their experiences with the children, the family routines, and their feelings about their foster children.

### *Discussion*

The children in this sibling group came into care exemplifying varying behaviors indicative of Attachment Disorder. By the time this bonding assessment was ordered caseworkers had found it necessary to place the children with parents in different homes so that they could bond appropriately with adult caregivers. In addition, the therapy process in which each child was involved had helped heal some of their emotional

wounds, freeing them to trust. As a result, all of the children were bonded to some degree with their foster parents and this relationship was allowing them to learn positive coping strategies and to move forward in their development. It should be noted that opinions were divided among the professionals concerning the placement of two of the children separate from any siblings. However, the assessment clarified each child's strong attachment to their potential adoptive families with whom they were currently placed. Given their history and hard won struggle to overcome lack of trust, the relationship with these parental figures took precedence over placement with siblings. Nevertheless, all of the siblings will continue to be important to one another and regular contact was recommended.

In this case, the parents had been bringing the siblings together regularly for parties, birthdays, and overnights and voiced their commitment to continue to do so. In such situations, the good will and perseverance of the parents in their efforts to maintain ties among siblings not residing together cannot be overemphasized. Visitation cannot be court ordered following consummation of an adoption. As time passes, life events, busy schedules, and even disagreements among the siblings and between the adoptive parents of the sibling groups can converge to deaden the original spirit of cooperation. In the above case, time was devoted to discuss these issues with the parents involved and mediation was offered for present and future disputes or difficulties that might evolve.

#### SUMMARY

Sibling relationships will continue to be a concern for child welfare workers charged with the responsibility of placement. As increasing numbers of children come into care with varying degrees of Attachment Disorder, professionals must weigh the advantages of maintaining the sibling group intact against the special needs of a child requiring concentrated attention from a parental figure. Indeed, for a child with severe Attachment Disorder, the ability to benefit from a sibling relationship is doubtful while his/her potential to sabotage a placement is considerable. Therefore, the primary relationship with the adult caregiver should be considered an important factor in the placement equation. On the other hand, healthy attachments between siblings may weigh heavily in favor of maintaining the sibling group intact when biological parents or relatives with weak ties to the child voice their custodial rights. As is evidenced from the three scenarios offered here, many unique factors may play into the legal drama. However, with the aid of instruments and procedures such as those described in this paper, the consultant/evaluator can build the sibling bonding assessment on a more objective, data rich foundation.

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