

NEGOTIATING

SIBLING SEPARATION

**A STUDY OF A METHOD OF GROUP WORK WITH SIBLINGS IN THE ADOPTION
PROCESS AND ORGANISATIONAL RESPONSES**

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Abstract

This was a study of the author's practice innovation in therapeutic social work with siblings in permanency planning that started in 2009 and continues. Clinical and research supervision of the unfolding project facilitated a reflexive deepening and conceptualisation of the processes involved producing the practice model which this thesis introduces.

The practice intervention focused on the relational and emotional needs of sibling groups of children who all faced the inevitability of transition and potential separation from their own siblings.

The research process involved three key aspects: thematic analysis of data arising from the author's group work with the children; conceptualisation of the author's role as a *boundary spanner*, and the use of transformational conversations which contributed to changes in policy and organizational ways of thinking.

This thesis was underpinned by a psychoanalytic exploration of sibling relationships, group work and child centered play therapy leading to the development of a new form of practice for which the term Sibling-Centred Social Work is proposed.

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Chapter 1

Introduction to the Study

“If someone descended from another planet and found that we separated siblings in need, they would think the human race was crazy.”

(Prof. Juliett Mitchell, BBC4 May 2013)

1.1 Introduction

Throughout this thesis, I hope to address the knowledge gap around how sibling groups in care can be engaged with by social work practitioners and placement decision makers, in order to come to best permanency placement designs for them. I will enquire into the notion of the sibling and the sibling group in the context of the child care organisation who hold decision making power around their permanency needs. This thesis focuses on sibling groups who experience losing what Mitchell (2010) terms ‘the horizontal bonds’ which exist as a result of lack of birth parental mediation thus requiring sibling reconstruction, whereby the organisation then attempts to replace their parental models with more secure alternative permanency ones. (The construction of new horizontal and lateral bonds) Early psychoanalytic theory focused on the child’s primary love with their mother, almost to the exclusion of all others; even Bowlby (1953) places powerful emphasis on the maternal attachment, resulting in what Mitchell describes as “an organisational blind spot in the superb watcher of children” (2010, p.169). She conceptualises the sibling relationship as the horizontal relationship which develops as the children relate with each other. During the course of this research, I have been compelled to notice the power of the sibling bond and the effect of sibling severance in terms of shock and trauma, which impacts upon the children’s permanency placements if they are not well supported in order to have a sense of control in the emotional chaos they experience. This sense of loss and despair has led me to enquire into the nature of sibling relationships as they navigate transition and separation, and how they might be better supported in order to emotionally manage the impending realities of new permanency arrangements. In this thesis, I propose that siblings require a particular practice intervention in order to be understood in terms of their

capacity to bear and be borne by each other and their care givers. I began with a professional hunch that sibling groups of children in care could show relational realities in terms of their capacity to psychically and physically exist in the context of each other, and that a sense of sibling identity offers an emotional resilience to the child which enables them to be available to new relationships.

I have developed a method, role and model which combines a specialised therapeutic practice within the context of children's social care and associated literature in the fields of psychoanalytic social work, siblings, attachment and play therapy theory focusing on contemporary adoption practice in order to know more effectively about sibling relationships and systematically consider their configurations and reconfigurations for the purpose of enabling secure sibling emotionality and connectedness.

In a survey of 1417 young people in care (UK Statistics 2013/14), the Children's Rights Director reported that 63% had siblings, and 71% of those had been separated from their siblings. Siblings Together report that "34% of children separated will rarely, if ever, see their siblings again." (Siblings Together, 2017). Furthermore, 91% of those placed together thought this was the right decision, whilst 45% who were separated thought this was the right decision. Ottaway, in her research into adoption practice in Wales (2017) states that approximated 80% of adoptive children will have siblings, with only 30% being placed with some or all of them. I am not aware of any model designed to address the preparation of siblings using a multiple sibling group approach to therapy, in order to negotiate separation from each other.

I am enquiring into the complexities within this field of work as literature with regards to sibling relationships and separation. Throughout this thesis, I hope to contribute to practice with regards to how siblings can be understood and supported therapeutically, whilst at the same time address the organisational intelligence required to do so.

1.2 Background and Development of the Project

In the field of social work practice little is written, about the internal state of mind of children in sibling groups who are facing being separated from each other, from the perspective of the children. In the course of this thesis, I will consider the sibling mind's state of integration and dis-integration (Klein, 1946; Bick, 1968) in relation to the flux in their psychic worlds as their model of togetherness is challenged, deconstructed and reconstructed in the course of the pursuit of permanency placements. Through selected examples from sibling group work (Chapter 5: Group Work and Chapter 6: Case Studies) I will illustrate how the siblings come to gain insight into their painful histories and notice commonalities and anomalies in their shared material (Chapter 7: Emergent Codes and Themes). I will consider the impact of the 'absent object' (O'Shaughnessy, 1964; Ruston, 1991, 1994, 1996) in relation to the loss of a sibling for the child in care, who has already experienced multiple compound losses before finally losing their sibling.

"I have lost everything now. My home, my mum, my dad, my nan, my dog, and now her." (10-year-old sibling, crying as she grieved the separation from a 5-year-old sibling, placed for adoption – Child Olive 1, See Table of Group Membership, Chapter 6)

I will consider how such material can influence the organisational decision-making process and the direction of casework and placement practice (Chapter 4: The Model) and notice parallels between the defended states of mind of the children, their carers, practitioners and organisation.

The journey of this thesis emanated from an innovative practice intervention whereby I as consultant social worker/play therapist sought to position myself with sibling children in the British care system who were having to face separation from each other, as the organisation sought permanent placements for them all. I had a practice idea that needed attention and development around working with siblings in care, where inspiration had developed from many years of direct work and therapeutic practice with sibling children, facing family traumas which

often led to them living separately in care. I wanted their sibling identities to be professionally respected. The practice idea was to provide sibling group work between multiple groups of siblings within the same therapeutic space. This involved facilitating dialogues using the medium of play therapy, to engage in ego-strengthening psychic tasks with the children. I was aware of the sibling children holding much shared unconscious material and found Bollas' notion of 'the unthought known' (1989) useful in describing this particular latent, shared group knowledge, which pre-existed the group work, and was there to be made sense of and worked with.

I engaged with 69 children (2009-2013); in the course of running 10 therapy groups. This thesis is the consolidation of the story of this work and the conceptualisation of its various features. I undertook a case study approach to account for the sibling group work. In this thesis, I consider the narratives of sibling groups by focusing on four particular case studies as a way of engaging with the children's material in order to ask questions;

1. What emotions do the children convey in the course of the play therapy group work?
2. What does this tell us about siblings negotiating transition and separation?

I consider what I now call the sibling-separation complex. At a certain point in the research process, I revisit the children's case and group work material and engage with the process of analytical induction (See Chapter 2 Methodology) and follow this with the development of emergent themes (See Chapter 2 Methodology: Thematic Maps) in order to engage in the process in cross-case comparison (See Chapter 7 Emergent Codes and Themes).

Four examples of detailed sibling group work are presented here in Chapter 6: Case Studies.

My research offered surprises in terms of organisational processes which required investigation.

"In the individual's mental life, someone else is inevitably involved as a model, as an object, as a helper, as an opponent." (Freud [1921]: 69)

By devising a therapy practice around sibling work, I created a particular space where sibling groups could be thoughts about and held in the therapist's mind. Steiner (1993) offers a notion of the importance of space that the therapist creates in relation to the patient staying in the therapist's mind. It is my intention at the outset of this work to create a space within the organisation, where the dialogue from the children can be connected to permanency planning. In the body of this thesis, I will illustrate through the case studies how parallel states of defendedness are encountered between the children, carers and professionals alike.

In this psycho-social research I have made particular use of a mixed methods approach. This is in order to apply a 'practice-near' (Froggett & Briggs, 2012) method which takes account of my immersion in both the therapeutic work with the children and close work with the organisation. I set out to create an innovative group space where multiple sibling groups could be gathered and an enquiry formed which might enhance decision making planning in terms of sibling placements. By taking an interpretive or hermeneutic approach, I hoped to consider the new possibilities of movement of thoughts between these two groups in order that both organisation and sibling groups could be better understood in relation to each other.

Through the lens of research supervision, the complexities of my role have been highlighted. I will consider the concept of 'practice-near' social work in relation to working with sibling groups as a way of enquiring into organisational reflexivity. I have applied ideas from the research literature in order to develop a research design to engage with both the organisation, professionals and sibling children. I have undertaken 'transformative dialogues' (Trede, 2009) within the organisation and considered material from the children's group work by carrying out an inductive coding process and thematic analysis in order to discover and identify responses which lead to the formation of codes and themes. I have conceptualised the organisational boundary spanning activity (the transitioning of ideas, theory, material across professional spaces) in relation to a practice role and the notion of 'the reticulist' or 'boundary spanner' as developed by Williams (2002). This has made it possible to reveal and to describe something of

the recurring net-like framework and patterns within the organisation and of my role in linking it to the children's material (See Chapter 4, Diagram 3).

This study all offered surprises in terms of;

- i. The potential for practice development and the power that research informed practice can have upon policy making.
- ii. The creation of a politic around 'deep practice', or 'practice near' (Cooper, 2009) research in social work; and the need for a collaborative 'sibling-informed' professional dialogue around decision making and sibling children in care.
- iii. The impact of shifting governmentality upon the roles and tasks involved in social work in relation to the capacity and depth of work with children.

My study is underpinned by a review of the literature for the key themes. These include: the psychodynamic theory of siblings (Mitchell, 2003; Coles, 2006; Skrzypek 2014); group-based play therapy (Sweeney and Homeyer, 1999)); working in organisations and the role of the reticulist (Williams, 2002); transformative conversations (Trede, 2009; Wengraff, 2001). My research perspective has been enriched by approaches which include: co-operative inquiry (Heron; 1996); thick description (Geertz, 1974), and practice near research (Cooper, 2009).

1.3 Combining Social Work and Play Therapy

Over two decades of adoption and permanency social work had caused me to notice the extreme pain and confusion exhibited by siblings faced with separation from each other. Simultaneously the children seemed to accept decisions and become almost emotionally numb, talking about their positions often in a passive way, with institutional language. Their chaos would suddenly erupt in uncontrollable anger to be contained by placing behavioural strategies around their challenging behaviours in order to bring them to compliance, for all involved to manage the pain.

I was often being asked to work with individual siblings, but had a compunction to 'know' the children, not as sole individuals, but in relation to each other and their group as a whole. My response was to insist on working with the whole sibling group in order to have a sense of these children's internal worlds in relation to each other; and would provide clinical analysis of the work to inform future placement decisions for all the children.

Organisational decisions about the future placements of siblings were based on their emergency configurations as they were placed in available foster care upon their reception into care, and other factors such as the children's ordinal positions (i.e. age), around dysfunctional behaviour (sexualized/gravely rivalrous) or simply a cut-off age after which point it was organisationally assumed to be too difficult to find adoptive parents. To do so required me to develop a role which was strategically positioned to interact between the children and the organisation at critical moment around transition, confusion, loss and the redefinition of relationships; as this seemed to be the most apt point to work with their authentic emotions. By remaining as an employee within the organisation, it has been possible to integrate both methods and role (Social Work and Play Therapy) making the resultant resource then available to the community of children whom the adoption agency has continual access to.

By using a psychoanalytic paradigm, I will enquire into the intra-psychic processes such as the mechanisms of defence, transference, projection and containment (Bion, Winnicott and Klein) in order to consider the mental space between mother and child, and parallel 'transitional space' between professional and child, in order to tip toe up the pain (Fraiberg et al., 1975), inherent in the sibling dilemma.

The modality of Play Therapy offers a way of engaging in symbolic and non-verbal communication in the sibling space in order to explore and express new-found wisdoms and self-direction, as the children explore painful emotional material supported by the therapeutic relationship. However, I realised that I needed to create a space within the social work and decision-making system for noticing these emotional expressions. It seemed that there was an

assumption or even a myth that professional space already existed for the child to explore their wishes and feelings within their social worker relationship with them.

I began to wonder how the information the children held might be more expediently processed and understood if they were sharing it with other sibling groups in similar positions to their own. I was interested in their shared hypervigilance which resonated between them when they came together, and their empathic trauma and loss informed alliances which offered them “a particular immediacy of felt attunement and unrestricted perception” (Reason, 1996 p.119) I will describe a practice innovation which I have designed to attend to this particular community of children. It includes six therapy sessions to consider the potential for reconfiguration of sibling dynamics, along with the further potential for ongoing therapy provision and engagements appropriate for the needs of any sibling and their group (See Chapter 4 The Model).

The Head of Placement Services approached me in 2009, asking if I had a particular practice idea that would attend to the emotional wellbeing of children as the Primary Care Trust (PCT) had the potential to fund such work. From this cascaded a series of practice interventions and events which I attend to within the methodology of this thesis. From this emerge a hypothesis that the therapeutic group space would facilitate new thoughts around placement needs from the perspective of the children, which would better inform the organisational decision making processes and emotionally prepare the children in readiness for new bonding potential with new permanent parents.

1.4 Aims of this Study

Can group work-based Play Therapy with sibling groups in transition prepare the children for future placements, and better inform decision making about the placements of the siblings?

Cooper and Wren (2012) note that “Complexity can guide towards purposeful action.” Whilst sibling complexities unravelled in the play therapy space, organisational dynamics emerged

requiring inquiry in order to consider the parallel complexities. I begin this thesis from the point of having actioned an idea of working with a group of six siblings (Chapter 6, Table of Group Membership; Red siblings) whom the agency (Social Services) needed to think about in terms of their permanent placement configuration.

The initial purpose of this study was to evaluate the impact of a model of group, child-centred play therapy for children who, with their siblings, were negotiating changing family structures. Each course of group work (of which there were 10) comprised of two or three sibling groups (between 6-10 children). Through the non-directive child-centred approach, the children were offered ways of negotiating and managing their own scenarios. I am unaware of research around working with multiple severed sibling groups in care, using group work therapy.

These children have all been exposed to traumatic life events which they have internalised and have consequently suffered from aspects of developmental trauma and delay, affecting their attachment behaviours and potential, their ability to self-regulate their body states, emotions and subsequent behaviours and patterns. However, this destabilised emotional state may not affect them in terms of serious mental health concerns, but at the times of transitions and change, their states of mind and capacities to engage in new bonding are often affected. Such children seldom come under the remit of local CAMHS (Children And Mental Health Services) services but remain for indefinite periods of time in the care system awaiting placements or being moved multiple times as their complex behaviours resulted in placement breakdowns (disruptions).

In this thesis, I consider the narratives of the sibling groups through the case studies (Chapter 6) and identify parallel professional processes within the organisation. My study is a form of 'real-methods' research in which I draw near to the psychosocial material being enquired into. I consider the complexities of relationships in the subject matter and the dynamic connections and interactions involved. Furthermore, I attend to the connective role between the children and the professionals which is a role I have taken up, named the Reticulist or organisational boundary spanner (Williams, 2002). This thesis considers sibling groups of children facing

separation and their capacity to make use of a therapeutic process and consider their relationships and resultant placement futures. The methodology employed, and literature review offer ways of engaging with and understanding this particular community of children in care. This thesis offers a 'practice-near' method to permit professionals to engage with the thickly textured material which emerges from the children in the therapeutic group work space.

Chapter 2

Methodology

2.1 Introduction: Brief Outline of Methodology

In this chapter I describe and discuss the methodological aspects of this study. This has not been a conventional, planned research project involving the gathering of data according to a prepared schedule; but a process of partly retrospective, and partly concurrent developmental conceptualisation, of an existing practice intervention. I explain the meaning of this more fully below.

The new form of intervention with sibling groups that is at the heart of the project began in March 2009. I had engaged Clare Parkinson as my independent clinical supervisor for this work. She subsequently moved to work at the Tavistock Centre, and later became one of my two research supervisors. This was both a fortunate intersection, but also consistent with Tavistock Doctoral Programmes' approach to applied and clinical research. In 2011-12, I registered for the Professional Doctorate in Social Work and undertook a year of taught and assessed work. During this year, in the context of research methods learning, I undertook the first interviews, literature reviews and steps towards conceptualising the practice process I wished to study for the doctorate. From this point onwards, the blend of clinical and research supervision of my practice, began to reflexively impact upon this same practice, so that it developed in ways it certainly would not have done in the absence of such supervision.

My primary practice focus was the emotional wellbeing of children in adoptive placements where permanency decisions were taken to separate siblings. I had developed a 'hunch' that a solid sense of 'sibling identity' was critical to a child's availability to emotionally bond with new alternative permanent families. Therefore, the project specifically attended to sibling groups where the organisation had obtained a placement's order, enabling adoption to be considered as the permanency plan for at least one of the sibling group. This was the point where certainty of transition and pending change to family status affected the sibling group. I am researching into a

practice model involving 22 sibling groups in a process of therapeutic group work and subsequent follow up in placement, from which 4 case studies have been extracted to be examined, understood and validated for the purpose of this research.

2.2 Emergence of the Sibling Group Work Project

In this thesis I am discussing and reporting on a practice intervention in order to research complexities within the emotional and relational life of sibling groups in care and the decision-making processes of the organisation in whose care the children are. As the practice project began in 2009, I already had data available for the purposes of doctoral study; therefore, this is in part, a retrospective case study into sibling groups in care facing separation and transition.

In 2009, I was asked to undertake a piece of play therapy work with a sibling, the second of a group of six who was displaying serious aggression towards her foster carer in anticipation of having to move to a long-term foster placement. When I enquired into her sibling group dynamics, it became clear that the social worker had drawn up a rudimentary plan based on two visits to the elder children but had never seen the group as a whole. This worker had recently taken over the case and had to prepare her plan for court purposes. I insisted that I work with the whole sibling group, (See Chapter 6, Table of Group Membership) using play therapy group work as a way of engaging with the sibling group dynamics, in order to consider both individual and group needs in order to offer a practically useful way of providing findings to take to Court. As play therapist, my question emerged around whether group work-based play therapy with sibling groups in transition could better prepare the children for future placements, and the emergent material from the group work better inform decision makers about potential sibling placements.

Stake (1994) refers to the methodological importance of choosing “an intrinsic case study”, where the case combines both particular and ordinary qualities (cited in Silverman, 2000 p.102). With the development of the project, the methodology focused on the data which emanated from the case work with the siblings. Questions emerged around identities, experiences and dynamics with

regards to the notion of sibling separation as a result of a need to acquire permanent placements for the children. As the interventions replicated I became intentional and purposeful in my attempts to conceptualise and theorise around these notions in order to acquire insight to better support and approach decision making around sibling's placement needs and potential configurations. As time progressed I designed a particular therapy program to attend to:

- Each child's perspective of their own 'world' or identity
- Each child's perspective with regards to parent and carer figures
- Each child's perspective with regards to their historic memory of family events
- Each child's perspective with regards to transition
- Each child's perspective with regards to their sibling relationships.

My practice model incorporated a social worker to one of the sibling groups as co-worker in order to ensure they participated in both observation and group emotional processes with me, in order to understand better and consider plans from the material given to us by the children; and dissipate sibling-casework reflexivity across the organisation.

This intervention provided a way of offering data back to the wider organisation in order to create stronger reflexivity around;

- i. A description of the particular sibling group dynamics and the impact of the dilemmas borne out of their abusive and neglectful family histories.
- ii. A description of the professional state of mind in relation to each sibling group in respect of their dynamics and potential appropriate permanency placements.
- iii. The exercise of the group work and the sibling group's use of this therapeutic space. The opportunity to study the children's capacity to think, be receptive and reciprocal about their individual and group identities, transition and permanency requirements during the course of the group work process.
- iv. The professional state of mind at the end of the group work intervention; and effect on the decision-making process in relation to practice with transitioning siblings.
- v. The organisational state of mind with regards to practice and policy when placing sibling children in permanency arrangements.

The multiple case study design offers a framework from which data was gathered and protocols for thinking of the children's emotional needs in respect of transition were considered. The research considers the complex dynamics in both sibling groups and organisational ways of working with these children. I believe and hope to have produced evidence to support my belief, that both strands of this work critically affect adoptive placement outcomes and the quality of potential stability of adoptive family units. I will consider what new intelligence the adoption sibling group therapy might offer and what professionals make of this knowledge.

2.3 The Emergence of the Research Dimension

As my engagement with the doctoral programme progressed, four overlapping phases of the total developmental process of the project emerged:

- (a) Direct work with sibling groups, with increasing reflexive awareness of the meaning of this work as other dimensions of the project evolved.
- (b) Processes of engagement with the wider Local Authority Children's service management and systems, with impacts on decision making processes and outcomes for children. The start of my conceptualisation of my role as a 'boundary spanner', and of the value of transformative conversations in producing organisational change
- (c) As the work gained recognition, a wider process of engagement with professional systems beyond the Local Authority – the courts, CAFCASS, BAAF and national policy processes - illustrating the potential for a 'practice innovation' to create impacts at local and national.
- (d) The research dimension created a particular lens on both the children's and organisational material from which

complexities could emerge and be thought about and might develop into common patterns.

By engaging in doctoral research and learning through the development of the project, I began to develop greater conceptual precision with regards to the practice model and recognise emergent themes from the group processes between the siblings, sibling dynamics and identity, sibling configurations, parental notions, separation and transition. As the processes of taking this new ‘intelligence’ back into the organisation developed, further conceptualisations emerged around a professional role as a ‘change agent’ (Pincus & Minahan, 1973), and the impact this role might have upon practice engagement and policy with siblings across Local Authority child care services. The primary data is therefore an amalgamation of practitioner gathered data with regards to the children, organisation, social work practice and the ‘change agent’ role. Cooper (2009) refers to this process as the development of ‘practice-near’ research; my particular methodological stance is also informed by action research (Reason & Bradbury, 2001), thematic analysis (Braun & Clark, 2006) and collaborative enquiry (Reason, 1988).

2.3.1 A Chronology of Research related activity, interviews, key organisational events and processes

March 2009 **Sibling Group Work A**

May 2009 **Sibling Group Work B**

July 2009 **Sibling Group Work C**

December 2009 **Sibling Group Work D**

September 2010 **Sibling Group Work E**

In clinical supervision, common patterns were being noted from the data within the group work material.

November 2010 Report to Head of Commissioning Services, NHS Primary Care Trust into discussion, results and findings around Sibling Group Work Project courses A-D.

May 2011	Sibling Group Work F
July 2011	Sibling Group Work G
October 2011	<u>Planning Sibling Policy & Practice procedures</u> for upcoming inspections
21 st November 2011	<u>Organisational Policy & Procedures discussion</u> with post-adoption team following group work
26 th January 2012	<u>Organisational Interview</u> : Autobiographical interview with Adoption Managers Research supervision questioned my personal assumptions around sibling identity and relationships. This model of questioning was expanded into all professional pre-group work discussions.
March 2012	Sibling Group Work H
March 2012	<u>Adoption Inspection</u> : Inspectors inspired by Sibling Group Work, inquired into the 'role' within the organisation and highlighted therapy salary deficit and social work salary incremental backlog. They suggested the organisation increase hours to cope with group work practice need.
3 rd April 2012	<u>Biographical Interview</u> : Carried out with Adoption Manager - Focus on sibling practice and policy in the agency. Considering assumptions with regards to sibling practice and organisational decision-making reflexivity.
9 th May 2012	<u>Presentation</u> to Consortium Guardian ad litem; CAFCASS
21 st May 2012	<u>Ethical Approval for the Doctorate study</u> was given to by the organisation and University of East London
22 nd May 2012	<u>Biographical Interview</u> : Carried out with Head of Placement Services - Focus on practice with siblings and decision making procedures and outcomes.

June 2012	<u>As a result of the March 2012 Inspection</u> : An outline of the Group Work practice was placed on the OFSTED website as best practice example.
June 2012	Sibling Group Work I
4 th September 2012	<u>Biographical Interview</u> : Carried out with New Adoption Manager - Focus on sibling practice and decision making within the adoption process.
November 2012	Sibling Group Work J ; Case Study 4
	Three professional conference presentations; 20 th February 2013 (Consortium directors and managers), 25 th April 2013 (Tavistock) and May 2013 (BAAF)
June – September 2013	Professional training programmes; Considering assumptions around professional reflexivity, sibling dynamics, placement needs and group work practice methods.
	Three professional training programmes cross-consortium; 4 th June 2013, 10 th September and 19 th September
19 th Sept, 4 th & 8 th Oct 2013	<u>Model development</u> ; Adoption Celebration Therapy (Children's Group Work)
October 2013-January 2014	Phases of Sibling Group Work; October 2013, November 2013 and January 2014
February 2014	<u>Presenter</u> ; BAAF Adoption Activity Day Feedback – Regarding training of therapists.
25 th February 2014	<u>Inspection</u> - Outcomes & Sibling Policy: in depth discussion with further inspectors around model and outcomes
12 th March 2014	<u>Co-presenter with research supervisor</u> ; Enfield LAC/CAMHS Training Day
April 2014	<u>Trainer</u> ; Training Play Therapists to model (Cross consortium)
22 nd and 29 th April 2014	Presentations/Adoption Siblings Work
8 th May 2014	Adoption Celebration Steering Group

13 th May 2014	<u>Presenter</u> ; Improving Adoption, Somerset House
12 th and 19 th May 2014	<u>Trainer</u> ; Adoption Celebration Training
June 2014	Sibling Group Work
June/July 2014	Sibling Group Work
23 rd July 2014	<u>Presenter</u> ; BAAF– Preparing Children for Adoption Celebration Days
1 st November 2014	Adoption Activity Day 3
June 2015-Feb 2016	Three Phases of Sibling Group Work; Sibling Group Work
February 2016	<u>Trainer</u> ; Pan-London Conference ‘Siblings for the Long Haul’ Preparing adopters for sibling groups
October 2012-September 2016	Research Interviewing (Biographical interviewing)
October/November 2016	Two Phases of Sibling Group Work; Sibling Group Work

(8 courses of singular sibling group work have also been carried out on behalf of the Local Authority to attend to particularly urgent court requests.).

2.4 Methodological Aspects of the Three Phases of the Work

I will now describe the conceptualisation of this complex practice development process in which my role was that of a ‘change agent’. Methodologically, the primary data is drawn from a variety of linked practice experiences which have directly informed my work, and the process of conceptualisation. I am reporting on;

(a) Direct work/play therapy with 22 sibling groups of which I have selected four as case studies for the purpose of writing up this work in order to illustrate the emergence of fifteen codes leading to four key themes (Chapter 7, Table of Group Work Emergent Codes) which I propose characterise these sibling groups.

(b) A process of conveying thickly textured understanding of the needs of these children into the Local Authority Organisational system, in order to reframe thinking and decision making about individual children and groups at the organisational level and,

(c) A process in which this work entailed influencing the wider systems of the courts, CAFCASS, and key external agencies such as OFSTED. This in turn entailed the articulation of the direct practice work using play therapy with sibling groups as a new model of therapeutic intervention.

2.4.1 Direct therapeutic work with sibling groups

a. Collecting the data

With respect to this study into applied therapeutic processes with 22 sibling groups over a period of four years, I was informed by (i) my training as a reflective psychoanalytically trained social worker, (ii) as a non-directive child-centred play therapist, trained in group work, (iii) by continuing reflective practice supervision in the context of undertaking this professional doctorate. Importantly, my practice supervisor also became one of my research supervisors, and in this way direct practice development became intrinsically linked to the research process. I am, therefore, in part inquiring into the methodology of psychoanalytic supervision as a way of enhancing and gaining knowledge of the research subjects. Butler (2005) said that ‘giving account of oneself highlights the importance of narratives which take place within the context of addressing another’ (cited in Elliott et al. 2012 p. 2). In the process of doing the work and reflecting through supervision, patterns and trends of interest and significance began to take shape as both the dynamic and narrative material emerged as data to be enquired into from the 22 sibling groups. I have retrospectively engaged with the research method of thematic analysis in order to enquire into the original data, and from this, have extracted codes and themes which I will describe within the context of this chapter. In the process of psychoanalytical supervision, I adopted a meta-position in order to pay particular attention to the data which required understanding and exploring. Post group work sessional notes, made immediately after each session in conjunction with co-workers, including both recordings of the children’s material and our responses to this. These were used as a basis for supervision and triangulation of practice and research data, therefore contributing to practitioner/ researcher reflexivity and further research knowledge.

b. The Children

I will consider the material available to me from work with 69 children across 22 sibling groups who attended 10 therapy group work programs from 2009 to 2013.

All the children were subject to full care orders and in the care of the Local Authority, living in foster care. All of the sibling groups had some form of ongoing direct contact with birth family relations. In line with national adoption policy, adoption was a considered placement notion for all of the younger siblings. Though no specific age as such was adhered to within the organisation, professional assumptions continued to prevail. There was little analytical consideration until child care social workers engaged their sibling case work with the therapy group work. Once this had occurred, the workers were quick to refer to the factual data available to them about the nature of sibling dynamics as a result of the evidence from the group work. The siblings attending the group work were between the ages of 2.5 years to 15 years; accounting for the fact that children of infancy age struggle to engage in group work processes if separated from their primary carer (separation anxiety) so a decision was taken not to incorporate infant children in therapy group work for this reason. Siblings over the age of 16 years were less commonly within the care system, therefore fewer older teenagers were available to join in the therapy process. However, the therapy model offers input to sibling groups in the form of therapeutic post adoption sibling contact. Often, young adult siblings are reengaged with and brought into sibling work at the point of the establishment of contact once permanency placements have been acquired (T3: Diagram 1 The Model). Therefore, all of the siblings negotiating placement transitions and separations who were available to engage with the group work were under the age of 16 years. Infant siblings were brought to the group work venues to meet their siblings before and after each session, therefore maintaining an active and observable sibling position.

c. *The model of work*

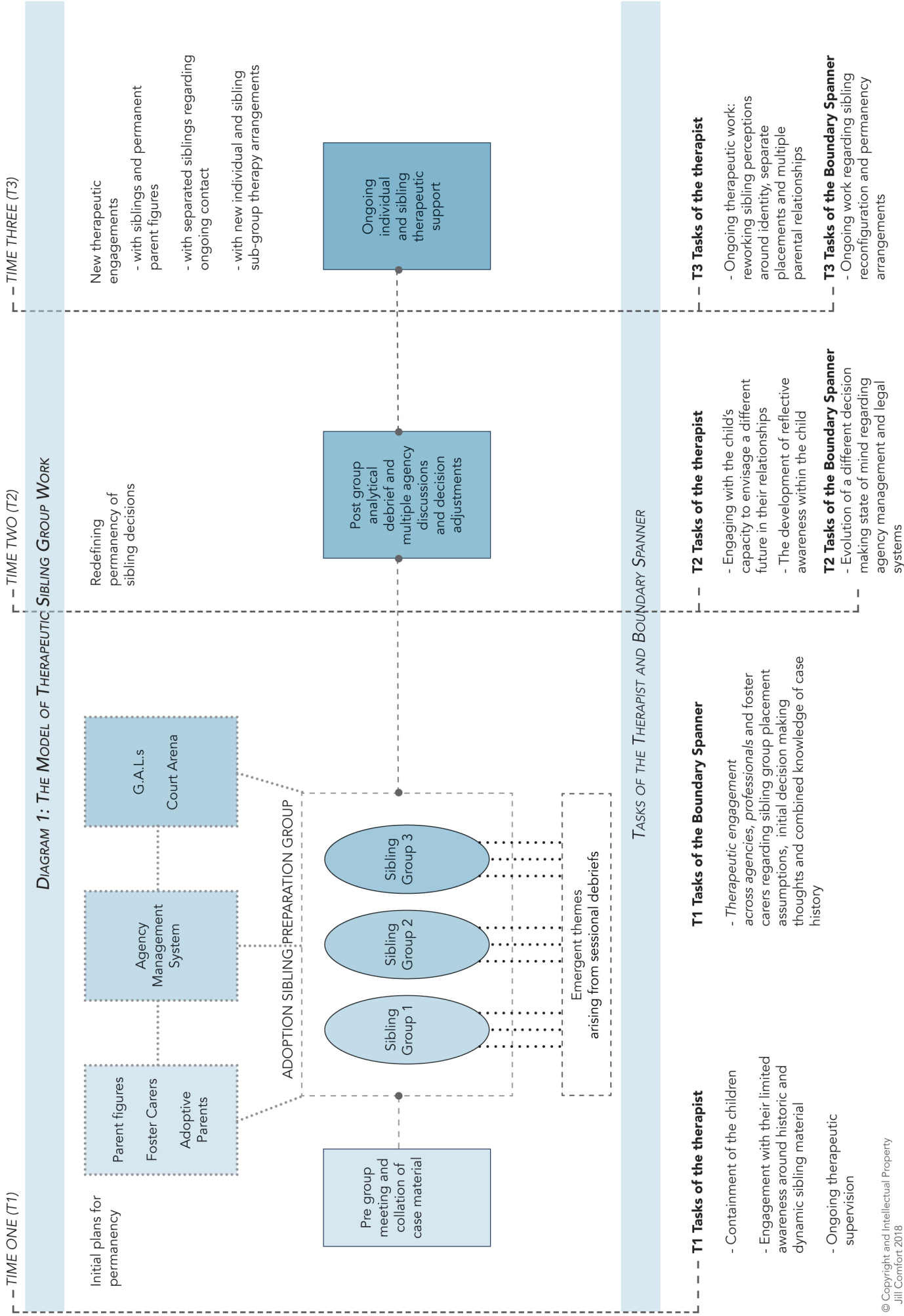
The model (Diagram 1, see overleaf), which I will discuss at length in Chapter 4, conveys the requirement of the therapist to hold an open state of mind and act as the connector or therapeutic agency boundary spanner, engaging between both the organisation and the children. This work

is underpinned by psychoanalytic and play therapy supervision. Throughout the process of the therapeutic model, altering states of thought can be recognised again with regards to both the children and the adults involved in their care.

The model engages with these parallel processes, and over its longitudinal course attends to;

1. Time 1 (T1): Siblings enter the group work, decisions around placements are considered
2. Time 2 (T2): Permanency consideration result in the redefining of sibling placement decisions
3. Time 3 (T3): Further new therapeutic engagements are offered to support the siblings as they transition or are separated and attends to therapeutic contact. The children have the facility of new individual therapy arrangements as required.

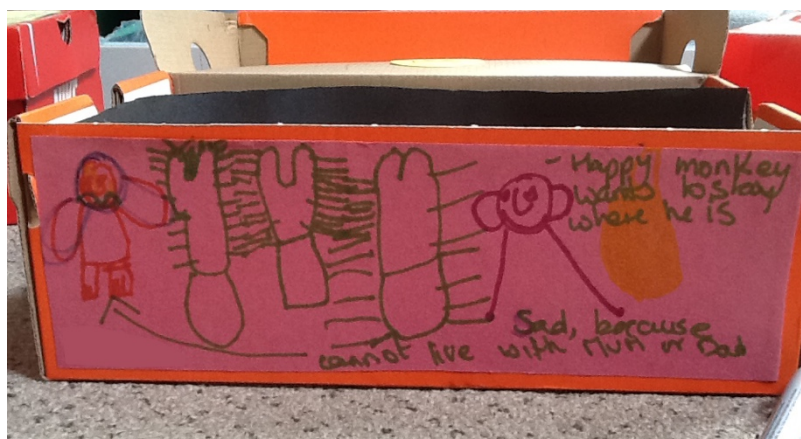
The importance of the adherence to the logical sequence of this work became evident to ensure that emotional needs of the whole sibling group is attended to, and that the organisation had an understanding of the sibling groups emotional requirements in order to address permanency placements and sibling group identity more accurately. I undertook supervision in accordance with clinical governance, and in conjunction with research supervision, I also began to attend to the nature of my own role as a 'change agent'. Methodological questions were provoked in psychoanalytic supervision around the particularities, peculiarities and similarities which emerged from the sibling groups' psychic material throughout the therapy interventions.



2.4.2 The Identification of Sixteen Key Codes

“A theme captures something important about the data in relation to the research question and represents some level of patterned response or meaning within the data set” (Braun & Clarke, 2006 p.82).

As both part of my play therapist clinical training and psychoanalytic social work, themes have always been noted in supervision by way of examining the children’s quotes, words and play-produced material. Therefore, as a result of undertaking doctoral research, I was able to retrospectively review the material of all the groups which meant 22 groups of six sessions, therefore 132 group play therapy sessions. Each session produced segments of material which I went back and coded in terms of both the material literally visible and the material available to me in the total counter-transference. At the end of each session, I had also photographed the children’s work and was able to use these photographs as a methodological instrument in order to represent purposeful conversations both with the children and in reviewing their material with the professionals involved (photo-elicitation). Cardellini (2017) suggests that photos offer a way of reflecting on the relation between participants and objects, as a way of representing and understanding a complex phenomenon.



This photo depicts the existence of the codes: 'open grief' and 'fear'.

The photograph is therefore an instrument in order to develop reflexivity and offers an encounter between the photo and the person. Cardellini suggests therefore that “every child will be a carrier

of a very own perception that, in a focus group context, could eventually be shared with others, maybe finding differences and similarities... empowering children to express their ideas and thoughts..." (p.8) She suggests this is considered by scientific methodological literature to be a "child centred research method" (p.8). Researchers have employed photography in a number of ways in their studies. However, in this study the group workers take photographs at the end of each session with the children, in order that the children can reflect on their own perspectives and what these might mean.



This photograph depicts the existence of the codes of 'grief' and 'anger'

2.4.3 The Use of the Therapeutic Metaphor in Thematic Analysis

This particular research has been undertaken within the paradigms of non-directive child-centred play therapy and psychoanalytic social work. As such, the direct engagement with the children is saturated with metaphors which carry multiple emotional messages. Once collated, these form the codes of the thematic maps in this chapter. I am now going to describe what I mean by the use of metaphor.

Langer (1967) suggests that "metaphor is our most striking evidence of abstract seeing, of the power of human minds to use presentational symbols (cited by Krone and Morgan, 2000 p.87). Every new experience, or new idea about things, evokes first of all some metaphorical language" Fineman (2000 p.88) goes on to use the image of 'the container metaphor' to convey the concept

of something which holds emotional experiences and carry metaphorical themes which emerge in the process of an engagement. Within the context of play therapy, Mills & Crowley suggest that the metaphor creates a bridge between the child and the events in their story in order that they might indirectly approach complex material in a non-threatening and generalised way. The metaphor becomes shared and parallel learning becomes possible as the child begins to identify with the metaphorical crisis and potential outcomes as the character beings to resolve their contentious situation. The use of therapeutic metaphors is a staple practice method of the non-directive play therapist and found throughout all play therapy engagements.

2.4.4 The Artistic Metaphor

“With gentle brush strokes the artist beings to transpose a reflective experience onto canvas. Blending’s of colours and shapes emerge, soon mirroring the expanse of a deeply private masterpiece” (Mills & Crowley, 2001 p.161)

Psychoanalytic child-centred non-directive play therapy provides a narrative canvas on which the child creates a dialogue, taking artistic metaphors drawn from multi-sensory medium to create story telling metaphors.

The metaphor, in terms of play therapy, develops from a visual object which the child focuses upon and takes on personal, symbolic qualities in order to reflect illusive parts of their inner world. As the child offers the symbolic notion and begins to give it meaning, the idea becomes literal and takes on qualities, characteristics and plans in order to survive. In other words, metaphors develop and offer ‘tales’ to the child in order to communicate information around their needs and self-recovery. Mills & Crowley (2001 p.104) suggest that children create tailor made stories (metaphors) based on their personal idiosyncratic and psychodynamic qualities. They suggest “the effectiveness of a therapeutic metaphor depends on its ability to communicate a message to the listener...(providing) an immediate entrance into the patient’s private inner world...” (Mills and Crowley, 2001 p.106). Play therapy is defined as “a means of creating intense relationship

experiences between a therapist and children...in which play is the principle medium of communication” (Wilson & Ryan, 2000, p.3, cited in Le Vay & Cuschieri, 2016 p.105).

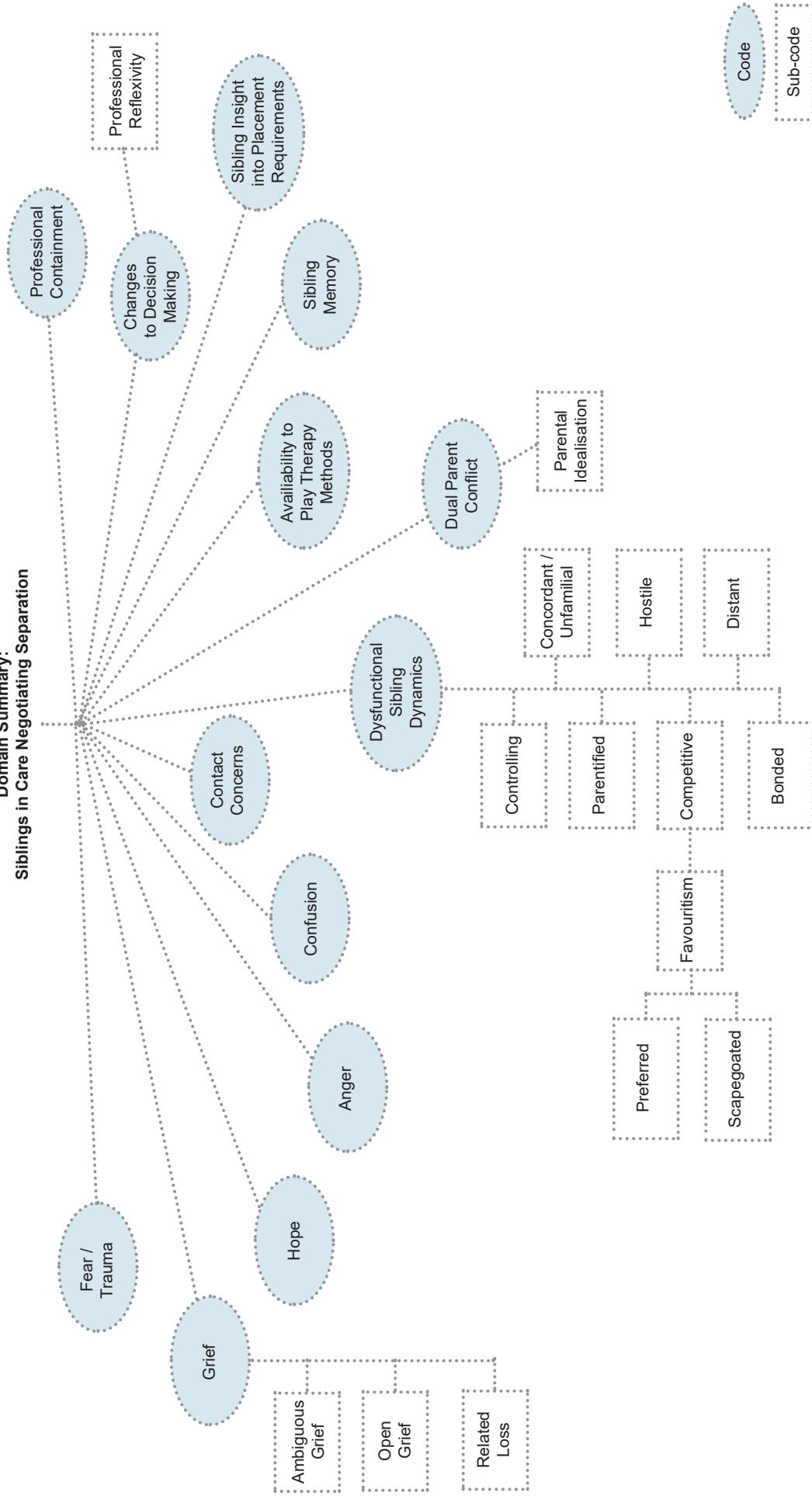
As part of the research process, the gathering of metaphors from each child’s group sessions offered a way of identifying a range of codes and eventual themes.

At an implicit level in the practice process, I noted the emergence of particular themes throughout the sessional group work with the children and at a certain point, had realistic recognition. I then went back to my case notes, which part formed my data, and began to extract and name categories. This was noted in the post sessional debrief and from this, codes were formed directly from the children’s material. It was at the point of writing my literature review that I began to recognise I had already acquired a clarity around continual these codes that seemed to be emerging.

Over the course of time, as part of the research process, I began to amass an occurrence of codes which I revisited many times in clinical supervision and began to create higher order categories. I noticed interesting features emerge across the data sets and began to collate them in a systemic fashion in order to consider codes. Braun and Wilkinson (2003) refer to this process as the creation of a thematic map. I have transferred these codes into a table (Chapter 7, Emergent Codes and Themes: Table of Group Work Emergent Codes). I devised a Stage One Thematic Map to enquire into the initially collated codes and sub-codes, with the domain summary as ‘siblings in care negotiating separation’. The codes were extracts gathered from the children’s material (data) and used to sum up both their comments and the total counter transference available to me. I reviewed these during the course of supervision in order to check them against the entire data set. This analytic refinement continued and allowed for clear definitions to emerge in order to give essential meanings for each code in relation to siblings facing separation and related organisational placement decision making. As this procedure was repeated, it drew upon continual illustrations and quotes from the children’s work, which provided compelling examples to be chosen as part of my case study methods, discussed within Chapter 6 Case Studies.

STAGE 1: THEMATIC MAP
DEVELOPMENT OF CODES/SUB-CODES

Domain Summary:
Siblings in Care Negotiating Separation



May (1997, p.134) suggests that as a result of the researcher occupying the environment, they can begin to understand the culture of the particular community and begin to seek to understand the realities within that social world, questioning similarities, typicality's or a-typical anomalies within the group. The inquiry progresses to enquire into interactions within the social setting of the community in order to make discoveries. This will be discussed further within my findings.

This process repeated until the codes became exhausted or saturated (Corbyn and Strauss, 2008) and a more concise set of themes emerged. This is illustrated in the Stage Two Thematic Map below. The Stage Two Thematic map contains four themes;

1. Organisational Theme: Code, Changes to Organisational Decision Making

This theme describes the organisational capacity to learn and change, informed by the therapeutic work of the children, as a result of the boundary spanning role of the therapist or group work social worker. In this way, decision making became a reflexive process.

2. Feelings Expressed: Codes, Hope, Open Grief, Related Loss, Anger, Fear/Trauma, Confusion, Contact.

This theme describes the feelings expressed by the children in the context of non-directive play therapy group work, as noted in my practice records.

3. Mechanisms Employed: Codes, Sibling Memory, Control/Parentified, Parental Idealisation, Dysfunctional Sibling Dynamics, Conflicting Parental Models.

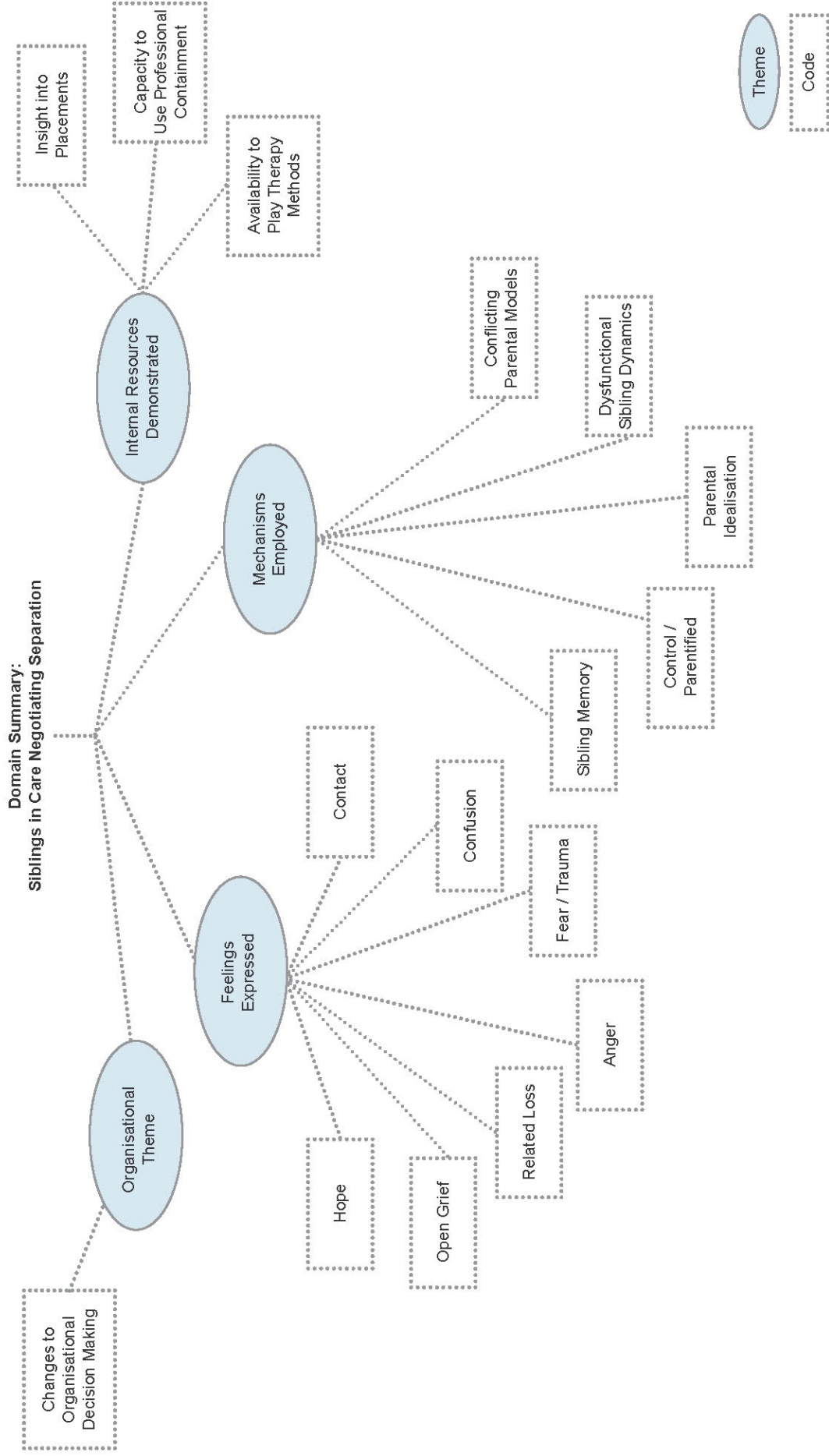
This theme describes the defences the children exhibited as a means of handling their anxiety.

4. Internal Resources Demonstrated: Codes, Availability to Play Therapy Methods, Capacity to use Professional Containment, Insight into Placements

This theme describes the internal resources demonstrated and the capacities that the children showed including insight, degrees of resilience, capacity to use help and

STAGE 2: THEMATIC MAP

CATEGORIES AND MAIN THEMES - DEVELOPED MAP DETAILING FOUR MAIN THEMES



availability to the play therapy methods meaning an openness to the help on offer in the play therapy space.

Retrospectively, I realised that I had begun to undertake inductive thematic analysis. Frankfort-Nachmias and Nachmias (1996, p.337) describe this as being a research method best applied when there is little theory informing the researcher either about the kinds of responses they expect or when the study in itself is exploratory. They further suggest that this research methodological approach is particularly useful when dealing with participant observation. Schulz (2012) clarifies the process of undertaking thematic analysis extracts repeated words and sentiments which migrate to become concepts and ideas. In my research project, the sibling children's material was extracted from both their varied play therapy engagements and the transference material available within the sessions. I collected rich material in the form of interview quotes that represented emotions and notions that the children expressed through their non-directed play engagements with the main group statement being "Whatever happened, Whatever next!?". Schulz goes on to suggest that lists are made from the repeating concepts. In my own work, lists were made following each session in relation to 'emergent themes'. As the themes repeated in the children's narratives, expressed through the multiple medium of play therapy available to them, it became possible to notice those of centrality to the children's focus. As the group work continued, it became possible to compare and contrast themes, considering their relationship to each other. The group work became in itself a practice staple of the organisation and multiple phases of the group work were undertaken, I was able to go back and compare phrases, drawings and art work, as segments to be studied. In so doing, I was able to look for similar themes and their inter-relationship, beginning to arrive at a theory as a result.

It became clear that I was generating material which could be subdivided into smaller number of categories (sub-codes are narrowed down into group codes which reflect the purpose of the research, i.e. closed coding). As these continued to emerge, I realised I had reached a point of saturation in this process. In the research supervision space, questions were put to the themes around how and why they emerged and related to the experience of siblings in the care system

facing separation and alternative permanency care plans. As I retrospectively went back to go over and compare themes, I began to adjust my ideas. At this point, I was engaging in the process of constant comparison, and higher order categories of themes were created in the research supervisory process. This method of research takes a bottom up approach, letting concepts, ideas and themes emerge from the data available within each play therapy session. This method introduced a process, bringing order to my data and was resonant of a qualitative methodological process known as inductive research methodology.

I began to notice the consistent re-emergence of particular phenomena and patterns around the children's responses in groups, organisational responses to my communication of children's needs, the emotional work of the social workers and myself, and the family and sibling structures and systems.

I began the research process with eight codes which multiplied to sixteen, before being reduced to four themes through the process of thematic analysis and inductive coding.

2.5 The Importance of Understanding Organisational Dynamics in Project Development

2.5.1 The Impact of Doctoral Study around Organisational Reflexivity: November 2010 - March 2011

As the thematic maps show, one key finding of my study relates to the organisation in which the play therapy occurs.

My organisational awareness was honed through prior training involving institutional observation and participation in a group relations conference which were part of the requirements of the doctoral programme. My learning focused on organisational styles of engagement around group tasks, and considerations around who determines the task. I began to consider staff and group dynamics and processes with regards to the emotional agility, availability, responsibility and energy required in order to undertake the work with the children. I began to consider the importance of deeply held, professional assumptions, and how group tasks changed when

redefined by new leadership or organisational aims, and the effect of this upon the definition of emotional labour within the organisation and profession.

In reference to psycho-social research, Cooper (2009) recognises that research generates 'new knowledge' (p. 431) which potentially discovers something new in the way it engages with the details or facts which in themselves become more 'objective knowledge'. He calls this 'practice-near' research. I began to consider the 'funnelling' qualities of my role in respect of gathering factual information in order to hear what had somehow seemed to have been evaded organisationally or become intolerable to be professionally close to. The paradigm of 'practice-near' research clearly describes this aspect of the approach I have taken. Cooper (2009) offers a way of questioning how best to research into organisational emotions. This particular methodology engages with the subjectivity between the researcher and the research participant as a way of enquiring into unconscious communications without creating destructive anxieties. In order to do so, the researcher is placed in close proximity to the field of research.

2.5.2 Data Gathering from Organisational Interviews: April 2011

Having worked with a series of four sibling groups preparing for adoption and in conjunction with research study into research methods, I began a series of biographic interviews with managers in the agency in order to engage with their countertransference and make use of the interview process to create a reflective space to consider sibling placement practice (Appendix 1: Transformative Conversation). I offered short vignettes from sibling scripts in order to create thoughtfulness around sibling identities and patterns and attempt to create a way of engaging deeply with the children. Hughes and Pengelley (1997) refer to this as 'calling a halt'. My interviews with selected managers created an intentional halt in order to create the possibility to think and proceed differently around permanency decisions with sibling groups in care. Questions evolved in the course of the semi-structured interviews around how siblings could be thought about, prepared, reconfigured and supported in readiness for potential separations and transitions, in order to prepare the children for possible permanency placements. These interviews exposed fixed notions around sibling relationships and practice, however the particularly careful interview

style created a way of engaging without triggering defensive anxieties or rendering the interviewee to the paranoid-schizoid position (Klein, 1946, cited in Hinshelwood, 1989 p.158). This interview style deliberately enabled the interviewee to reach a more 'depressive position', and created space where pauses allowed for new thoughts around change in practice and eventually policy.

Transformative parallels can be seen in the list below, as the two major components of the work operate in tandem i.e. the organisational engagements and the sibling therapy group work. The cumulative effect and concentration of these events created an energy in the organisation around the subject being practised, studied and researched. Each created further emotional intelligence within the children, the organisation and myself as practitioner and researcher. As a result, the nuances around the 'sibling psyche' and placement needs became more thinkable within the organisational decision-making framework. Each event offered data to the organisation, resulting in transformational discussions and possibilities of normative shifts. New ways of thinking about siblings became the norm and part of expected practice. As professional meetings were continually undertaken, staff expected to develop decision making processes as a result of attending to the data from the group work. By engaging in this catalogue of meetings and therapy, new knowledge or perspectives on reality have been acquired by all as 'practice-near' research impacted upon social work practice, creating new possibilities in this same practice.

2.6 Encountering Defensiveness

The understanding of boundary spanning activities, and therefore my particular role in migrating painful material between the children to the professionals was pivotal to my conceptualising organisational defences. However, the role of the boundary spanner produces a practice that cannot be codified, as it sits within innate characteristics of the person which can be thought about but are not particularly teachable.

During the course of the research process, I encountered the phenomenon of organisational defensiveness, specifically with respect to the capacity of the organisation to engage with the emotional complexity of sibling group needs and perspectives. organisational functioning. This led me to consider whether and how organisational creativity might be released to engage with these issues. In particular I came to believe that the organisation was defended against:

1. Notions of sibling identity and how this might impact upon their placement decision making and the configuration of sibling groups and sub groups in the organisational 'mind'
2. The impact of historic family abuse and neglect upon sibling experience and identity
3. The preparation required by both the individual and groups of siblings in order to emotionally manage transition and separation.
4. The effect of emotional pain and secondary trauma arising from contact with the above upon social work staff and the organisation and their capacity to engage in 'practice-near' work with siblings, in order to consider sibling placements in a more child centred way.
5. A commitment to ongoing sibling contact in order to maintain and improve sibling relationships.

At the outset of this intervention, managers and social work staff alike had a genuine belief that they were reflective, and not holding to fixed notions around sibling practice. However, by engaging in intentional interviewing methods, it was possible to 'call a halt' (Hughes and Pengelly, 2002) and create a particular space where complexity could be considered without incurring persecutory defensive anxieties for the professionals.

I engaged in a process of bracketing themes from the group work sessions which the sibling children offered in their play therapy craft, art, puppetry and role play etc. The analytical stance taken reflected both my theoretical and researcher position and incorporated my own and others' practice experiences. I collected themes from work with the children in order to facilitate the credibility of my arguments and proposals.

My research engagement with the organisational processes was through the use of a semi-structured interview following Wengraf's (2010) Bio-graphic Narrative Interpretative Method (BNIM). This particular biographic-narrative-based research method is situated in both psycho-dynamic and socio-dynamic paradigms and I chose this in order to focus upon the exploration of the individual managerial experiences between service professionals and their relationship with their client group. Firstly, I became the subject of a biographical interview, undertaken by my then adoption manager, to

1. Experience the process of a semi-structured interview from the point of quality and quantity of questions,
2. Experience the impact of the interview process on my thought processes around the subject we held in common.

The biographic interviews created a reflective space for the interviewer to ask open questions in order to enable the interviewees to develop reflexivity in the interviewing process. By carrying out biographical interviews with both managers and senior managers, it became possible to think about the notions of sibling groups in care and the planning and support necessary to provide the best emotional permanency arrangements for all the children. As the interviewees considered the data from the sibling groups, previously ossified ideologies around siblings became engaged with in such a way to create new questions. This particular method usefully provides a way to explore complexities between policy and practice by focusing on the narrative of the past experience in order to promote reflexive thought around potential practice and policy engagement. The precision of the interviewing process incorporated in Wengraf's method allows the interviewee to access subconscious and partially illusive material by "guidance and a lot of structuring and micromanagement by the interviewer" (2006). He says that "it is perfectly possible for you to generate material by way of the BNIM, but then decide to use a non-BNIM way of interpreting some or all of that material" (2006, p.5). Following this, I undertook my first BNIM interview, with my placements service manager. The interview took around 3 hours. I realised from this experience that other service managers would not necessarily wish to offer this amount of time and so I decided to adjust the method but continue to make a full verbatim transcript (see

Appendix 1). The interview engaged interviewer and interviewee in the interface between the psychic processes of the interviewee and the carefully engaged guided response of the interviewer. As the interview progressed, my focus was upon “what does all this tell me about my object of study?” but more importantly, what is not being said but available in the narrative apparatus to be noticed and give clues to the “deep structure of the subjectivity-in-situation telling” (Jameson, 2005: xiii). The transformative nature of these conversations lay in the realm of exposing the not yet thought. The BNIM method is derived from narrative analysis where the teller feels authorised, and the listening space allows a canonical style of conversation to linguistically emerge, denoting particular marks and emphasis in the storyline. During the discourse, stanzas develop which hold emotional material and emergent themes. I engaged in a truer version of BNIM methodology in my one-to-one organisation interviews. I held to the notion that the nuances within the children’s stories would be attended to in order to enable the managers to explore something further. I believed would lead to the emergence of their important themes and processing of emotional content leading to new moments of professional awareness around sibling practice.

2.7 Ethical Considerations

By virtue of my being a practitioner within the department, I had ready access to confidential material about the children and their families in order to practice therapeutically alongside the childcare practitioners, of which I was also one. Before beginning the doctorate programme, I had already considered the ethics of this practice in terms of how anonymised rich descriptions of therapeutic material could be appropriately used in legal processes.

It was important to attend to ethical responsibilities from the positions of group work therapist, social worker, and researcher. Firstly, I had to ensure I created a clear way of obtaining parental permission even with children who are in the care system, as parents still retain a degree of joint responsibility for their children at this point. Whilst senior managers ensured me that by virtue of being a departmental representative they could give permission for the children to access the group work therapy programme, the concept of joint consent left me feeling uneasy about the fact

that these parents should still be professionally engaged with, in order to be informed and gain their consent. As a way of attending to this, I undertook a series of discussions with the legal department, who I then put in touch with legal experts in this field (See Appendix 8). As a result, I came to the decision that the only point to insert a legal clause, and cause least contention, would be at the point of the department submitting the final care plans. It is at this point, potentially the last, when the department still had the propensity to access any available parental empathy around their children's emotional needs.

With regards to the children, I explained at the beginning of every group that their material would be treated confidentially, and only carefully passed on (in a way in which I would talk with them about) to help their professionals and the judge to think about the best plans for them; and for me to teach professionals to know better about helping siblings in care. All the children in each group agreed this was really important to them.

At the beginning of the group work, I address the potential need to use important aspects of this work in the future, by using the statement, "I might use ideas and thinking from your stories to help me think about and teach others how to better know about and take care of groups of brother and sisters in care, but never use your names or anything that gives clue to you." In this way, I was being mindful of ethics around the emotions and privacy of the children's material from the outset of their group work involvement. Pellegrini (1996) goes on to say that "Children seem not to be bothered by the presence of researchers. Children don't usually change their behaviour when they're being studied, and when they do, they're pretty obvious about it... After a time, they go about their own business." (Ibid. p.377)

Ethical consent was given in accordance with the organisation's Research Governance Committee on 21st May 2012. Ethical approval was sought and obtained from the Local Authority by whom I am employed, and from the UEL Research Ethics Committee. Particular ethical consideration has been given to my involvement as a specialist play therapist attached to the adoption team of the local authority responsible for the sibling children attending the group work. All of the

children, carers and related care professionals were aware of my particular research mindedness. In the event of a child or foster carer reporting serious distress, the potential for further therapy was identified. All the children were eligible to participate by being identified as part of sibling groups who were being considered for separate permanency placements. Due diligence was given to the careful developmental positions of the children in regards to explanation of the group work. Participants were all initially informed of the research component of this work by being spoken to and given invitations and explanations as to the purpose of the group work to both help them consider what might happen to their sibling group and that they could also teach other professionals how to understand sibling children in care.

Chapter 3

Literature

3.1 Introduction

By way of explanation, this literature review includes emergent group work material, as research was carried out prior to registering for this doctorate. The literature review has offered retrospective insight to the material from both the sibling groups of children and organisational engagement with them.

To develop and enrich the model which is the basis of this thesis, I have drawn up my literature review around four main categories which have contributed to this research:

- Play therapy literature
- Sibling adoption literature
- Psychodynamic literature around the children's group work codes and themes
- Organisational emotions, practice and decision making

I intend to explore literature in relation to three key areas of study. Firstly, the literature that informs the play therapy group work with children; secondly literature that introduces and illuminates my role in the organisation which I refer to as that of a 'boundary spanner'; and thirdly literature that relates to ways in which the boundary spanning role has impacted upon policy development around how sibling placements are thought about within the organisation. I will refer to transformative conversations with senior staff which have led to changes in practice and the overall policy around maintaining sibling placements.

My assumptions are that this research requires a specific literature review distinguishing the different components of psychodynamic theory in the field of sibling relationships and theory addressing the impact of separation, loss and abuse upon this sibling community of children.

My intention is to develop a therapeutic approach to permanency practice, in order to offer a model to assist the preparation of both the individual sibling and their sibling group; to contribute to thoughtful decision making processes within social care organisations; in order to

form the basis of sound sibling adoption and permanency policy and procedures, in order to honour the connections between siblings in local authority care.

I will consider the role of child centred play therapy in the context of group work and siblings focusing on how this medium enables and empowers children as they prepare for re-parenting (O'Connor, 2000, Ray, 2011). This particular focus has highlighted a gap, in terms of written material around this particular niche of research and practice. Much is written about siblings, and I shall draw on the psychoanalytic paradigm in order to consider sibling children's identity, their internal world and group dynamics, relating this to placement permanency and separation. As a result of material that has arisen from the group work intervention, I will place a lens upon how siblings in care negotiate their sibling group, in relation to notions of separation and alternative family structures. The background of this particular practice intervention is with siblings whose dysfunctional dynamics are infused with intergenerational abuse, abandonment and parental void (Milevsky, 2011). I have developed my thoughts from the writings of Silverstein and Livingston Smith (2009), Mitchell (2003), Skrzypek et al (2014) amongst others, with regards to the particular experience of siblings. I shall then relate this to practice and support resources necessary, in order to understand and keep sibling connections meaningful and intact. I shall explore the impact of trauma on the sibling group, and how child centred play therapy has the propensity to engage with this psychic material. (O'Connor, 2000; Ray, 2011) I will look at what child centred play therapy offers to decision makers in terms of focusing their considerations around the child's emotional material.

I shall also consider decision making around sibling placements with respect to organisational emotions (Fineman, 2000) and the professional's capacity to engage with the emotional labour of 'near-practice' (Cooper, 2009) with regards to sibling groups in care. I will note the complexities involved in the work with the children and the multi-decision making processes involving both the Local Authority and associated decision making bodies.

3.2 Child-Centred Play Therapy Group Work with Children Literature

"Play therapy is unique in that it can draw on the neurobiological mechanisms of play and relationship" (Pritchard 2016, cited in Le Vay and Cuschiere, 2016 p.84)

Whilst there are no therapeutic models or practice examples to be found for multiple sibling play therapy group work, I have drawn on the group work play therapy of Sweeney and Homeyer, (1999) and the practice innovation of Triselliotis (1988), as I have considered the development of my practice model which combines psychotherapeutic child centred play therapy and psychoanalytic social work. I will draw upon the paradigm of child-centred play therapy group work, (Sweeney and Homeyer, 1999; O'Connor, 2003; Ray 2011) as I consider the appropriateness of this medium to engage with sibling groups of children who share their traumatic psychic material.

3.3 Literature around Sibling Subsystems and Therapy Interventions

I have looked at literature with particular reference to sibling dynamics in order to consider the undermining effects of abuse and abandonment upon the sibling. What I valued about Hamlyn and Timberlake (1981) is that they draw attention to the fact that "traditionally when looking at family mental health, professionals have placed primary emphasis on the spouse and parent-child subsystems. They however placed little emphasis on understanding and interacting with a third subsystem of the family-the sibling group." (p.101). Walters and Stinnett in their study (1971) discuss the importance of the sibling interaction in association with parental influence, go on to say that few studies have considered the impact of siblings upon each other. Whilst Shugart (1958) observed that very little attention "had been given to the siblings of children who are separated from their family through foster placement, residential treatment, or hospitalisation" (cited in Hamlyn and Timberlake, 1981 p.102), much attention has been placed upon the ethical and theoretical need to consider siblings together in placements over the last decade. The recurring themes of the studies by Gallagher and Cowen, (1976); Abrams and Kaslow (1976), each cited in Banks, S.P. and Kahn, M.D, 1982 p.139) observed siblings from a

behavioural perspective and noticed that siblings were involved in each other's problems and their behaviours altered as a consequence of observing their other siblings (1976; cited in Bank, S, and Kahn, D, 1982 p.298).

Systemic family therapy approaches offer interventions into family subsystems. Bell (1961) explores the sibling subsystem in family treatment as a way of facilitating change in a family system (cited in Ranieri and Pratt, 1978). However, for children who are already removed from the care of their parents, Bell suggests that systemic family interventions would become incredibly difficult to undertake. Following the decimation of family dynamics as a result of having been received into care, the sibling group only have each other. Johnson, Yoken, and Voss (1995) consider the trauma of siblings who have been severed from each other usually as a result of organisational necessity at the point of reception into care. They suggest that the loss of their family systems amongst all else creates profound difficulties with regards to the children's potential to make relationships, and with regards to their behaviour and self-esteem. Clement et al., (1976, cited in Hamlin and Timberlake, 1981) conclude that peers are more effective therapists than mothers. They purport that "to better understand and treat the troubled child... it is important to understand the strengths and limitations of the sibling group" (p.104). This article considers the blended sibling family dynamic, which I have found to be highly relevant to the adopted sibling, many of whom find themselves blended with other siblings from other groups into their constructed adoptive family. I was constantly left noticing that siblings in care did not have choice or opportunity to negotiate these dynamics, unless substantially therapeutically supported to do so.

Hamlin and Timberlake (1981) helpfully outline four major treatment objectives in their sibling group work;

1. The capacity to specifically highlight the strengths and limitations of any given sibling subsystem.
2. The group work treatments allow the siblings free expression around the complexity of their feelings towards each other.

3. The group work enables the children to discover something of the need to rework the sibling relationships. In the adoption and permanency context this means children required help to notice how their particular siblings' subsystem need emotionally resetting. Papp et al. (1973) use a variety of play modalities including art, role-play, and sculpting alongside verbal expression.
4. Finally, they consider the importance of understanding the developmental, gender, age and ordinal aspects of the sibling group in order that modification of sibling relationship can be thought about.

Sinason (1992, p.81) cautions professional handicapping begins when the client is not permitted to consciously or unconsciously explore their feelings in the therapy process. I have considered amongst others, the following theorists and therapists who have attended to aspects of professional thoughtfulness and thoughtlessness. Symington (1992 p.137) writes about people with learning difficulties being denied feelings, as a result of professionals finding notions of disability unbearable. He noted that professional contempt stifled the client's development and spoke of the psychic pain that could not be professionally borne. Rees (1998) says that the countertransference requires noticing in the context of supervision. Thomas (2001, cited in Bull and O'Farrell, 2001 p.27) noticed that staff were feeling a sense of "depressed helplessness", and required support to get in touch with denied feelings.

Over the past decade play therapy has given much thought to a child's expressions of play in light of their cultural belief system. Thomas (cited in Le Vay and Cuschieri (2016) p.53) identifies the cultural challenges within both play and filial therapy practice and notes the existence of cultural invisibility as a result of the wide spread diversity found in the 21st-century Britain. She implores the therapist to ensure the child is defined by family culture, and that therapeutic goals are discussed and thought about with regards to cultural differences, including those of a physical and spiritual nature which may be different to those of the host culture. She says "children in these groups bring unique needs and difficulties related to the culture that require awareness, knowledge and skills such as reactivity to difficulties with

acculturation, assimilation, uprooting, language competency, as well as economic, housing and medical problems which may be expressed in the child's play." (p.53) She draws further attention to factors such as high risk of depression in certain ethnic and cultural groups, as well as intergenerational conflicts determined by emotions emanating from being minority and immigrant populations (p.54).

3.4 Literature around the Sibling Relationship; 'Siblingships'

Juliet Mitchell (2003) draws on Freud who spoke of the infant's propensity to feel "...dethroned, despoiled, prejudiced in its rights; (casting) a jealous hatred upon the new baby (developing) a grievance against the faithless mother which often finds expression in a disagreeable change in its behaviour. We rarely form a correct idea of the strength of these jealous impulses, of the tenacity with which they persist and of the magnitude of their influence on later development" (p. 13).

Sibling severance is considered less in literature than the child being separated from its parent, yet abandonment lies at the base of the children's fears. Sibling bonds become distorted and magnified in their emotional content and weightiness as a result of parental void. Siblings who no longer live with their birth families but live in care are connected by a particular intensity of deeply held psychic material around verbalised experiences and many unuttered truths around harm and neglect.

Verrier (1993) describes the importance of maternal separation as "the primal wound".

However, from my experience of sibling groups in care, critical separation between them is akin in strength to the primal maternal wound they face when they are separated from each other. The children refer to sibling separation as an excruciating loss 'equivalent to the psychic cutting of a sibling umbilical cord and enter temporary states of 'nameless dread' (Bion, 1962a). As the traumatic awareness of these plans become a reality to the child, fear, confusion, shock and grief flood the therapy group space. This is evidenced time and again in the

children's artwork as they paint Munch-like scream faces of trauma filled houses. This dysfunctional sibling bond is what underpins their particular sense of identity in a specific and intense way and lateral rivalrous relationships emerge. Blessing (2014) describes this as the "all or none precarious world" of the sibling (cited in Skrzypek et al. p.141). The severance from one's own siblings who have been subjected to similar primal wounds, maybe too excruciating to bear.

3.5 The Exploration of the Lateral Sibling Relationship

Here, with gratitude for her work I want to critique Mitchell's concept of the importance of the lateral sibling relationships. Freud says that "in the individual's mental health life, someone else is invariably involved, as a model, as an object, as a helper, as an opponent." (Freud, cited in Mitchell, J, 2003 p.11) Mitchell (2003) speaks of a possibility, which was observed during each group work phase of the project. The importance of both the child's horizontal relationship with their parents, and their "critical first lateral relationships for siblings" (p.11). This hypothesis and concept of the ego and ego-ideal are helpful in considering how the sibling identity forms. She says "for humans this ideal can become an internalization of someone whose status the subject (ego) aspires" (p.12). She notes that the ideal is usually thought of in terms of the father, however considers it is possible this may be thought of in terms of another child or indeed an older sibling. Furthermore, Mitchell describes the 'group illusion' (p. 13) where all share a unified ego, which can become a 'group delusion' when the group believes in their capacity to stand against all others. From my experience, with regards to siblings in care, this delusion is often their only bastion of hope and therefore more critically important than the relationship with their parental figures at this juncture in their lives. The notion of the ego-ideal being formed on a peer as much as on the Oedipal father, is most obviously seen in the group work sessions, when a sibling is thrilled by the sight and presence of another. Time and again there is evidence in the group work space of the children holding a particular knowing and excessive sharing of thought and emotional attunement available between them on a lateral dimension. Mitchell says that this 'mimetic identification' (p.13) is engendered by relationships

with peers and older, particularly sibling children, as well as parents. Klein's (cited in Mitchell, 2003 p.14) contribution around siblings highlights the infant's awareness of other infant babies at the mother's breast and the infant becomes like others, yet different, allowing for the propensity for powerful vertical emotions of love, hate, rivalry, jealousy and envy.

Mitchell's (2003) language of horizontal (parental) and lateral (sibling) relationships offers a way of considering how both are of crucial importance to the infant's sense of self. In the therapy group space, the sibling's powerful lateral relationships become eminently clear as do their different relationships to their parents. This led me to consider the sibling's powerful, insatiable primal drive for emotional self-worth, affection and approval in the eyes of their parent; whilst their need to survive in their current world in the context of each other, and in respect of being further separated from siblings then left them with a sense of having nothing to emotionally support their identity.

3.6 Literature around sibling relationships and sibling group compositions

"Siblings have a complex relationship that varies in intensity throughout life" (Lewis, 1988 p.187)

Other theorists in a similar vein to Mitchell consider the critical importance of the sibling relationship. Professor Leonore Davidoff says that siblings are psychically threatening to each other as the unconscious primal emotion is one of fear of annihilation as a result of the arrival of new siblings (Sibling Relationships; Larkin Poe; Mary Barbour, 2011). Historically theorists have focused on the issues of rivalry and jealousy, whilst more recent work has focused on empathy and support. However, the sibling mind is preoccupied by the full range of these emotions. She says that the historic 'long' families (including multiple children) exist well as a result of the older children being the "intermediate generation" between the older parents and the younger children. In terms of healthy family dynamics this creates a structure in which the

children have a sense of who they are in relation to each other and a total group sense of wellbeing. Davidoff says that siblings are both “the mode and the bridge” to each other in their family relationships. In other words, using Mitchell’s notion, the children develop healthy relationships on both vertical and lateral axis as a result of having healthy sibling relationships through which they develop their identity. However, in families where the children have been taken into care, the older children have not just become intermediaries, but have become parentified. As a result, this skews the psychic material available between the siblings about being sibling and creates the possibility of the resurgence of toxic ‘ancient kindergarten feelings’ (Mitchell, 2003).

Kriss, Steele and Steele (2014) say that early life experiences with siblings “engenders a special knowing of the others experience – one that few others are ever privy to.” (Hindle and Sherwin-White, 2014, p.84) The power of their shared pain around these multiple incidences creates deep networks of spoken and unspoken nuances between the siblings in their sub groups and whole sibling group. This particular sibling culture remains with them throughout their lifespan, and they regress to it upon reconnection. Even when new adoptive/alternative family cultures are superimposed upon a child’s existing model, once the siblings reengage, their psychically informed historic blueprints become re-evoked.

Houzel (2005) considers the impact of the group structure on the family members, along with the influences of generations, and their individual differentiations. By considering the filiation of all of the family members it becomes possible to consider the feelings of belonging they have in respect of each other. Fraiberg (1975) draws on Houzel’s idea of “extended envelope” (2005, p. 140) and notes how life-threatening memories form around family identity. She says that the professional task must be to “work to reconstruct the stability of the envelope so as to guarantee and protect the identity of all the members of the family and especially that of the suffering children the professional task is to work together around the family in order to help them to become less subject to the influence of massive projective mechanisms, and transgenerational pathologic repetition. Stern (1985) says that these representations, fantasies

and memories emerge from the network of schemas from the internal working models of the siblings; and indeed, it is these notions that are voiced and represented in the group work space.

Siblings are what they find they mean to each other. In optimum circumstances, they eventually develop degrees of respectful relationship between each other and develop an appreciation and ability to coexist. Hamlin and Timberlake (1991) talked about the fact that “The sibling group is rarely considered a viable treatment entity”. (p.101). Banks & Kahn (1976) highlighted the under-emphasis of importance put upon the sibling relationships in the context of western culture in particular. These relationships are often only partly known and often misunderstood by others in their family. Lewis (1988) asserts that crux of the sibling relationship is found in the nuances of their emotional complexities and in the variety and fluidity of degrees of intensity of these relationships throughout their sibling lives (p. 187). Children first learn to negotiate and communicate in groups as a result of manoeuvring in sibling relationships. Hamlyn and Timberlake (1981) say it is in this context that they learn to “fight, compete, win, lose, attack and protect each other” (p. 103). Bank and Kahn (1976) attend to the importance of siblings understanding group structures and boundaries, whilst Norris-Shortle et al (1993) discusses the importance of emotional support given and young children’s capacity to learn to give and take in relationships. Sweeney and Homeyer (1999) discuss the importance of parental management around sibling coalitions. They assert that the siblings act as supports to each other creating a “protect-and-rescue” service whilst being go-betweens in order to guard the other and protect their siblingship in the midst of extreme conflicts.

As such, they then enter the therapy group space and through the medium of play therapy, codes and themes begin to resonate between them. There is much potential for insight on many levels. The medium of the child centred play therapy begins with the premise that within each child their already exists an incredible potential for change and self-actualisation. (Axline 1947; Landreth 1991 p.323 Sweeney) The children begin to experiment with dialogues between

themselves, as a result of the mediation of the therapist and having a safe permissive therapeutic space available to them.

Ginott (1982, cited in Sweeney and Homeyer, 1999 p.324) notes that group membership is "never a random assembly. It requires design and complex construction. The final composition "Is a group in which children can exert a remedial impact on each other." For these very reasons the multiple-sibling group therapy model, specifically creates an environment where siblings of great developmental difference can converge around knowing and understanding something of each other's positions and identity in the context of their sibling group. Writers such as Hamlyn and Timberlake (1981) and Lewis (1988) work with individual sibling groups around availability and transition throughout periods of family instability. Whilst Johnson, Yoken and Voss (1995) consider the siblings sense of severe emotional and physical displacement upon their reception into foster care. Begun (1995); Hegar, (1988); Kegerris (1993); cited Norris-Shortle et al., 1995 p.325) underline the critical importance of retaining a sense of family connectedness. McFadden (1992) considers the impact of the sibling experience around knowing elements of their shared inner world's, perceptions of their parents, importance of holding memories for each other, and negotiating ambiguities and conflictions around their past, present and future care situations (cited in Sweeney and Homeyer, 1999 p.325).

3.7 Play Therapy Group Work with Siblings literature

The particular focus of this study is upon a specialist sub-set of play therapy literature with particular application to therapeutic work with siblings, and most particularly with siblings in care. I will now consider theorists in the field of play therapy group work in relation to working with siblings.

Norris-Shortle et al (1995) describe how "play therapy groups provide a setting where siblings can offer to each other a stable emotional bond that can facilitate the sharing of sad, angry and

confused feelings" (cited Sweeney and Homeyer, 1999 p.235). Whilst Gazda (1984), Gino (1982), and Nichols (1986) indicate that "sibling group therapy is contraindicated for siblings with strong animosity and hostility" (cited in Sweeney and Homeyer, 1999 p.325); as siblings in care often operate with powerful conflictual dynamics. Occasionally decisions are made to specifically separate siblings who are at risk of physically and emotionally causing further abuse to another of their siblings, (e.g: incestuous sibling material) however the majority of siblings enter this space already with elements of strong hostility as their siblings' bonds have become distorted by dysfunctional parental models. The multi-sibling group therapy model (See Chapter 4: The Model) includes up to 3 sibling groups of children. Working with this specific group work alchemy produces a particular space wherein subtle cohesions between group members emerge and are 'felt' by the children.

I will consider the impact of the active narrative discourse between the multiple siblings in the group work space as it emerges. Drawing upon narrative discourse literature, Lykes (2001) used cultural art as a "modality of work sought to weave traditional resources of story-telling, play and dramatization" (p.364), in order to elicit and gather "previously silenced stories." He used a research and practice technique known as 'Photo Voice', taking photographs to tell stories. In this play therapy group work intervention, photos were regularly used with the children as a means of gathering their symbolic art material to strengthen the children's 'little voices' as they noticed and saw their stories and were able to convey their shared psychic realities between themselves.

3.8 Psychodynamic literature relating to loss and sibling dynamics as an emergent code from the children's group work

I identified fifteen codes from the children's emergent material in the group work space. Much literature exists on the nature of these themes from a psychoanalytic perspective, however I have not found them to be conveyed or described to this extent in any other research or therapeutic group work. I will therefore speak to the emergence of these themes in Chapter 7.

“Literature does not address sibling loss.” (Blessing, cited in Skrzypek et al., 2014 p.138)

The research into this study has highlighted gravity of sibling loss time and again, as the sibling children require separations for the purposes of best emotional permanency arrangements.

Mitchell (2003) talks of the presence and memory of the richness of lateral relationships that are under stress and an under estimated part of the fabric of psyche and social life that is deeply held between siblings and not in the maternal relationship. Klein (1963), (cited Skrzypek et al.p.170) suggests there is an "unsatisfied wish for an understanding without words" which exists in twin fantasy. Wright (1997) refers to this sense of sibling 'other' self as representing the "one who understands me perfectly, almost perfectly, because he is me, almost me" (cited Skrzypek, et al., 2014 p.170) Skrzypek (2014) suggests that she has recognised this twin-ship entity in sibling relationships other than twins.

Mandow and Knight-Evans (cited Skrzypek et al., 2014 p.130) describe the pain of loss of a sexually abused adult siblings whose infant sibling was murdered. I have noticed that in similar circumstances with child siblings in the project (Group H, siblings Gold 1 & 2), that the live remaining siblings develop fantasies which are exaggerated around the potential ways in which their sibling may have died. As a result, connections around separation from each other also become further exaggerated by fear of annihilation, which is already a reality within their family. This has led me to suggest to adoptive and permanent alternative parents that such siblings require creative, compassionate parenting around extended sibling contact plans in order to attend to what Blessing (2014) calls the "indigestible quality of sibling loss" (cited Skrzypek et al., 2014 p.153). The model in the case of the aforementioned siblings, enabled creative therapeutic contacts to be set up (T3) between these two permanently separated siblings in order to attend to their experience of the death of their sibling, and what this represented to them and their sibling relationships.

Mitchell (2003) draws on Freud (1921) in order to convey the importance of the vertical emotions we experience for parents and the lateral ones for siblings. These emotions have an osmotic quality as in each “individual’s mental life someone else is invariably involved, as a

model, as an object, as a helper, as an opponent.” (Freud, cited Mitchell, 2003 p.11). Whilst inter-sibling relationships have been much considered over the last three decades, I have not found anything to be written about therapy with multiple sibling groups.

3.9 Literature regarding therapeutic group work with siblings in care preparing for placement transitions

Hoggans’ work (1988) was written but unresearched and offers an example of group work preparation with children facing adoption. She devised a group work programme (1982) in conjunction with the Lothian region home finding team based on a model devised by Sim and O’Hara (1982), underpinned by the writings of Fahlberg (1981) and Jewett (1984). The backdrop of the project lay in a backlog of children in the British care System in the 1970s and early 1980s. Following this historical period, there was a natural demographical decline, which meant there were fewer young children being placed for adoption, and the group work faded out naturally. I will consider in my findings (chapter 8) how the governmental back-story around adoption impacts upon the nature of the social work tasks and life of innovative projects. Hoggan’s program intended to prepare children between the ages of 5 and 12 for adoption in groups of 3 to 4 at a time. She used both direct and indirect social work practice methods in order to evoke conversations with the children about their pasts, fantasies in relation to their future, and what they might be able to accept in terms of a new adoptive family.

Throughout the program the children were encouraged to discuss their emotional feelings. Following the group work, Hoggan noticed that "given half a chance, many of the children are able to engage in a realistic level of discussion about the difficulties in adjusting to the new situation of placement for adoption... (and)...the most useful resource which the workers can develop for the program are the courage and confidence to elicit and accept the children’s pain. (1988 p. 111) In discussion with Hoggan, she mitigated that undertaking research into project innovation was the only way that such practice might change social policy. Without this, she said, the work could not form the basis of research, policy or social work practice and therefore

could not speak clearly to what needed to happen and convey the sibling's realities into the professional decision making arenas. (Telephone conversation, March 2016)

Wang and Burris (1994, cited Lyke, 2001 p.365) refer to this 'two photographic' method as 'Photo Voice' developed to use in cultural groups with women in China in order to allow the children to see themselves finding new truths. I include some of the children's photos of work in the body of this chapter, by way of giving thematic focus to their material, in order to expand the parallel understandings mentioned above. The codes and themes are described in Chapter 7 and graphically convey the core of the children's psychic conflicts. By referring to the photographs also in Chapter 7, the children were able to reaccess the therapeutic process using their own material and reconnect with their past stories, need for transition and begin to weave these meanings with their new placement family lives. The process contributed to the children owning their own wisdom and having a sense of control over the chaos that had the potential to overwhelm them. Lyke (2001) refers to the value of this method in its capacity to "re-thread community" (p.368). In the group work environment, the children noticed each other's work and asked to have their photos taken with their work on a weekly basis. The photography also developed a sense of commonality as the children visually digested the material they were all struggling through together. The photographs became "a stimulus for group reflections, discussions, analysis and re-presentations" (p.369).

I will explore relevant literature around therapeutic work with sibling children awaiting adoption and permanence. McHale, Updengraff and Whiteman (2012) highlight that undertaking research around siblings becomes a complex task as it is difficult to recruit samples that engage with the variables across sibling groups as well as being an expensive and complex dynamic task to undertake. They go on to say that the family dynamic field lacks the toolkit for quantitative analysis of larger systemic family processes. However, to be able to undertake such work would enable family research to consider and examine "more complex higher order processes such as parents differential treatment of two siblings or mothers and fathers co-parenting of siblings, and to test hypotheses about family processes derived from a range of theoretical perspectives" (p.923)

This particular study repeatedly confronts the diverse family dynamics in which siblings interact in particular ways as a result of abuse and the effect this has had on the development of the siblings' relationship. The long-term nature of the therapeutic model at the centre of this thesis, offers a way of re-considering the emotional reconfigurations of the siblings, and looks at their relational processes as a result of different parental influences. In McHale's findings, she argues that by "incorporating information about multiple siblings and their relationships into research on families can provide new insights about family dynamics." (McHale et al., 2012 p.925)

Lewis (1988, cited Sweeney and Homeyer, p.322) purports that sibling group therapy can provide elements of consistency and predictability as the children respond to the more immediate problems that exist within their families. The siblings, even if they have been separated into alternative placements, upon coming together provide an immediate familiar and non-threatening group experience in which they hold and share powerful psychic material between them. Frey-Angel (1989, cited Sweeney and Homeyer, p.322) describe the effectiveness of using the natural sibling group setting in order to enable the children to engage in a trusting way around their shared experiences.

As such, this method enhances the supportive elements and results in both long term and immediate benefits for the children. (Jones, 1995; Sachs, 1993 cited Sweeney and Homeyer p.321) Hunter (1993) states "Interactions between and among siblings become internalised with images carried into adulthood. These images can empower siblings in accepting and nurturing each other to counteract isolation and interrupt destructive intergenerational social and psychological needs." (cited Sweeney and Homeyer, p. 321). However, the studies undertaken in the course of these works have related to small studies on individual sibling groups. Eno (1985) used play therapy as the dominant mode of interaction between the siblings as a way of bringing them together, describing how this evidenced the children making sense of belonging (cited Sweeney and Homeyer, 1999 p.323). The play medium offered ways of creatively

exploring their relationships and the capacity to consider feelings, potential changes and resolutions. Child-centered play therapy at its core holds to the potential for change and selfactualisation within each person (Axline, 1947; and Landreth, 1991, cited Sweeney and Homeyer, p.330).

In conclusion, Ray (2011) says that “Sibling groups are a special case of group play therapy” (p.190). Therefore, the usual group work composition guidelines do not apply as the children range in age and developmental capacity in the culture of their particular sibling group. The nature of their presenting problems and their established relationships, leads to a particular availability and emergence of a commonality of codes held between them. With children in the care system these codes and themes resonate around trauma of abuse, neglect, transition and separation (See Chapter 7: Emergent Codes and Themes). Ray wonders how children of poverty relate to those of privilege or how children of different ethnicity make sense of each other’s cultural contexts. However, in the group work covered by this research project the group experiences and orientations revolve around trauma, lack and loss; where each child has the innate potential for the development of self-actualisation which then leads to a productive process emerging between themselves and other group members. Whilst very little is written on group play therapy I have not been able to find any studies undertaken with multiple sibling groups in group play therapy.



3.10 The Organisational Boundary Spanner/The Reticulist

The research supervision process questioned the multifaceted nature of both the work and the therapeutic role within this project, in relation to its potential replication. I drew particularly upon the works of Williams (2002), Armstrong, Bazelgette and Hutton (1994). Habermas (1984) points to the critical nature of the transaction of information through dialogues within frameworks that already exist. These transactions take the name of ‘critical dialogues’, exposing preconceptions, assumptions and undercurrents of organisational rhetoric; thus, enabling new conceptions and considerations to emerge. Gadamer (1996) highlights how traditions are often entrenched, and therefore not easily escapable unless we resituate thought by creating reflection and incorporate the unintended emergent material into the conversations. He describes these dialogues as transformative.

This particular project engages at and with the interface between child protection work and therapy. Between the multiple sibling perspectives, impacted by the abuse and neglect within their family composition. My particular role and employment position with the Local

Authority Organisation offers the propensity for multiple conversations with a diverse group of professionals representing the policy sector, governance, the legal and statutory framework as well as the financial decision makers. Such deliberation requires particular professional characteristics in order to engage with these conversations. Williams refers to individuals working in this way as ‘boundary spanners’. I will now consider the elements described within this role by way of better conceptualising critical characteristics inherent in such a role. Williams (2008) suggests that the role itself creates a collaborative process in what is often essentially a heavily mandated environment, enabling the worker to operate outside of the usual conventional jurisdictions of their role. Gray (1989), says this collaborative role enables the worker to “deliver and innovate solutions...where parties most familiar with the problem invent the solution” (cited Williams, 2008). The common purpose of the task I brought before groups of professionals, was to consider the best permanency placement and contact decision for sibling children. As a result of the professional group, holding particular insightful material about the sibling cases, they were then enabled to engage in fast tracked professional experience-driven conversations. This collaborative activity effectively gathered workers and their perspectives without impacting greatly upon the organisation’s financial resources. As I called on case related workers sitting together in the large hot-desking environment, a visual surge was created and the workers literally saw (a) the exact professionals they needed to collaborative with; and (b) the visual material from the children’s group work which I offered to them within the newly created discursive space. Poxton (1999) says “a new policy environment and new organisational arrangements should make cooperation and collaboration easier than it has been in the past. But real success will depend as much on the determination and creativity of practitioners and managers as it will on Government edict and structural change” (cited in Williams, 2008).

The focus on ‘practice reflection’ without a consideration for policy leads practioner’s to negate this aspect of their role. Managers likewise seldom seem to consider their role in the policy process. Again, the over-arching focus on practice creates an environment where policies are either imposed from outside of the practioner’s thinking or surreptitiously slide into

the practice environment with little space for deep questioning. For this reason, until I embarked upon doctoral research I had not reflected upon the potency of this process with regards to my practice having an impact on policy. Here again, the research supervision process led me to consider that both practitioners and managers seldom conceptualise their role in terms of policy process development.

In these suddenly gathered discussions, the relevant practitioners for each sibling case became more used to the fact that these spaces would provide new opportunities, to freely re-question and cause new thought around the sibling configurations already designed in the potential care plans for the children. I would continually reiterate the fact that siblings should be thought about within the context of their group, in order to see more clearly their particular bonds with each other. My role was to outline key and poignant material arising from the children's narratives and interpret in the context of theory around siblings and trauma. This then provided a particular expertise to the group and created the opportunity for the practitioners to re-engage with each child's position.

Williams (2008) outlines the key elements and competencies of the boundary spanning role as Reticulist, entrepreneur, leader, interpreter/communicator and expert. I will now consider each of these elements then has a number of associated competencies which when applied to the practice arena create effective case reflection and discussions.

Friend (1974) describes the reticulist as a networker within the decision arena. Judgements within this space concern particular professionals and organisations. In the case of this project, legal professionals, the guardian ad litem, social workers, educational staff, carers, etc. The reticulist manages the discursive minutia between the key players shifting thought processes and engaging with awareness; in this particular project in relation to the children, the organisation and new understandings about sibling relationships. Key to the task of the reticulist is their capacity to understand the relationships between the various agencies and workers, along with a capacity to attune to each as necessary using 'bargaining, persuasive or

confrontational modes of behaviour' (Williams, 2008). Etzioni (1967) refers to this form of professional attunement as 'mixed scanning'. Rhodes (1999, cited Williams, 2008) alludes to "the connection with the use of old fashioned virtues of diplomacy and the arts of negotiation and persuasion". With interest, my research supervisor queried the cultural aspects that I might bring to the role which drew upon diplomacy and negotiation and we wondered at my Northern Ireland cultural heritage and the impact of my capacity to reflect amidst highly sensitive and inflammatory conditions.

The reticulist role is to restructure and potentially reframe existing situations. In the context of the group work to reconsider the configurations of siblings with regards to their placement needs. Another key competency of the role of the reticulist is trustworthiness, facilitating efficient coordination of resources etc. This role requires the worker to be keenly aware of group and organisational dynamics in order to negotiate between the various relational structures and notice their particular power base. I had efficiently sourced sufficient play therapy materials to enable me to carry out play therapy with multiple groups of children. By building these resources over time the agency did not have to consider a costly outlay, but then refocussed on the need to provide a therapist's salary after the Ofsted inspectors highlighted that this work was an integral part of the organisation and required financial remuneration. The role required the project worker to engage carefully with complex group thought processes and a network between the various strategically placed individuals.

Challis et al. (1988) insightfully notes that reticulists are not aspiring to be located in the upper echelons of organisational hierarchy, however have particularly good access to it. Their work remit enables them to engage in unconventional ways in their addressing of complex problems whilst not presenting as a threat to the organisation. My particular focus on therapeutic engagement and the conveying of the child's position across the defended structures within the organisation, means I am not aspiring to service lead positions. This precludes me from being perceived as vying for organisational positions and allows for the building of alliances in the work place. An aside to this work is that space is created wherein staff become less formatted

and formal in their engagement with the children's internal worlds. The worker's processes engage directly with the children's emotional projections which are carried by the reticulist. In direct response to this psychic engagement, powerful conversations emerge, known as 'critical dialogues'.

The task of the reticulist is to create enough flexibility, and then succinctly gather the key points of discussion and refocus the debates from which emerges best placement decisions. Leadbeater and Goss (1998 cited Williams, 2008) consider this aspect of the role as one which collaboratively engages and leads "across boundaries within and beyond organisations". Such professionals are called "catalysts of systemic change...persistent in overcoming systemic barriers" Bryson and Cosby (2005 p.156, cited in Williams, 2008). Kingdon (1984, cited Williams, 2008) describes precisely how this sibling project emerged. He says that ideas or 'ready prepared recipes' lie in readiness for the particular moment when they can be engaged with and begin their life as a project.

My head of service approached me in 2006 and asked if I had a particular idea with regards to the emotional health and well-being of children as she might be able to access funding for such a project. It was at this point that I immediately vocalised the idea of group working with siblings in order to offer understanding from within the children both to them and the organisation in order that all would be better prepared with regard to transitions and decision making. Another characteristic is to be able to argue persuasively when necessary in order to convey with insistency the importance of the children's perspectives and the need for precise practice engagements to create permanency solutions. Hewitt and Robinson (2000 p.324, cited Williams, 2008) highlight the technical aspects of this labour in order to broker solutions and "make things happen".

As this project evolved, so too did the political backdrop on which it rested. The organisation continued to undergo drastic economic cuts and the workforce shifted dramatically to the use of agency workers. This meant I had to carefully create and sustain the practice innovation within

completely changeable workforces and therefore keep a keen eye on the “the policy psyche of national government”; (Williams, 2008) as the organisation changed in both its structure and capacity to engage with deep practice. A salutary thought emerges around the practitioner/reticulist conceiving whether the work has the capacity to be encompassed and achievable, within the backdrop of the governmental-organisational environment on which it is situated.

Williams draws on Degeling (1995, p297 cited in Williams, 2008) who purports that the reticulist must be committed to actively directly linking with strategic figureheads, with whom they hold interests in common. Trevillion (1991 cited in Williams, 2008) states they must be strategically placed and the constant pursuit of networking with the purpose of intentionally forwarding practice.

Throughout the course of the development of this practice innovation, I have had to constantly re-create discursive opportunities between myself, managers and senior managers. A particular formula of placements related professionals emerged with whom it was always essential to communicate with. I initially began to notice that practice decisions would take on a style of defended organisational language, unsupported by analytical discussion and clarification. This quasi-academic practice language would then alert me to the fact that reflective practice processes were less engaged with. It was this particular professional rhetoric which quickly formed the basis of care/placement plan designs. At these points the boundary spanning task was to insistently mobilise immediate case discussions between all appropriate professionals involved in the sibling placement care plans.

3.11 Maintaining a Role and Professional Relationships

In an effort to avoid interprofessional conflict and tension, it was important to continually steer each professional towards the children's material, whilst retaining professional wisdom and subject knowledge as the practice foci which then formed the organisational compass. In this

way, I would ensure that my primary function and role was around practice rather than inferring position or power or sounding overly familiar with more senior colleagues. By carefully maintaining a professional stance with a personable approach in the critical professional relationships within the organisation, I would endeavour to ensure relational dynamics and potential tensions did not disrupt the practice and policy building process.

I have been able to notice a combination of qualities within the role of the boundary spanner. Leadbeater and Goss (1988 cited Williams, 2008) refer to the boundary spanner as one who is a "creative, natural-thinking rule breaker", a visionary and opportunistic risk taker who can work "across boundaries within and beyond organisations." Bryson and Crosby (2005, p.156 cited Williams, 2008) highlight that these professionals are policy entrepreneurs, "inventive, energetic and persistent in overcoming systemic barriers." Whilst Cobb and Elder (1981, cited Williams, 2008) refer to such individuals as being the orchestrators emotional industry of people, problems and solutions.

Eyestone (1978 cited Williams, 2008) says that boundary spanners maybe either initiators of the movement of an idea to the point where it comes to the attention of those who broker and build coalitions within policy arena's. However, in the development of this particular practice innovation it was essential to both initiate the idea, move it to the attention of service leaders and develop policy considerations where none had been specifically written into the agency's practice to this point.

Roberts and King (1996, cited Williams, 2008) created the concept of the 'public entrepreneurs' whose particular acquisition of knowledge, skills, motivation and personality in a field of practice, create the environment in which a whole system can begin to think laterally about effective problem-solving and consider different meanings and management of particular policy problems. De Leon (1996 p.497 cited Williams, 2008) suggests that a key task is to be able to approach those in higher management who have the capacity and reciprocity to hear in the first place. She suggests that the public entrepreneur often sits as a loner who acts as an

energetic catalyst bringing solutions to problems into the discursive arena and creating modern policy ideas.

3.12 Critical Transformative Dialogues

By undertaking semi-structured interviews on five occasions with senior organisational professionals, it was possible to allow the organisationally situated professionals to engage in a non-directive way with their own thought processes, and come to meanings in respect of their theoretically based insight into practice within the organisation. It is this material upon development which can then become the catalyst for the formation of new developmental policies. I have included an example of one such interview (Appendix 1) which exemplifies how the professional thought processes can be engaged with using particular interviewing techniques. Treade, Higgs and Rothwell (2009) state that this method serves to “challenge the status quo, it influences assumptions and seeks (to) positively change these... hence we use the term ‘transformative’”. The awareness of the power of such dialogues caused an ongoing discursive dialogue to become core to all practice discussions around sibling placements. As a result, multiple transformative conversations became commonplace within practice and the organisation.

I draw on Treade, Higgs and Rothwell (2009) to consider the development of the blended methodological stance which I undertook to enquire into organisational thought processes, based on Gadamer's philosophical hermeneutics (cited in Treade et al. 2009) the strategy known as critical transformative dialogues offers a method of engaging in order that discourse can unfold and be interpreted within the psychic space created by the interviewer within the context of the emergent interview text, during the interview process itself. Treade (2008) coined the phrase ‘critical transformative dialogue’ which I have employed and merged with a semi-structured BNIM (Wengraff, 2010) styled interviewing process in order to elicit precision thoughts from the interviewees, who can knowledgeably affect organisational practice change. This form of appreciative enquiry, says Davis, is “more than a facilitation technique. It is also a

philosophy of enquiry from a positive rather than a critical perspective.” (‘Appreciative Enquiry’, 2016) I noticed this particular technique allowed more than transformation to occur for the interviewer but evolved into development of the learning process.

The interviewers task was to create an overarching relevance of a discussion, based on shared facts of knowledge between them. However, the interplay between this particular depth of professional knowledge and particular professional relationship is described accurately and incisively by Williams (2008) conceptualisation of the role of the organisational boundary spanner. The use of this particular role and position draws the interviewee and interviewer into closer dialogue in order that a deeper understanding of the phenomena of sibling relationships in this case being considered. The style of engagement offers the capacity for the interviewer and interviewee to hold a skeptical stance as newly found understandings emerge. These thoughts are the rudimentary elements of new policy making, which can then be later drawn up in practice standards and applied within the organisations.

As a result of both shared knowledge (Treade, 2008) and professional respect (Williams, 2008), the Boundary Spanner is able to embrace the interviewing process and in this study, engage the Heads of Service and Deputy Director as a way of enquiring into ‘practice-near’ (Cooper, 2009) social work with a particular focus on children in care, siblings and permanency. The role focused on providing a connective process and procedure in order to maintain the centrality of the sibling perspective in the organisational mind. This process engaged with organisational reflexivity, emotionality and intelligence. In so doing, gently deconstructing organisational defences in order to approach both practice and policy processes by applying participatory discourse and research methods in combination with the role of the boundary spanner.

One of the most powerful aspects of this work is the suddenness with which opportunities arise creating surprisingly powerful discussions. Kingdom (1984 p.192, cited Williams 2008) notes

that the worker needs to have "excellent antennae, read the windows extremely well, and move at the right moment."

Whilst Robert and King (1996), devised the notion of the 'public entrepreneur', Mintrom (2000, p.57, cited Williams 2008), discusses the role and organisational positioning of the 'policy entrepreneur'. Here the worker not only identifies particular problems but spans policy circles and engages in debates which build interest coalitions in readiness for policy change.

Interestingly, in the early days of this particular project my service manager had supported me in developing an internal policy around sibling's placements within the placements division. However, as mass staff turnover occurred including a new head of children's services, in conjunction with governmental austerity, and the dependence on computer-based work; the role and tasks of the social worker seemed even less to engage directly in meaningful ways with the children. The only way to really engage with the practitioner mindset and then the team managers thought processes, was to offer myself to undertake direct work with sibling groups prior to attending the project. This meant being used to construct care plans for court purposes and required considerable professional time in order to show the value of engaging with children in this way in order to plan placements better.

Being a part of the child care teams thought processes involved much networking, which made it then possible to engage in debates around siblings that had become closed as a result of the underlying governmental and organisational circumstances.

3.13 To Know Enough to Know What to Leave Alone

Williams (2005, cited 2008) refers to the Boundary spanner's "ability to make things happen" In this case it was important that the boundary spanning role was aware of the policy psyche of the local authority. Knowing when to move forward and when to stand still, whilst continually working fervently under the surface with the children. The existence of the group work and model enabled me to carry on with the therapeutic practice with the children, whilst being

ready to engage deeper in policy conversations as the appropriate organisational moments arose. Whilst my role is not defined as leadership, it took on a consultancy component. It was to be resolute and focused around organisational collaboration and the forging of professional thoughts. However, this then required a continual mindfulness around organisational leaders in order not to be perceived in the same organisational category so as to create disturbance with their roles. If I were to drop any of these characteristics, my role would become precarious as it depends on sustaining my integrity in both self and through the eyes of others.

Feyerherm (1994, cited Williams, 2008) suggests that this internal weaving of meaning becomes a central task of the boundary spanner who questions, facilitates and conceptualises within the organisational framework and structure. My particular positioning in the organisation allows me to engage with and combine psychoanalytic theories around attachment, trauma, sibling relationships, and organisational emotions in particular; along with play therapy theory in respect of metaphors, narratives, group work and siblings. Then apply complexity thinking with regards to the sibling placements.

Williams suggests that boundary spanners need to thrive in the excitement that collaborative vibrancy. Weick, 1995; Ferlie and Pettigrew, 1996 (cited Williams 2008) refer to the worker relishing this environment and role. In both clinical and research supervision, this particular aspect of my role was explored in order for the characteristics of the role to be replicated, to enable the project to be further developed. These discussions poignantly considered the roots of my particular professional hyper-vigilance, which highlighted a capacity to pay extra ordinary heed to the multi-layered communications in both a professional and children's work. Frailberg's useful concept of 'Ghosts from the nursery' to consider how something emotionally emerges and resonates from our personal pasts and affects our professional present. Specific personal skills, intrical to our characters then become professionally available with the caveat of the requirement of personal therapy. Particularly noticeable were skills regarding conflict

resolution, emotional resilience, endurance, and the constant capacity to engage in creative solutions.

Finally, William's (2008) notes that the boundary spanner does not always follow conventional career paths and "often occupies key positions through opportunism and special talents." My work has been made possible by a series of reflective and inspired managers and academic and practice supervisors; all of whom facilitated my strategic and lengthy training. As a result, my role and contract were re-negotiated, leading to my retention within the organisation over a sustained period of time. The combination of continually inspired practice and particular academic development programs has led to a transformative collaboration between education, practice and policy.

3.14 Summary

I have discussed the literature that I have drawn upon in order to conceptualise and theorise around the development of a practice model with respect to therapeutic work with children in organisational care. The role of the boundary spanner in conveying implicit material from the children's positions in order to place it within the organisational mindset has led to new reflective and discursive spaces within the organisation. A culture of transformative conversations has emerged alongside the expectation that a particular role exists to be referred to with regards to sibling placements. This practice intervention has highlighted a particular literature gap in terms of group work with multiple sibling groups, as opposed to multiple siblings undertaking group work. As a result of enquiring into sound group work play therapy literature, it has become clear that aspects of group work design attending to other communities of children have been useful to draw upon, however have not offered the potency that the multiple sibling group attendees within each particular group work course offers in terms of expedient and safe access to traumatic emotional material. This particular practice has been informed by literature but hopes to offer a new conceptualisation and theorisation of this practice innovation, and the literary themes within this chapter which are integral to the sibling

group work. In respect of the role of the organisational boundary spanner, I have applied the seminal work of Williams (2008) to the project role, as a way of developing a specific organisational context of local authority social work and play therapy, of which I am not aware of having been addressed in other literature.

Chapter 4

The Model

4.1 Diagram 1: The Model of Sibling Therapeutic Group Work

In this chapter I intend to offer a full and clear articulation of a model which I have developed and will consider its contribution to knowledge with regards to therapeutic work and decision making processes regarding sibling placements. The model's primary focus is upon therapeutic work with sibling groups of children in care. Two further foci emerged: i) work with the organization around decision making and sibling placements and ii) a particular professional role (the organisational boundary spanner/the reticulist) that draws together the children's material and creates conversations and organisational thoughtfulness in both social work childcare practice with sibling groups, and the decision making into their permanency care plans.

I have developed models, diagrams and tables to illustrate a therapeutic method of working with multiple sibling groups of children in care; and enable an organisation to reconsider the children's relationships from a horizontal viewpoint, and hence their capacity to best be placed together.

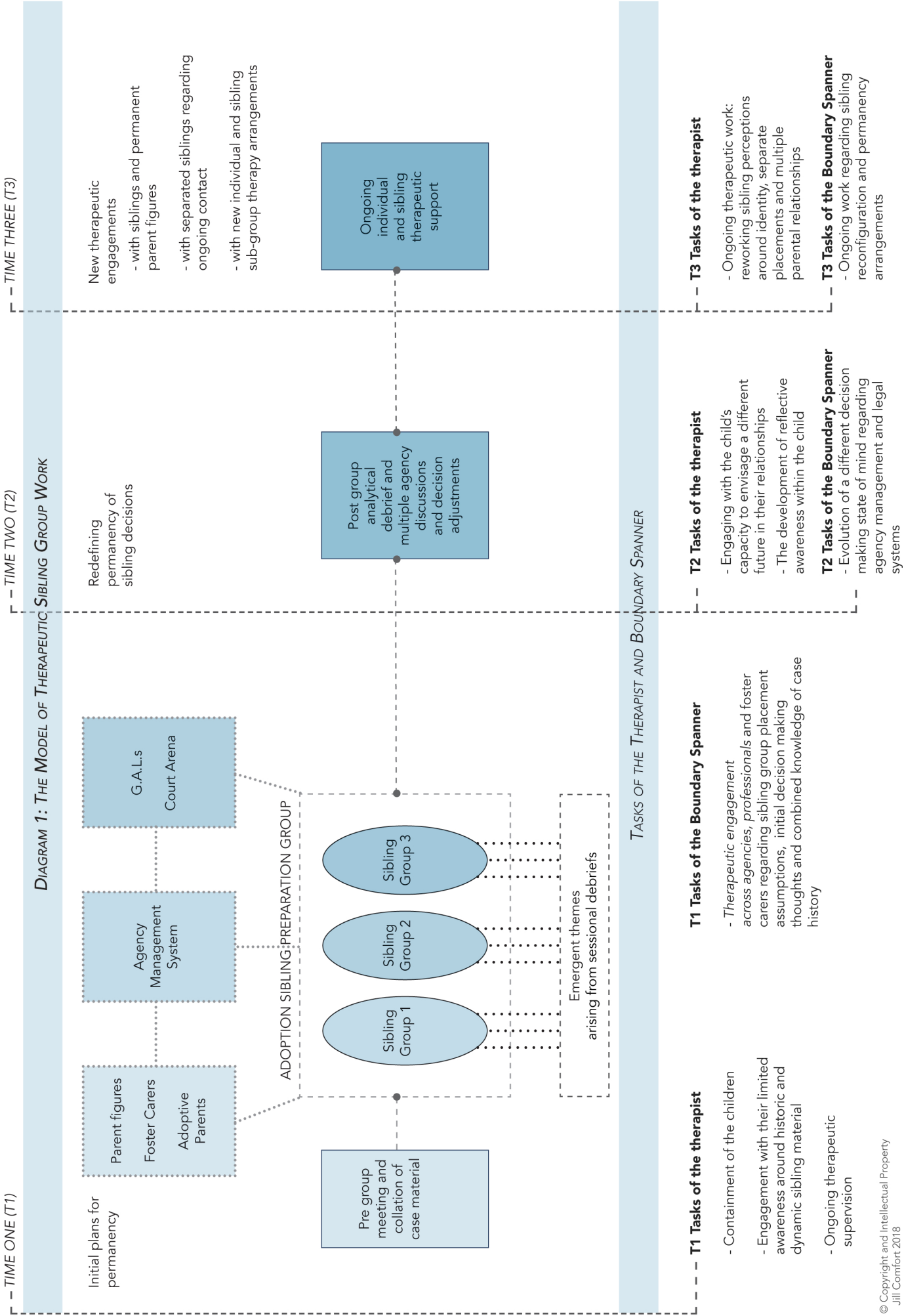
I then wish convey associated diagrams to demonstrate how the therapist transitions the children's material across organisational systems (the organisational boundary spanning diagram) and how siblings placements become reconfigured as a result of their material being more fully known by the organisation.

The unique component of this thesis and model is the importance of the multi-sibling group work approach, which is critically underpinned by theoretical ideas from both psychodynamic and child centered play therapy paradigms. The associated organisational focus is underpinned by theoretical ideas around organisational emotions and practice-near social work.

The above model conveys the movement of historic and dynamic material across three time frames of up to three sibling groups of children, who similarly require permanency placements via the care of the local authority. The model conveys the multiple factors which are required to be in place in order that a facilitating environment is established in which complex sibling work can be undertaken. The model creates a protected space in order that the children's material is worked across time (T1, T2, T3), thus helping to sustain an environment which facilitates the reconfiguration of sibling relationships and identities. The creation of the facilitating environment is a primary aspect of this model, ensuring authentic sibling practice is considered and undertaken. I will now outline the key components of the model.

4.1.1 Pre-Group Briefing (T1)

The model begins from the point of the therapist's awareness of, and attention to the strategic planning of each critical element of this practice group work intervention. Pre-group work training is undertaken for co-worker/co-therapists around conceptualisation and theorisation of the model, play therapy methods, psychoanalytic concepts, and the therapist's capacity to professionally position themselves within the process. Team managers are made aware of the fact that, if a sibling group is referred to the project, the child's case worker will be expected to send historic file material (reports) in order for this to be read and discussed at point of referral. It is also insisted upon that case workers and fostering support social workers attend both the briefing and debriefing which wrap around the children's therapy group work intervention. The briefing involves each case being considered by all related workers, to focus on the children's bonds, attachment styles, traumas and transitions. Historic material regarding intergenerational factors and genograms are redrawn and checked with regards to accuracy. Analytical note making process (white boards/flip charts) takes place in all meetings in order to draw attention to psychoanalytic and systemic processes in relation to sibling families' dynamics and emotional needs; and to draw attention to planning and support needs around safe emotional sibling placement configurations and transitions. Contact arrangements are outlined in order to ensure



that the therapists and practitioners will be considerate of each child's emotional complexities and frequency of arrangements during the therapy intervention. At this point the briefing space intentionally focuses the professional mind on the task of the emotional containment of the individual children and their sibling group's psychic material. Each of the three sibling families' material is then drawn into the briefing space and the enormity, complexity and similarities of the children's positions begins to powerfully emerge. Clear group work rules are prescribed in order to ensure attendance and permission is sought from schools in order that the children are given leave of absence.

4.1.2 Adoption Sibling Preparation Group (T1)

This involves a series of six therapeutic group work sessions of which each child must attend all, in order to establish group relations and attend to the evolution of therapeutic and psychic material. As a result of these six sessions, the children are able to convey their narratives which resonate with those of the other sibling groups in the intervention and emergent codes and themes appear (tabulated within Chapter 7). The peer mentoring component which then arises between the children offers new capacities for them all to develop resilience in respect of both their traumatic historic and future material around potential transitions and separations.

4.1.3 Decision making as a result of the therapeutic intervention (T2)

For the purposes of transparency and mutual benefit, foster carer's, prospective adoptive parents, organisational management systems, guardian ad litem's and legal representatives are included in aspects of information sharing with regards to the children's capacity to engage with each other and their potential sibling configurations. Mid-session telephone calls are undertaken as necessary to check the individual children's states of emotional stability, and the foster carer's capacity to understand and manage material that may have arisen from the group work itself. Professional telephone calls are made as required to incorporate concerns or to inform Guardian ad-litem, educational staff, related therapists, team and service managers.

Post-sessional debrief comprises of a two hour psychoanalytically informed debrief with the co-worker after each group work session. This involves note making for the purposes of reports, which will then be considered in psychoanalytic/play therapy supervision. The material then becomes the focus of clinical supervision.

4.1.4 The Post Group Debrief (T2)

All practitioners and foster carers at the original briefing reconvene to consider the children's engagement with and responses to the group work intervention. It is at this point that the emergent material can begin to define each child's capacity to be placed alongside their other siblings. This material is then fed back into the care plan decision making arena by the key therapist/practitioner, in the form of a case permanency planning discussion meeting. Here all professionals convene to discuss both individual and sibling group needs.

4.1.5 Ongoing Therapeutic Engagements (T3)

Further therapeutic intervention is available to both individual siblings and their sibling group in preparation for active transition and separation for the purposes of new permanent placements. This work also includes therapeutic intervention with prospective parental figures. The work carries on for the length of time that the children require the support and engages with any emergent unresolved material during this extended period of post-placement loss as they continue to separate and reconnect with their siblings whilst at the same time integrate into new family configurations.

4.1.6 Potential Use of the Model

This original model has already become the basis of staple adoption, transition, permanency, and child care practice with sibling in the care of the Local Authority. It has also already become transferable in it's capacity to enagege with any child-centred work relating to grief, where children require support to make sense of trauma, change and identity issues. The model is consequently usable within the Local Authority and voluntary agencies.

4.2 Diagram 2: The Model of the Sibling Reconfiguration Process

This model charts the movement of the decision-making process and subsequent reconfiguring of siblings within their sibling groups as a result of the facilitating environment of the group work model.

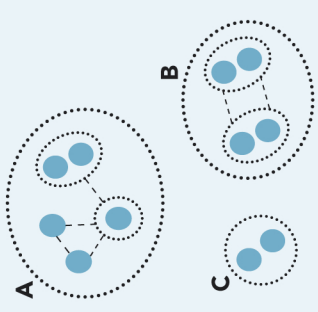
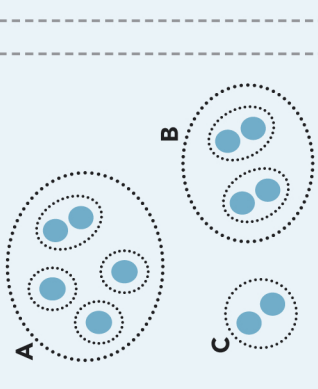
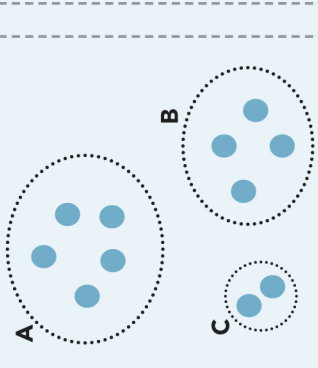
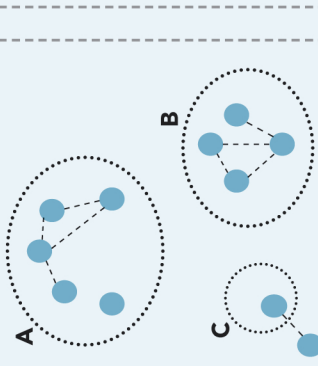
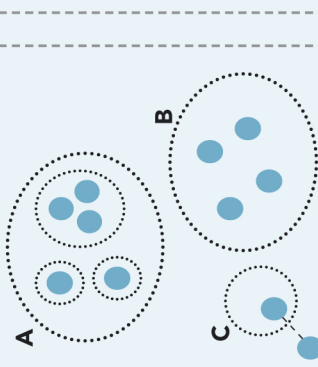
Model Phase 1	Each circle shows the siblings in their various fostering placements as they come into the group work process.
Model Phase 2	Sibling dynamics become highlighted as a result of the group work processes.
Model Phase 3	Each sibling group of children are considered afresh by the decision-making agents.
Model Phase 4	As a result of reviewing the intense dynamic material afresh, the decision-making agents begin to reconsider best permanency arrangements and reconfigurations for the siblings in each sibling group.
Model Phase 5	Ongoing therapeutic work attends to the reconstructed sibling arrangements as they reconnect with each other in promised sibling contacts.

The diagram demonstrates the shifting state of mind of organisational placement planning which leads to placement reconfiguration decisions about siblings. This emerges from organisational awareness of the impact of the children's histories and resulting relational possibilities and potentials with each other, which become accessible in the group work space.

The therapeutic group work space draws the whole or part sibling group into a permissive and safe sibling space, in order that the siblings state of mind might be considered. From this, a new organisational state of mind develops with regards to the siblings.

DIAGRAM 2: THE SIBLING RECONFIGURATION PROCESS

Demonstrating the sibling reconfiguration process and decision making as a result of the therapy intervention

Model Phases	1	2	3	4	5
<p>Recruitment</p> <p>Siblings separated from each other in a variety of foster placements</p> <p>10 children from 3 sibling groups</p>	<p>The Group Work, new relatives and potentials</p> <p>Bringing each whole sibling group alongside others into the group work space</p>	<p>Organisational Action</p> <p>The organisational 're-think'</p>	<p>New Permanency constructs</p> <p>Attending to the redesigned sibling constructions post-organisational 're-think'</p>	<p>Post-adoption placement work</p> <p>Supporting complexities</p>	
<p>Group Structure</p> 					
<p>Purpose</p>	<p>To notice new emergent dynamics</p> <p>To create permissive space in which the children can explore historic material and sibling relationships</p> <p>Taking a 'not knowing' therapeutic stance in order to find new discoveries regarding pain and possibilities</p>	<p>Reports</p> <p>Panel, legal discussions</p> <p>Placement planning meetings</p> <p>Interagency project level</p> <p>To engage the organisation with children's dynamic material</p> <p>Engaging external systems</p> <p>To develop both social work placement practice and direct work practice</p>	<p>To therapeutically facilitate and support new permanency constructs</p>	<p>To maintain complex connectivity</p> <p>To therapeutically support both children and carers in an ongoing capacity</p>	

4.3 Diagram 3: The Model of the Organisational Boundary Spanning Activity

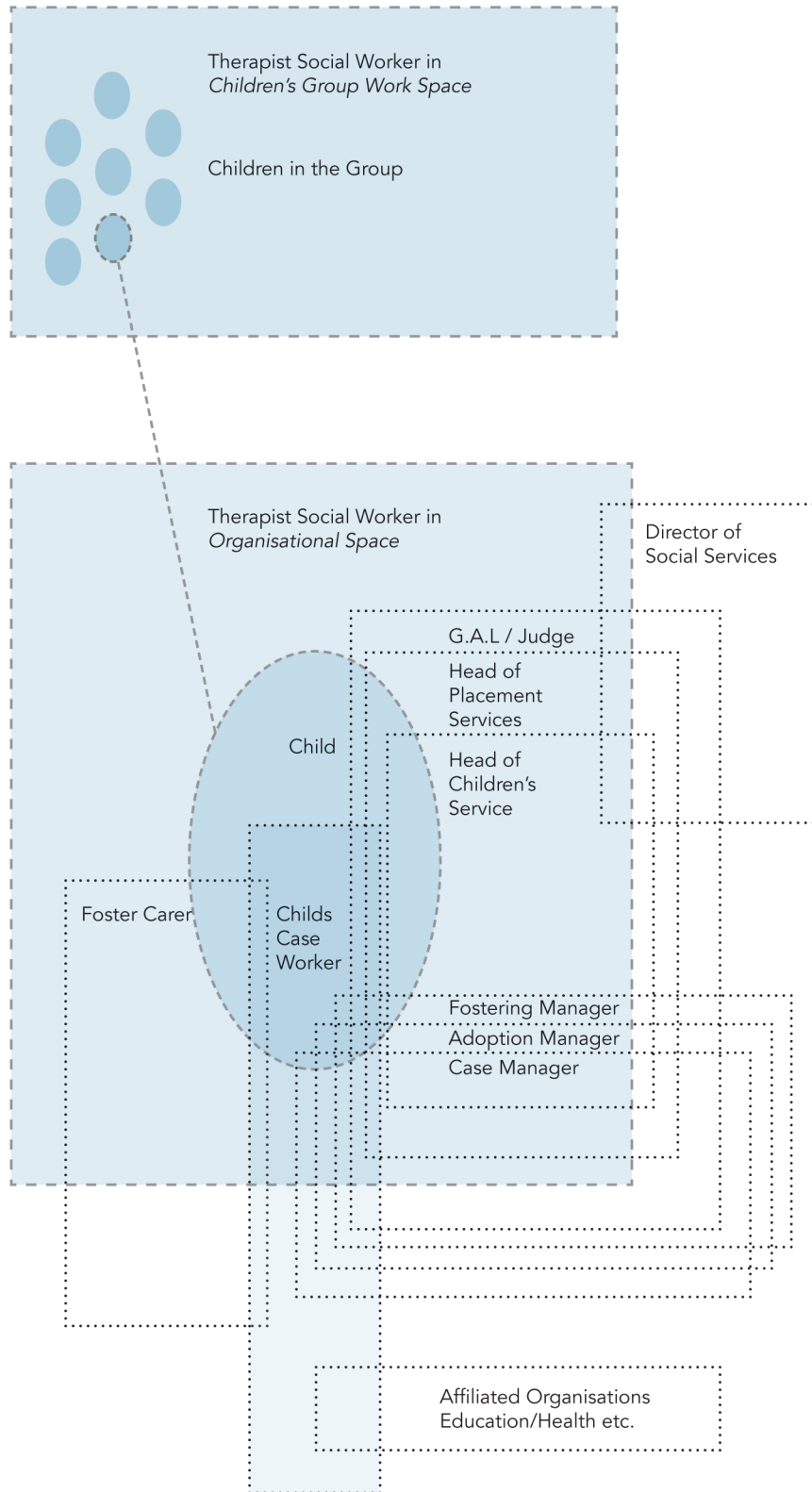
The Organisational Boundary Spanning Model: A discovery of a role

Unconscious aspects of both emotional communications and the emotional work were highlighted in supervision, as attention was given to the role of change agent, further identifying yet another role, this time the previously unrecognised and little known role of the ‘Reticulist’ or boundary spanner within the organisation. The seminal work of Williams (2002) describes characteristics which could be applied to reflexive research methodology around a role, highlighting the importance of characteristics which emerge around tasks, where, as a result of particular emotional labour, the change agent connects practice into organisational processes and policy change. The research supervision process disentangled aspects of the boundary spanner’s tasks, in order to make it possible to research into the experience. This is discussed in greater depth within Chapter 3.

In essence, the discovery of a pre-existing ‘concept’ for a role that I had taken up, enabled me to occupy this role with more confidence and clarity. This process is rather like thematically analysed data in a conventional research project ‘needing’ a theoretical framework to make better conceptual sense of its meaning. My research supervisor described to me how he could see that something interesting and unusual was happening in my practice, for which he himself did not have a ‘name’. He consulted an experienced organisational consultant colleague who said ‘Go and read about the idea of the reticulist’. For me it was as though a light had suddenly switched on, illuminating and giving clarity and form to what had previously been more like groping in the dark.

The Organisational Boundary Spanning Model below is designed to convey the multiple transactions undertaking in boundary spanning activities which network the material from the children’s group work space into the organisational decision making arenas. This model highlights that at least 9 professional discussions or meanings are undertaken in order to attend to

DIAGRAM 3: THE ORGANISATIONAL BOUNDARY SPANNING ACTIVITY



this task. The reality is therefore clear that if this work is not undertaken, much is lost of the children's material within the decision-making process whilst the decision makers become disembodied from the children's realities.

The Organisation Boundary Spanning model has been designed to highlight,

- i. the complex matrix of dynamic material available between and within the children, facilitated by the therapeutic relationship and space,
- ii. the group work space itself permits a place for transitional phenomena to emerge in which the children's dilemmas can firstly be addressed by the children, and then via the connective role of the lead group worker/therapist transitioned to the organisational space. New thinking can be reached in the various organisational spaces and new thoughts tolerated which then become new decision-making realities as each agency member engages with the other.

Chapter 5

Group Work with Siblings in Care

5.1 Overview

In this chapter, I will attend to the components and impact of group work therapy as a way of offering therapeutic intervention to sibling groups of children. I will consider how the communal space and particular child-centred play therapy approach attends to the multiple interactions between the children. I will draw out the importance of the children's already established relationships and community commonality, which they share with other sibling groups in care; and how the group work accelerates the opportunities to explore and negotiate difficult concepts whilst the children engage with qualities of empathy and concern for each other. I will highlight how the intensity of the children's emotional realities, gathered via the group work exercises, offers placement planners and decision makers a basis to analytically consider best placements for each child and their sibling group.

The only published practice model of therapeutic group work with children in the field of adoption and permanency, was carried out by Hoggan (1988). This model combined the factual material gleaned from case files and the children's shared memories in the group workspace.

The home finding staff involved were afforded the opportunity to know the children better, and therefore able to consider best family matches for them. They also observed each child's relational patterns with other group members and adult staff and used this significant material to consider how the children might manage new familial relationships. The group work was spread over course of four weeks and involved 4x1 hour weekly sessions.

My research group work intervention focused particularly on sibling dynamics. Over 10% of the children represented had diagnosed disabilities and special needs. At the outset there were nearly always professionally held assumptions (voiced at Time 1 T1 See Diagram 1, Chapter 4) that these particular children either pessimistically would not be able to participate, or in fact idealistically be more than able to participate, in the group work intervention. As a result of the

project the siblings were being given the opportunity to access child-centred play therapy and my findings show that all participating children were able to share emotional concepts and feelings around connection in relation to their sibling dynamics and historic memories.

The group work with siblings revealed that unresolved sibling identity issues as a result of parental insensitivity, void and differential parental treatment shown to the various siblings, created particular discordant dynamics between the children. This became played out in the group work arena. As their individual and group identities became eroded and the children's sense of security undermined, they were rendered victims to intolerable enduring emotional pain. This was seen time and time again during the course of the longitudinal therapeutic span of the model (T1, T2 and T3) and evidenced as the children's pain became re-enacted as a result of ongoing changes and transitions in the course of their normal lives. The children's emotional pain also resonated as they reconnected with their siblings through contacts, and shared memories triggered their internal unresolved dilemmas. Little is known about the lived observed reality of siblings in care from the perspective of the children's internal worlds, and whilst there have been a number of studies that have looked at the placement of siblings, none except for that of six cases recorded through the work of Kosonen (2002) interviewed the children themselves (cited in Hindle and Sherwin-White, 2004 p.207). For the purposes of this research, a lens has been placed upon the early lived experiences of 22 sibling groups involving 69 children, in order to know about the reality of sibling bonds between siblings in care and offer insight into permanency planning and placements.

In the group space, rivalries and fantasises were observed to emerge and re-emerge with new strengths; enlivened by re-connections, and memories of moments in time. Kancyper notes that the Latin 'rivalis' means, to have the right to the same body of water (Skrzypek et al. p.245). It was observed in the group work how each child considered their own identity in light of their mother's relationship with their father, and where relevant, her relationship with other sibling's fathers, incurring multiple complex horizontal relationships between the children. These various parental configurations imposed powerful perspectives around favour and de-favour which

impacted upon the child's identity and self-worth. In each therapy group, it was observed how the sibling's eye contact displayed qualities of their particular sense of sibling identification with their other siblings; and poignantly, how they conveyed emotional pain which emanated from a place of having a shared experience of insufficient emotional parental containment. The children's intensified relationships in the face of severance from each other, became more acutely available as they re-joined in the group space. At the same time the siblings were left to negotiate their exaggerated sibling conflicts resulting from the lack of good parental mediation. Troubled dynamics become magnified as a result of misplaced power between the siblings, which resulted in exaggerated states of vulnerability and omnipotence within their groups. The research highlights a particular sibling dilemma, a dual-mindedness, in the need to survive parental abuse, and access the love of a parent whilst needing to survive and thrive in a particular type of sibling membrane.

5.2 The Internal World of the Sibling as Represented in the Context of the Group Work; The Sibling Chord

I will now consider the observed relationships between siblings as represented to me within the context of the group work. Potentially a parent can never know the power of the primal sibling bond, nor each child the other's desperation for affirmation in the eye of their parent. All siblings have their own unique and individual evanescent quality of perception and memory around their lived events and relationships, resulting in particularly held memories, formed in the transference between themselves and their parents, and affected by the passing of time.

The primary focus of the group work is to understand the sibling dynamics in the context of the potential transitions and placements ahead of them. The group exercises and play therapy methods enable the children to express poignant opinions about each other, laying bear precarious bonds between them which I have named as their 'sibling chord'. At this stage, the children's primal sibling love is evident as the only binding element left for them to draw upon. These particular sibling bonds have the opportunity through the group work to emerge and be analytically thought about in the post group work debrief, which follows each session. From

this, it is possible to gather a sequence of impressions of the children's dynamics, consider their meaning; and then communicate the implications of their relationships to the placement case workers and decision makers.

My professional hunch is that social workers and related professionals currently gain an 'experience-distant' understanding of siblings (Geertz, 1974, cited in Froggatt and Briggs, 2012) as a result of not creating a to place to practice and observe the entirety of each sibling group, and potentially as a result of their own professional defendedness against practice and personal anxiety. Failure to create a practice space in which sibling relationships can be revealed leads to an analytical dearth of understanding into the children's siblingships and importantly, how these have been created and the lived experiences from the children's perspectives.

5.3 Sibling Group Work Informed Organisations

Comprehensive file searches around the children's families revealed that material with regards to siblings on each child's file was often lacking. This may be due to birth parents' resistance to share personal material, or the worker's capacity to engage in and convey this material between the files. This lack of dynamic information results in the child becoming an singleton in the organisational eye, and a lack of sibling sensitivity in the professional understanding of the children. This organisational separation and isolation leads to a loss of shared heritage between the children, and their relationships become suspended, only to be re-enacted when their original dynamics resonate as they come back into contact with each other again at times of sibling contacts.

5.4 Multi-layered Sibling Engagements in Group Work

I am going to consider the multi-layering of multiple sibling groups engagements, in terms of the children's experiences and relationships available to me in the context of group play therapy work. The configurations of siblings in care incorporate a wide age range, of abilities, gender

and sibling variations. Through the short-term non-directed play therapy a few carefully constructed statements are placed into the therapy space with regards to the children's need to be in care, relationships with each other, and potential need for new parental models. The group work activities bring to light the children's representations of themselves and their 'self-object tie' (Khan, 2014 p.50, cited in Skrzypek et al) which become available as a result of the group facilitated sibling enactments.

The activities offer siblings the space to express feelings and to organise thoughts around imminent changes and sibling configurations as a result of family history. Each child makes their own profound sense from the capacity to engage with the unconscious and consciously held material within the group. The children's communication of their covert sibling wisdom belies what seems to be their stunted, stilted and fractured conglomeration of relationships.

5.5 New Truths Begin to Create New Platforms for their Relationships

The multi-sibling group therapy space becomes a rich resource for insight and support, where unique perspectives are negotiated by the children in a safe and accessible way, and the duplicity of multiple insights emerge between the children in the group space as a result of the children entering, primed with much commonality around their 'psychic suffering'. (Canton and Guerriera, cited Skrzypek, 2014 p.235)

5.6 Material Emerging from the Multiple Sibling Space

1. Separation from parents
2. Blame
3. Dynamic interactions with each other
4. Realities around suffering neglect, abuse and abandonment
5. Limited availability of family and community support
6. Emotional states of mind i.e. shame, guilt, fury, injustice, despair, separation, confusion, loss and grief

7. Institutional care and relating to the institution itself (Meetings / Professionals / Decision making processes)

Each sibling's narrative becomes critical to the other as new meanings and constructs are considered within the context of each child's developmental capacity, but nonetheless available within the context of being siblings to each other. Therefore, the youngest sibling will expose some projected emotional truth from their unconscious thought processes but may have little ability to verbalise the complexities of this material. Meanwhile, this will then force the older children into correcting and intervening in order to make sense of what has really happened for the whole group.

5.7 Expressions of Complex Trauma in the Group Space

Complex traumas and extreme distress can be expressed in the group work space by any particular child as they begin to address with varying degrees of understanding the shocking realities that underlie their traumatic experiences and family dynamics. As these begin to strain through the children's defences, which have previously protected them from the intense pain of these dreadful traumas, suddenly group language begins to pulsate with pain-filled reverberations between the siblings as they extract unconscious memories and begin to verbalise them consciously. Even dreadful trauma becomes bearable and tolerable because trauma is understood within this particular community of children. An example of this occurred in Session 3, Sibling Purple 1 (Aged 14). This was not uncommon in its content. In my study I noted the regularity with which the group work gathered such traumatic realities of the sibling children; and the group drive offered a way of sharing such resonating traumatic material. The eldest sibling (Purple 1 / Aged 14) recounted scant but poignant details of her rape by the father which she shared with her younger brother (Purple 2 / Aged 10) She then shared that her their eldest half sibling brother had done likewise to her. Her younger brother (Purple 2) hung his head as the realisation of what had been factually spoken in the space began to dawn on him. They looked deeply into each other's eyes, while her tears fell quietly. Her disclosure offered

explanation as to why they as siblings could never live together with their parents nor all three siblings together. Purple 1 and 2 still remained in supervised direct contact with their mother and her second abusive partner (Father of Purple 3). This then explained why their youngest sibling (Purple 3) was removed as a baby and his placement plan had to be adoption. The eldest sibling (Pink 1 / Aged 11) from another group within the group work also shared similar material, and the two eldest girls hugged, saying how glad they were they had met. All their younger siblings present by virtue of being part of the group work were able to listen as I explained to them with their sisters that something dreadful and rude had happened to their big sisters, meaning that none of them could ever live back with their families, and all needed new people to be parents for them. What until now seemed unreachable trauma around relationships and experiences, was able to be conveyed and available through the medium of group work play therapy.

The children dramatically shared their survival stories in order to create meaning as “life becomes meaningful when one sees him/herself as an actor within the context of a story.” (Howard 199, p.196) Bruner (1990) suggests that these constructs are embedded within particular cultures of meaning. Cochrane and Claspell (1987) offer the useful term ‘dramaturgical’ to describe the sharing of richly textured stories. The stories provide the children with a way of gaining valuable insight and contemplating painful life realities in order to survive in their new orders. In this way, the children begin to notice variations in their own placement requirements and manage this as long as they can be promised the notion of contact and connection will remain available to them. Cole (cited in Skrzypek et al., 2014 p.120) describes a ‘secret identification’ that exists between siblings in which they compartmentalise something of their individual relationships to be accessed again as they think of each other in the future. I noticed in the longitudinal element of this therapy model, that when therapy was re-introduced to siblings post transition, the children had begun to develop new relationships with alternative permanent parents and create new family constructions separate from their siblings; yet upon seeing myself or being given the opportunity to reconsider their psychic material,

notions around their sibling identity would resurface. At this point, a child frequently recollected an aspect of the group experience.

At the point of placement transition the therapy offered highlighted the children's sense of silent loss which presented as them being compliant and accepting of separation from their siblings and family members. Photos of their group work material however gave them a way of reengaging with the realities of their pain and having an element of hopefulness around promised future re-connections. In this way the group work model offered the children the potential to remain sensitised to their sibling material and identities.



5.8 Examples of Complex Trauma in Group Exercises

'Three Trees' (Week Three: Group Work Exercise)

Each child was given three branches. They start with the branch they are on now, i.e. their foster caring branch. They look back to their family branch and consider moving tiny paper templates of themselves and their siblings from the family branch to the foster caring branch. After much thought and group discussion, they are left to consider if they could bear to move themselves to a future family branch (new parents) and potentially where siblings would sit. The children vary in their struggles, some use string to create a bridge often and then realise the bridge gets cut between themselves and their birth parents in the end, but not between siblings in other trees. In some incidences, they use sellotape to attach themselves to the foster caring branch, in order not to move.

The worker's task at this point is to emotionally support the child to enable them to look towards the different branches, even if they don't feel ready to move. By watching other children move, they begin to manage the notion accompanied by a variety of difficult emotions. These trees are kept, photos taken of the exercise, and put into the children's "whatever next" story shoe boxes.

Following this, the children would be visibly seen to experience a sense of relief and both in play and in verbalisations, move towards realities around old and new family configurations. Alexander (2004) coins the phrase "cultural trauma (which) occurs when members of a collectivity feel they have been subjected to a horrendous event that leaves indelible marks upon their group consciousness, marking their memories forever and changing their future identity in fundamental and irrevocable ways." (cited in Korhonen, 2013 p.272) Such traumas, Korhonen states, cause more cases of PTSD than horrific natural disasters, as these challenge the core notions around humanity and mutual trust.

Puppet Interview: 'It just wasn't safe enough'

The children use puppets at the beginning of the first session. The puppet has the chance to empathise with the worker's puppet, who simply says "I cannot live with my old family anymore, it was not safe... too much was wrong." The children's puppets have the opportunity to ask the puppet if certain things have happened to him. At this point, in all the groups, the children begin to spill a tirade of naively worded examples of abuse and neglect to the main puppet. At the end of which, the main puppet simply says "It's too sad, it's just not fair, we wish it could be different, they couldn't change, and it's just not safe. So, I had to leave."

The children's sense of individual identity is partly formed in relation to being a sibling; and as their sibling identity is deeply honoured in the group work process, the children find a new capacity to consider the need for new sibling configurations and their inherent individual sibling identity gains a sense of being intact as the promise of emotional connection with their siblings is made to them. A practice promise is made to the children that nothing can take away their sibling relationships even if they have to live in different houses. The children are told that some will be able to have face to face contact, and all will be able to share cards and letters at various times of the year. Whatever might happen, a sense of connection is described for the children both in emotional and literal terms. As I consider these siblings and their capacity to make sense of horrific events, their intolerable projections have a powerful effect upon me. This dynamic interchange enables the children to project their catastrophic events into the practitioner, where they become authenticated and contained, and a sense of order conveyed and felt.

5.9 Limitations of the Group Work Practice

The difficulty of this particular type of group work lies in its success. The multiple children create multiple emotional discussions which lead to potential emotional shifts. However, the enormity of emergent material in any one group requires considerable therapeutic agility on the behalf of the worker. This group work ideally requires up to 3 therapeutic workers (therapist

and two co-therapeutic social workers) in order to attend the multiplicity of rich emergent material from within each sibling group.

Eno (1985 cited Oe, 1999 p.323) suggests that more than four children necessitates a co-therapist. She also highlights that the number of children often accelerates the psychic processes, as does the quality of the facilitation within these sessions.

Observation is key to this intervention, as it leads to analytical understanding and awareness of the psychic dimensions at work in the close emotional proximity between the siblings. New professional insights emerge and are gathered around their sense of individuality, and in terms of their sibling bonds. Various hierarchies, styles of conflict resolution, leadership and roles of responsibility taking are also observable; along with aspects of sibling cohesion affliction and affection within the group. Throughout this group process the children learn to master more effectively thoughts around the reasons for the need for various particular placements, and about their propensity to have better sibling relationships.

5.10 Pain Bearing in the Group Work Space

Copley and Forryan (1998 p.79) highlight the importance of the worker knowing how they are being used by the children. In the group work sessions, the child's pain appears in micro projections into the practitioner's mind offering insight into their perspectives and positions. Jealousy, anger, fury isolation, confusion, grief and despair are all likely to appear. As the worker is able to bear, the children begin to integrate new senses of being understood and understanding. The practitioner undertakes the role of offering professional containment (Bion, 1962 a) to the mental pain and chaos experienced by the child, in order to "introject, harbour, and so modify the baneful force of emotion" (Bion 1959 cited in Copley and Forryan 1998 p.165) This process of modification (Bion 1962 a 'alpha function') enables the child to develop their capacity to think about their experiences as a result of that their pain being more tolerated

and tolerable, as it becomes interjected into the aware practitioner and carefully re-introjected to the child in order that they may think about their experiences.

In the group work space, the children convey injustice with regards to their impossible sibling positions, and their rights to have the opportunity to live together being denied, as a result of the impact of abject emotional abuse and ‘parental void’ (Silverstein and Livingston-Smith, 2009) upon their internal working models, potentially rendering the siblings both behaviourally and emotionally unable to live together.

The organisational group worker’s role (Time1-3) is to insist that these children are given the optimum possibility to re-configure their sibling notions, bonds and dynamics, as a result of defining their potential through their capacity to make sense of their world using the medium of play therapy. This sense-making creates new ‘emotional skin’ (Bick, 1968) in order that psychic regeneration might become possible. Bollas (1987) constructed the term ‘the unthought known’ conveying the idea that unconscious material is known in a way to each child or person, which then may surface given the appropriate supportive environment and become a conscious known fact or wisdom. Cleve (2002) acknowledges the fact that the prevailing professional attitude is that children should not be talked to about their traumas, as it may intensify their distress.

However, she felt that greater scars would be caused by the trauma itself, if the adults could not manage the distress or pain of the child (cited in Lanyado, 2018 p.54). In the group work processes of this study the children were able to make their own sense of their circumstances, thus allowing pain to be appropriately conveyed and understood between them.

The premise of the group work intervention was titled “Whatever Happens, and Whatever Next?”. These phrases were sufficient to direct the children towards their particular shared life positions yet enable them to make their own sense of the statements. Listed below are the simple phrases offered to the children in order to help them structure and develop their thoughts.

It is explained to them that, ‘We all have so much that is the same in this group. We are all brothers and sisters, and some of us have brothers and sisters too small to be with us today. We are all not living with our families. We are all living with our foster carers.’

Whatever Happened?

“Why things weren’t right. Our mums/dads couldn’t sort things out, change or make good choices, and so it wasn’t safe enough. We have all had many things the same happen in our homes... Fighting, arguing, lots of upset, anger, crying. So much is in a dreadful muddle. Many things might not have been right, like...? But that was our family, we were used to it. But now we wish it could have been different. If only...”

Whatever Next?

“There need to be new ideas and plans... so. What a shock! What might happen? We don’t know all the plans yet; let’s check what we think we know. Brothers and sisters are different ages, with different memories and things that might have happened to them. What ways can brothers and sisters best be together and be safe?”

“Over the next six weeks, there will be six times when you come to think, ask questions, share and talk. Everything you say is important, as it helps us to understand what really happened and how we can think about it for you, your brothers and sisters and family.”

5.11 Group Work and the Role of the Group Worker within the Organisation

In respect of the Group Work Project, one of the central tasks of the Reticulist is to provide connection. Connection between the voices of the children, their case workers and carers and create new ways to transition emergent voices in order to inform and guide. Williams (2008) notes that this particular task transforms followers, as they become inspired and refocused in a desire with their task, i.e. to better understand the sibling child’s position and consider their best placement interests. Crosby and Bryson (cited Williams, 2008) summarise this, stating "in order to share meanings, resolve conflicts and negotiate the best way forward." A key task of the

Organisational Group Worker role was to bring together professionals, continually facilitate the emergence of assumptions, create pause, guide thoughtfulness and offer analytical consultation and containment into this professional space. In this way, the Consultant Group Worker takes on a respectful, supervisory position, interpreting defences, distress and complexities using clinical language to communicate internal worlds of traumatised children and organisational emotions to other professionals and agency decision-makers. By maintaining a depressive position (Klein, 1935) the Group Worker enables complexity and despair to emerge and to contribute to the conceptualisation of hopeful possibilities. New risks are accommodated as creative placement possibilities emerge. The role of the Group Worker creates a transitional space into which the labour of thoughtfulness emerges. The Winnicottian ideas (1965) I have drawn upon, around the notion of the 'holding environment', have highlighted the importance of creating professional containment. Huffington (2004, p.79) says "this requires the leader to possess personal presence, poise and resilience, and the emotional capacity to tolerate uncertainty, frustration and pain without getting too anxious themselves" (2004, p.79). This particular valency was not only held by myself, but importantly by my senior manager, responsible for placements services.

Williams refers to the works of Boon (1994); Lewiki and Bunker (1996); Huxham and Vangan (1999) (cited Williams, 2008) who focus on the importance of strategic collaborative emotional labour, suggesting that it is important to take small risks and evaluate effects, rather than incurring professional harm and mistrust. The boundary spanning rules are clear, to promote trusting and respectful professional relationships, and create space for reflective discussion with all relevant professionals and carers. In the case of the children's material in my study, the task was to notice the minutiae of dynamic material that emanated around the sibling relationships, and bridge this into the professional discussions.

Chapter 6

Case Studies

6.1 Introduction to the Case Studies

I will use case studies to capture and convey the emotionality of sibling groups in transition. I will then chart and discuss the key codes and themes identified during the course of the sibling group work project and refer to the table of codes that emerged (See Chapter 7: Emergent Codes and Themes). These case studies have been extracted from my clinical group work and therefore contain clinical vignettes, serving as examples of the particular complexities of sibling dynamics and scenarios I encounter in my sibling group work. They give insight into the therapeutic processes of work with sibling groups. I have chosen to write up accounts depicting typical complexity in sibling groups in care within the British Local Authority children's services system. For each of the groups, at least one of the sibling's care plans had been adoption. My initial brief was to offer group therapy to the siblings in order that;

- i) the children were able to consider and make sense of their current predicaments and potential transitions, and
- ii) I would be able to notice their sibling dynamics and, once the sequence of group work was completed, offer reflection analytically formed findings to the organisation in order to inform the decision making around the best permanency care plan scenarios for this sibling children.

Case 1: Four siblings for whom the initial plan was for the children to be separated into two adoptive families. Post group work, a clearer view of the best sibling configuration evolved therefore the new placement plans were redesigned.

Case 2: Two siblings. The plan was for these to be separated, with the eldest to remain in long term foster care and the youngest to be adopted. Post group work, both remained together in long term foster care.

- Case 3: Five siblings whose plan was for the youngest three to be adopted together and the eldest two to remain in separate long-term foster care arrangements. Post group work, the three youngest children were placed in two adoptive placements with considerable sibling contact, whilst the eldest two remained in a variety of fostering placements.
- Case 4: Six siblings. The plan was for the two youngest to be adopted as infants, the third to be adopted as a single child and the eldest three to be placed together under Special Guardianship regulations. Post group work, the four eldest children were placed together with Special Guardians.

6.2 Referrals

As a result of my sibling group work project having become established in the agency childcare teams from the Local Authority Children's Services department now refer all sibling groups for whom adoption or separation might be a placement consideration to the group work therapy project. The birth parents have consented to the therapy engagement at the point of a full care order being made; in that at this point they are informed that should any child require therapy for emotional support, they will be given access to it. (See Appendix 6)

The case studies form an ethnodisciplinary study, requiring myself as researcher to be inside the community inhabiting the group space and from this position able to enquire into and explore the sibling experience and identity. By being repeatedly submerged in both the group and individual sibling psyche, I have taken the meta position, to experience the emerging material through the lens of the investigator. The sibling experience was being laid bare through the process of the researcher being immersed in both the children's and organisations reflective processes.

Fraiberg says that "...There is a moment at the beginning of every case when something is revealed that speaks for the essence of the conflict..." (Fraiberg, 1975 p.391). In these cases, the

conflict is two-fold. Firstly, the nature of the sibling relationships that may not be able to hold together in conjunction with each other in placement. Secondly, the agency's states of mind around considerations with regards to siblings and placement decision-making. Fraiberg's quote has become a useful benchmark from which to consider dynamic and historical elements at the beginning of the casework and therapy.

As discussed in Chapter 5, Group work therapy became the most effective modality to use when practicing and considering casework dynamics. The multiple sibling groups go through parallel psychic processes within the group space. Their interactions offer them the opportunity to observe other real-life scenarios and behaviours of the other children, and in this way, O'Connor (2000, p.414) says "Vicarious learning and catharsis takes place in the group... (where) children have the opportunity to receive and reflect on feedback from their peers... (they) are less likely to engage in repetitive behaviour or withdraw into fantasy... (so) practice new behaviours... to address both intrapsychic and interpersonal issues."

The spontaneity created by the interplay between the children and their material, becomes the active ingredient enhancing personal growth and thought and shifting unprocessed or defended emotions. However, the writing up of this subject produces dilemmas for the writer in terms of extracting case studies from the total cohort. With this in mind, I will aim to write four vignettes to summarise particular sibling groups, and then show how the longitudinal practice innovation (Group Work Therapy model) offered the children ways of negotiating new family configurations and move towards positive placement outcomes.

These four cases are taken from a study of 22 sibling groups, all of whom have participated in the Adoption Siblings Group Project (See overleaf, Table of Sibling Group Membership 2009/2012). Each phase of group work involved up to three sibling groups in the therapeutic group work space.

Table of Sibling Group Membership 2009 - 2012

Case Study	Therapy Groups	Date	ID	Age	Sibling Identity	Absent Siblings	Attendance (x 6)	Transition Therapy	Individual Therapy	Sibling Contact	Decisions Pre-Therapy	Decisions Post-Therapy	
	A	Mar-09	Red 1	10	Full Sibling		6	N	N	N	Y	N	
		Mar-09	Red 2	8	Full Sibling		6	N	N	N	Y	N	
		Mar-09	Red 3	7	Full Sibling		6	N	Y	Y	Y	N	
		Mar-09	Red 4	6	Full Sibling		6	N	N	Y	Y	Y	
		Mar-09	Red 5	5	Full Sibling		6	Y	Y	Y	Y	Y	
		Mar-09	Red 6	3	Full Sibling		6	Y	N	Y	Y	Y	
	B	May-09	Blue 1	10	Full Sibling		6	Unmoved	N	Y	Y	N	
		May-09	Blue 2	8	Full Sibling		6	Unmoved	N	Y	Y	N	
		May-09	Blue 3	6	Full Sibling		6	Y	Y	Y	Y	Y	
		May-09	Blue 4	5	Full Sibling		6	Y	Y	Y	Y	Y	
May-09		Blue 5	3	Full Sibling		6	Y	N	Y	Y	Y		
Case Study A	C	Jul-09	Green 1	6	Full Sibling		6	Y	Y	Y	Y	Y	
		Jul-09	Green 2	4	Full Sibling	Half Sibling	6	Y	Y	Y	Y	Y	
		Jul-09	Green 3	3	Half Sibling	Half Sibling	6	Y	Y	Y	Y	Y	
		Jul-09	Yellow 1	12	Half Sibling		6	N	Y	Y	Y	Y	
		Jul-09	Yellow 2	6	Full Sibling		6	N	Y	Y	Y	Y	
		Jul-09	Yellow 3	4	Full Sibling		6	N	Y	Y	Y	Y	
		Jul-09	Orange 1	6	Full Sibling		6	N	N	Together	Y	N	
		Jul-09	Orange 2	5	Full Sibling	Half Sibling	6	N	N	Together	Y	N	
		Dec-09	Purple 1	14	Full Sibling		6	Y	Y	Y	Y	Y	
		Dec-09	Purple 2	10	Full Sibling		6	Y	Y	Y	Y	Y	
	D	Dec-09	Purple 3	6	Full Sibling		6	Y	Y	Y	Y	Y	
		Dec-09	Pink 1	11	Full Sibling		5	N	Y	Y	Y	N	
		Dec-09	Pink 2	9	Full Sibling	Half Sibling	6	N	N	Together	Y	N	
		Dec-09	Pink 3	9	Full Sibling	Half Sibling	6	N	N	Together	Y	N	
		Dec-09	Brown 1	5	Half Sibling	Half Sibling	6	Y	Y	Together	Y	N	
		Sep-10	Grey 1	12	Half Sibling		4	N	N	Y	Y	N	
		Sep-10	Grey 2	11	Half Sibling		6	N	N	Y	Y	N	
		Sep-10	Grey 3	10	Half Sibling	Half Sibling	6	N	N	Y	Y	N	
		Sep-10	Grey 4	9	Half Sibling		6	N	N	Y	Y	Y	
		Sep-10	Grey 5	8	Half Sibling		6	Y	Y	N	Y	Y	
E	Sep-10	Grey 6	6	Full Sibling	Half Sibling	6	Y	Y	N	Y	Y		
	Sep-10	Grey 7	5	Full Sibling	Half Sibling	6	N	N	N	Y	Y		
	Case Study C	F	May-11	Violet 1	12	Full Sibling		6	Y	Y	Y	Y	N
			May-11	Violet 2	10	Full Sibling		6	Y	Y	Y	Y	N
			May-11	Violet 3	6	Half Sibling		6	Y	Y	Y	Y	Y
			May-11	Violet 4	4	Full Sibling		6	Y	Y	Y	Y	Y
			May-11	Violet 5	3	Full Sibling		6	Y	Y	Y	Y	Y
	G	May-11	Turquoise 1	11	Full Sibling		6	Y	Y	Together	Y	N	
		May-11	Turquoise 2	9	Full Sibling		6	Y	Y	Together	Y	N	
		Jul-11	Lime 1	12	Full Sibling		6	N	N	Y	Y	N	
		Jul-11	Lime 2	9	Full Sibling		6	N	N	Y	Y	Y	
		Jul-11	Lime 3	5	Half Sibling		6	Y	Y	Y	Y	Y	
Case Study B	H	Jul-11	Lime 4	2	Half Sibling		6	Y	N	Y	Y	Y	
		Mar-12	Coral 1	12	Full Sibling		6	Unmoved	P	P	Y	Y	
		Mar-12	Coral 2	6	Full Sibling		6	Unmoved	P	P	Y	Y	
		Mar-12	Gold 1	9	Half Sibling	Half Sibling	6	Y	Y	Together	Y	N	
	Mar-12	Gold 2	7	Full Sibling	Half Sibling	6	Y	Y	Together	Y	Y		
	Mar-12	Gold 3	5	Full Sibling	Half Sibling	6	Unmoved P	P	P	Y	N		
	Mar-12	Gold 4	4	Full Sibling		6	Unmoved P	P	P	Y	N		
	Mar-12	Gold 5	2'11	Full Sibling		6	Unmoved P	P	P	Y	N		
	School Trip	Olive 1	10	Half Sibling		5	Unmoved P	P	N	Y	Y		
	Illness	Olive 2	5	Half Sibling		5	Unmoved P	P	N	Y	Y		
	I	Jun-12	Peach 1	10	Full Sibling		6	Unmoved	P	P	Y	N	
		Jun-12	Peach 2	7	Full Sibling		6	Unmoved	P	P	Y	Y	
		Jun-12	Peach 3	4	Full Sibling		6	Unmoved	P	P	Y	Y	
		*	Jun-12	Maroon 1	6	Half Sibling	Half Sibling	6	Unmoved	P	P	Y	N
Jun-12		Silver 1	5	Full Sibling		6	Y	N	Together	Y	N		
Jun-12		Silver 2	4	Full Sibling		6	Y	N	Together	Y	N		
Jun-12		Silver 3	2'11	Full Sibling	Half Sibling	6	Y	N	Together	Y	N		
Case Study D	J	Jun-12	Bronze 1	6	Full Sibling	Half Sibling	6	Unmoved	P	P	Y	N	
		Jun-12	Bronze 2	4	Full Sibling	Half Sibling	6	Unmoved	P	P	Y	N	
		Nov-12	Navy 1	11	Full Sibling		6	Unmoved	N	Together	Y	N	
		Nov-12	Navy 2	8	Full Sibling	Half Sibling	6	Unmoved	N	Together	Y	N	
		Nov-12	Navy 3	10	Full Sibling	Half Sibling	6	Y	Y	Together	Y	Y	
		Nov-12	Navy 4	6	Full Sibling		6	Y	Y	P	Y	Y	
		Nov-12	Lilac 1	5	Full Sibling	Full Sibling	6	Unmoved P	P	P	Y	Y	
		Nov-12	Azure 1	3	Half Sibling	Half Sibling	6	Unmoved P	P	P	Y	N	
		Nov-12	Azure 2	4	Full Sibling	Full Sibling	6	Y	P	Together	Y	N	

CODE

- N No
- Y Yes
- P Potentially
- Singleton foster child, merged as pseudosibling within Group 1
- * Singleton foster child, merged as pseudosibling within Group 1

35 placement decisions were changed post-therapy (50.7%)

6.3 Case Study 1: Green Children

This case study illustrated the structure and sequence of play therapy from the beginning of the therapy, to the redefining of placement decisions around the children's care plans and gives an insight into the children's perspective of their relationships post-separation during therapeutic sibling contact.

I intend to describe a piece of work with a sibling group of four children as they approach the reality of separation and potential adoptions. This first case study also gives the reader a sense of the structure that was common to the work with all 22 groups in my study. This account charts the processes of the group work sessions and what preceded them and describes the decision-making process around the designing of the children's future placements, followed by the first of their three therapeutic post-adoption sibling contacts (T1-T3 see Diagram 1, Chapter 4). This particular case study depicts;

1. The children's availability to play therapy methods; I have incorporated the children's engagement with play therapy materials and exercises in this case study.
2. The reconstruction of seemingly impossible, dysfunctional sibling dynamics,
3. The impact of trauma on each and all of the siblings as a result of abject neglect and domestic violence,
4. Hope in the midst of organisational despair,
5. Contact concerns,
6. The play therapy material brought to the fore the particular sibling dynamics and their emotional availability to be reconfigured therefore alternative placement decisions to the ones previously considered in the children's permanency care plan.

Child Green 1	6 years, male
Child Green 2	5 years, female
Child Green 3	3 years, female
Child Green 4	Not included in group work - 1.9 years, male

6.3.1 Play Therapy Group Work

The group work that the Green children participated in comprised of 3 sibling groups:

1. The Green's: The three oldest attended. Child Green 4 did not attend but was represented by an empty cushion with his name on it.
2. The Yellows: A sibling group of 3 children aged 12, 6 and 4 years.
3. The Oranges: A sibling group of 2, aged 6 and 5 years, with an elder half sibling aged 13 who lives with a relative and is not in the care system.

All the children attended all 6 group work sessions. From the outset of this practice intervention I was aware of the emergence of particular codes and themes which I have collated and discussed in Chapter 7.

All the children communicated their struggle with the notion of separation from their birth mother and their foster carers. They all spoke of family contact sessions, which seemed to resonate around issues of abandonment and primitive bonds with parental figures, particularly their birth mothers. Their foster carer relationships did not threaten this, and therefore did not compete in terms of parental replacement in the minds of the children, leaving the care giving tasks unchallenged to the foster carer. The younger children in the therapy group work joined each other with ease, using role-play and craft, puppetry, art etc. The eldest Yellow sibling struggled from a developmental perspective, as the others were considerably younger. I met with this older child separately prior to the commencement of the group work in order to describe the importance that this opportunity would offer in terms of giving insight into the particular care needs of himself and his younger siblings.

In the first two sessions, it became clear that the two younger Yellow siblings idolised their eldest brother but did not turn to him for care as they had adjusted to be parented by their foster carer instead of their (parentified) elder brother. By session 3, he had become painfully aware of this and was attempting to emotionally incur guilt when they omitted him from their play.

6.3.2 Therapy Session prior to Group Work, Green Children

I was asked to visit the Green children, who had been placed together in foster care for over a year. The care plan was for Child Green 1 (aged 6) and Green 2 (aged 5) to be placed together for adoption; and Children Green 3 (aged 3) and Green 4 (aged 1.9) to be in separate adoptive families. Severe domestic violence perpetrated by their father, and their mother's inability to choose to leave him, led to the sibling group's reception into care. An introductory therapeutic session in the home offered me a sense of the profound emotional neglect and as a result of the particular parental void this created, a deep pained grieving projected from this sibling group into me. Child Green 2 had a hateful rivalrous relationship with child Green 1, as he bullied her severely, whilst child Green 3 competed to be child Green 4, as he was the loved baby of the group.

None of the elder three were able to consider the needs of each other, but all were anxious to know that Green 4 was okay and tried to be near him. Green 3 sat close to Green 2, she was huddled holding her knees to her chest and whining endlessly. She would try to surreptitiously pinch Green 2 or kick her at every given moment. Green 2 in turn would take toys from Green 3, mimic her whining, and then quickly throw the toys to Green 1. Green 1 would jump off the sofas, ruin the puzzles of Green 2 and Green 3 and grab the lidded cup from Green 4. In my notes, I wrote "This sibling group is in a state of dynamic disarray, and I'm wondering at the nature of the birth parenting which has not been available to these children. Child Green 3 projects a deep distress and pining to be a part of relationships but has no positive rhetoric with which to engage with her siblings." The elder three children constantly threw fleeting glances towards each other, and I had a sense of fear, as if something was continually about to happen. I wondered about their hyper vigilance and fear that others might take something or attack. This seemed to be the hallmark of their intensive anxious sibling bond. At the same time a parallel hopeful thought though pervaded my thinking around

their 'knowing' and holding each other in mind. I therefore drew on this sense of hope that if they could know each other in a reconstructed 'well' way then their siblingship might be redefined. This was the revelation that the group offered to me at the beginning of my intervention."

6.3.3 Session One

All the children engaged readily in the play therapy group material of each session and recordings have been taken from professional notes made immediately subsequent to each session. I will use these in conjunction with the vignettes.

The children arrived tetchy, irritable, fighting, glaring... Child Green 3 cried over tiny things. Child Green 1 laughed to hurt her. In this particular sibling group, they played out their dynamics exactly as I had seen in the home. Child Green 1 tried to control the discussion of the whole therapy group of eight children. Child Green 3 clammed up, her face pulled in unhappiness, her arms tightly holding the torso. Child Green 2's high-pitched giggle nervously interrupted everyone's sentences and was the noise of the whole group. The children in the group work session used puppets to convey messages to anyone they wanted to. Child Green 1 said "...I love mum and dad, and R (a much older half sibling)." Child Green 3 said "Green 1 winds me up all the time" and cried. All three children said they wanted child Green 4 in their shoebox-world-house (a group activity); but none of the rest wanted each other, placing their tiny paper template siblings outside of their boxes. Their foster carer 'Nan' was put inside each of their boxes.

Following session one, I recorded "...I was overwhelmed by the fractious unhappiness and utterly dysfunctional ambivalent and negative relationships of this sibling group. I wondered about the parental projections being enacted between the children. I wondered about the nervously giggling female and something of the female victim who

was being domineered by the male. Yet strangely, sisters Green 2 and Green 3 remained within touching distance of each other, but their internal conflicts caused Green 3 to hurt continually. I wondered about the extent to which domestic violence had impacted upon this sibling groups way of relating and affected the emotional tone of the children's sibling dynamic. Green 1 conveyed his grief and ambivalence around loving magical parents, who violated each other, leaving him to feel responsible for protecting his mother. I had a sense of a fused sibling relationship around this complex neglect, loss and isolation. Many questions ran through my mind... Could this maladapted sibling pathology be reconstructed, and if so, how?"

6.3.4 Session Two; Trauma

Child Green 1 is completely focused on the initial activity of drawing something in his 'circle' (paper mandala exercise). His hair touches the paper as he draws and shields something with his arm. A tall, narrow, strong, dark outlined house, many windows and no door. A dark figure, taller than the house with a long trailing barbed tail, hangs in a foreboding way over the roof and down the side of the house. He adds multiple stroked, tiny details to the figures form... "That's what's in my circle today..." I quietly say "This person is the most powerful one, he's shadowing over the whole house. You know exactly what he looks like." Child Green 1 nods. I suggest that only whoever might be in the house knows what's in the house, as other people can't get in. He continued to hold his arm around his work. I commented that no one outside could see in, and there was no door. I repeat that "There is no door." Again, Child Green 1 nods and focuses intently on my eyes as I speak. Again, I wonder about his hyper vigilance, guardedness and need to be understood and emotionally contained. In the countertransference, I had a sense of enormous sadness that this child was sharing something huge, looming, secret and dreadful with me. There was an overwhelming sense of a sinister pervading, presence and attack, portrayed by 'the tailed one'. I was aware of a state of crisis and fear of something deeply hidden being revealed and flooding the therapeutic space.

Child Green 2 drew a rainbow, all 7 colours all very separate, none touching each other. Two tiny flowers on a thin, solitary line of green grass. Many raindrops at the starting end of the bow. She giggled incessantly as she dashed the raindrops. She grabbed coloured pens as fast and quickly as possible, holding them tightly as if protecting from an expected onslaught. I had a sense of hopefulness and her capacity for new possibilities and emotional developments. She also conveyed a combined sense of joy and chaos, as new material emerged in front of her eyes (the raindrops). She also portrayed something of herself beside another (the two flowers) and need for maternal reverie and containment.

Child Green 3 tried to draw. She threw her pen down on the circle of paper, folded her arms tightly across her chest, stuck out her lower lip and whined. Then she grabbed at her sister, Green 2's stash of pens. A fight ensued. I quickly gathered more pens and taking them over to her, gently calmed her, "Shh, shh". I guided her to touch her own pile of pens. She pulled away from me, sat upright, legs crossed, arms tightly folded and whined. She grabbed to her sister's pens again. I repeated my response and this continued throughout the time of this particular exercise until at last, she lifted a pen and tried to copy a singular arch of a rainbow. Then she threw the pen down, having completed only two thirds of that singular arch. I was struck by how little she could manage compared to the rest of the whole group, and how much support she needed in order to accomplish something. At the same time, she needed a form of contact with her sister and required intense adult support to manage to begin a process she had never been able to accomplish.

The drawing activity offered the children a way of engaging with their own states of mind, using the simple statement, "This is a drawing of anything you want to from your world." It was blatantly obvious that the older two children could not share with Child Green 3, and that her sulking and whining seemed to be a way of expressing her internal unhappiness and

helplessness. There was little evidence of any reciprocity at this stage in the group sessions. Following the session, I spoke with the foster carer and asked her to actively concentrate on short moments of reciprocal play which needed to be constructed, overseen and achievable in order for the children to develop any sense of comfortable engagement.

This style of sibling interaction was repeated time and time again between many of the siblings throughout the course of the practice innovation. All of the children offered multiple examples of having shared environments and a possessing special knowing of their early life family experiences and dynamics. Kriss, Steele, M. & Steele, H. note that these children's experiences are such "that few others are ever privy to – which helps form and maintain a bond that withstands differences, conflicts, and ambivalence." (2014, p.84). Sadly, the power of the dysfunctional dynamics that have emerged as a result of parental void (Dunn, 2007) often become the main dynamic focus in the thoughts of professionals working with the sibling groups, as they became overwhelmed by these powerful projections of the children. The sense of a possibility of a shared family environment quickly evades the professional mind-set, as concerns turn to how any parent figures could manage multiple emotional maelstroms. For siblings to become emotionally re-attuned requires intense caregiver sensitivity and therapeutic engagement, which over time may re-inform the internal working models of each of the siblings, in order to reconfigure the emotional landscape of the sibling group.

When considering child Green 3, I had wondered about the hostile sibling relationships and her compromised position upon the birth of the new baby. The file material reported their mother had a much more sensitive relationship with the new infant and in turn, he seemed to have a bonded relationship with all his older siblings. Therefore, the existential threat of early siblinghood and void of parental love seemed to leave her unresolved, creating intense conflict and projected pain so that her every action was to inflict pain or blame her older siblings. Children Green 1 and Green 2 displayed the marks of "discordant-familiar siblings (wherein) the resultant relationship was highly competitive." Stocker (1994, cited Milevsky 2011, p.26) found a positive correlation between maternal warmth and the warmth of sibling relationships.

The file notes described how their mother had suffered from postnatal depression after the birth of child Green 3 but showed marked joy at the birth of child Green 4.

Throughout group work sessions, I mentally tallied points of both physical and emotional ‘contact’ between the siblings, as a way of noticing their emotional bonds.

6.3.5 Session Three

The children engaged in individual sand trays.

The eldest of the Green siblings, child Green 1, had copious fighting characters. He flung sand from the tray, falling backwards himself. All his characters were male. The 5-year-old sibling, child Green 2, chose every fairy available to her and many jewels. She was intent in ordering her world, only to have it sabotaged by 3-year-old child Green 3. She in turn snatched the items from her sister and held them tightly into her bent torso as she cried and rocked. She then used her legs to kick her sister who was trying to retrieve the stolen items. The youngest sister placed nothing in her own tray. The eldest brother did not engage with either of his siblings. The two girls cried, blaming each other for ‘not having.’ This took much mental and physical energy as group worker to negotiate the girls acrimonious position.

In session three, the group work menu focused upon the possibility of considering transition to an alternative family. A group exercise called ‘The Trees’ enabled the children using real tree branches and tiny paper people to begin to think about who is on their current, lived in tree, but might not be on a new, lived in tree.

All three sibling groups became very involved in this activity. The three Green children individually took their branches. Children Green 1 and Green 2 quickly grabbing paper people and naming them. Child Green 1 looked to me and asked if he could bring his

mum onto the new tree. He then asked if he could plant a tree right beside the new tree for her to live on. I wondered about his desperate need to be close to her, and almost having a sense of responsibility and feeling the need to look after her. Child Green 2 filled her current tree with her foster family and did not mention her birth parents. She did however include cousins. She was happy to engage with this process whilst Child Green 3 did not push the trunk of her branch into the plasticine base, so it simply collapsed. I moved to help her engage with the exercise. She cried and threw away the little people. I continually offered her pens and gingerly moved new template people to her side. In the end, she was able to put her foster carers and siblings on her current tree.”

The Puppets' Story; Addressing complex trauma, confusion, loss and anger through play

Sunderland (2000, p.2) says, “Everyday language is not the natural language of feeling for children. Their natural language of feeling is that of image and metaphor, as in stories and dreams.” She says that the therapeutic story acts as “an admission ticket into the child’s inner world... It speaks... within the realm of imagination rather than within the realm of cognition.” (Ibid. p.10)

Using a narrative approach, I offered the children the choice of fifty puppets with which they could create a story or play. Cattanach (2005, p.25) says that using narrative play stories, children can find a way of controlling their world as they think about what has happened within it. In the group work, I was aware of the children beginning to make sense of their lives and their experiences and look at the construction of events which have led to their current situations. Using this type of play, the children included items with relevance to ethnicity, culture and gender. The unfolding dramas are listened to by the therapist, who acts to offer containment and affirmation to the unfolding wisdom of the child. However, the children cascade ideas, unfurl emotions and find new sense as they share in the telling and listening of their sibling group experiences within the wider group.

There were two particular puppet plays developed by child Green 1, which then spoke to both his sibling group and the wider group membership.

The children all chose characters to make 'their' story. They created a tale where characters were travelling through a land, and there was trouble, and bad creatures flew in and attacked them and they screamed, hid and called for help. Then a Queen was introduced by child Green 3. The Queen of the land said they all needed a new castle to live in. The children journeyed around the room with their puppets, until child Green 1 said "I know, I know a story... It's about a Queen".

Here, he introduced his own therapeutic story relating it to his family history and current understanding of his care plan. I had a sense of what he might offer, so I interacted with his story. I quickly lifted a Queen from the puppet pile, who sat above the rest of the puppets and took her place in the story, saying she was "looking down at her Kingdom where she saw the children..."

Child Green 1 gathered four puppets representing his sibling group children, two boys and two girls, and then narrated the following. I continued "The Queen had a wise helper..." He joined, "The wise polar bear... Polo Mint." I interjected, "What's happening to the four children? Polo Mint told the Queen that they had a cross dad and an old mum, and the Queen said... 'Where do you children live?'" I asked. "With their foster carers" replied Polo Mint. I asked, "Show me, said the Queen."

At this point, the boy took the bear and made it pick out two fluffy animals. He said "Oh, the cuddly foster bear carers... "So, what do you need?" He said, using Polo Mint to the foster bear carers... "A new mum and dad for the children." He chose two plastic male and female people puppets and set them beside the cuddly bear carers. Then suddenly, he took up the polar bear puppet and said, "The cross dad and the old

mum came to visit the children and look, they got kissed by them both, but look, the cross dad beats up the old mum and then the bear throws out the cross dad". At this point, the boy threw the cross-dad puppet violently across the room. He then cuddled the female puppet and spoke tenderly to it in hushed tones about how sore it was for her. He then lifted up the Queen puppet and said "Polo Mint, this mum is hurt, she can't get away from the cross dad, she's so sad, she's thinking about her children, she loves them". Child Green I hung his head and made crying sounds.

I interacted and took up the polar bear puppet. "There is a plan... a plan to help the children which means their old mum will still know about them, but they will need a new mum and dad because old mum can't live without cross dad. There is a judge. The judge is the person who agrees the best and safe plan for the children". I took up an owl puppet to represent the judge. At this point, the boy took the bear and the old mum puppet and went to the kitchen area where I heard him talking aloud, dialoguing between the bear and the old mum. "The judge says it's ok... You can live with them too... You can live beside them... You can live in a room right beside their house... You'll be with them; they'll always have you... The judge says so... and the lady". At this point I ask "The lady?" He explains that the lady comes to see them and tells them about the judge and I understand him to be referring to the children's guardian.

I ask him if I can take up the bear again and the judge. I introduce another new aspect to the dialogue. "The children want their old mum to live beside them always, but if they are going to have a new mum, it would be too difficult for them all, and cross dad would definitely come back... So, instead, they need a new mum and dad who will make a promise to be in touch with their old mum every year with a special golden letter. The golden letter carries golden words and kisses to tell the old mum how her children are". At this point, I lifted up a dragonfly finger puppet that flew between the old mum and the children, gently 'dropping' kisses and saying they were all well.

Child Green 1 then says “They need a party with pizza and coke and marshmallows”. He lifted the old mum and cross dad and put them with the four children puppets. He enacted them all eating together and the dad violently beating up the mum. He re-enacted this party scene 3 times, and then said “It’s time to go and live with your new family... but mummy needs help, she needs someone”. At this point I took the bear and said that the mum could get help with her sadness and to keep her safe from cross dad. Child Green 1 then took the four children to the new tree branches where he had previously placed two paper adoptive figures. The tree branches feature in an earlier group activity, whereby the children consider who lives on which ‘tree’. The tree branches represent their birth home, foster home and future home, and they can place paper figures to represent people on their trees. “But the old tree can be right beside the new tree”. His voice took on a pleading tone. I took the bear puppet and said “Oh Polo Mint, the poor, poor children and the poor, old mummy... They can’t live in trees right beside each other anymore... They have to live in different places, but remember, the golden dragonfly will... (the children finished the sentence) ... “carry the golden letters and kisses to the old mummy”. At this point the children took the dragonfly and, in turn, flew it around the room, stooping to kiss the old mum puppet.

Cattanash (1994) notes that the “the past can be so painful that (it) can only be explored through a fictional creative structure, safety distanced from actual reality” (p.34) and that the world of stories presented can be mediated by the therapist, who can help sort out cognitive confusion present in the play and stories. Sometimes there is a process of re-storying, where the child can try out new aspects of self by taking on a role and exploring a world in that role. The therapist’s task is to be constantly affirming the child of the possibilities found.

Mills and Crowley (1986) consider the “phenomenological reality by which the therapeutic metaphor achieves its effect” (p.65). Firstly, metaphorical conflict is approached and then unconscious processes in the form of heroes, villains and obstructions can be tackled in the play. Eventually the story develops and allows for parallel learning situations to emerge,

wherein the child develops a successful way of considering difficulties. This is then followed by the metaphorical crisis beginning to find resolution, with the child developing a new sense of identification, and finally climaxing with a celebration. All of this was visible in child Green 1's story telling.

Following on from the puppet story, I had a sense that the children needed to continue to integrate important historical facts that resulted in the change of their family structure. I introduced a simple nursery rhyme melody on which the Queen's words could hang and be easily repeated and remembered by the children.

The ensuing song spoke to the anxieties, sadness, despair and hope that the puppets were able to come to through their story. As the children sang, they were giving voice to new realities and the music enabled them to hold onto the notions they had found and share them with their foster carers. Pavlicevic (2002) says that "This rearranging and expelling in music therapy is in part a catharsis, a release of pent up energy and emotion..." (p.34) The use of music is another medium to help the children take control and share in song a sense of what has really happened to them.

The Song

*"That's how we as a family will be (repeat 3 times), we'll live in a new tree;
We'll give golden kisses in a golden letter (repeat 3 times), to our mum and we'll not
forget her; We'll now live in a new family tree, and that's how we'll be family."*

Child Green 1 joined in with me, and was then followed by his youngest, crying sister, child Green 3. For the first time, this distressed child was able to use the metaphors to gather the family story and engage with her siblings in the process of making conscious sense of their life story. The children all began to sing over and over again, holding the various puppets between

them, for some 10 minutes. I was aware of the cathartic effect of this process. At the end of the session, child Green 1 recreated the whole play for his foster carers.

Landreth (2002, p.215) discusses the importance of the facilitative responses of the therapist, showing an understanding of the inner child. Throughout the puppetry, opportunities arose for child Green 1 to discover and develop new inner resources and sense making. He was able to have the opportunity for new self-direction and face the difficulties of domestic violence and the reasons why his mother could not therefore continue to live with them. This released potential for new understanding, and acceptance of a need for a new permanence plan.

6.3.6 Session Four: Hope

Levine (1997, 33) highlights that “play is the operation of imagination, not a fantasy... The goal of therapy is to replace therapy with imagination, to transform psychological space from an isolated, lifeless world... into a connected, vital field of play.” (cited in Schaefer, McCormick and Ohnogi, 2005, pp.136) Using the various sensory mediums available to the child through play therapy, they can engage deeply (crafts, modelling materials, role-play, sensory rooms).

Child Green 1 took plasticine and created ‘a blue dad’. He followed this by making blue tears, which he said were “for dad” and a flimsy plasticine ring which he placed on his own finger and said “was from dad”. Following this, he described how many of their pets had died, “First there were the fishes, then the guinea pig... and then the hamster. Everything just died.” I had a sense of this child grieving the death of family, reflected in the aspects of the pets. The reality of loss and sadness was quickly interspersed with anger, as child Green 1 would take the male puppet and flail him around the room. I wondered aloud at the fury of the puppet, whose physique would have been pained by the physical thrashing. Throughout this episode, Child Green 3 (youngest sister) sat quietly watching, her knees pulled into her torso and gently rocking. She tried to lift soft play dough, only to throw it down. She sat close to my side

and whined. Child Green 2 (eldest sister) picked up a puppet and said it was a “grumpy character, like I was the other day”. She played out a moody, grumpy puppet who then began to cry and said it was missing “Mummy... J (a cousin) and nanny.” Looking at her brother’s plasticine ring, she pronounced “I want a ring.” Child Green 3 immediately said the same, adding “...for Daddy.” The children appeared to be communicating negative and ambivalent feelings, and emotionally struggling.

In the countertransference, I was actively aware of a sense of loss, confusion, panic and ambivalence. However, child Green 1 had offered to me from his unconscious inner world the symbol of the ring. I reflected back to the children in the group that rings often help us to remember something important. As children commonly seek to represent belonging, I have in the play room various items that represent commitment. I offered each child a jelly ring and suggested this might help them to think of someone important to them. Each child was quick to put the ring on a finger, and then begin to suck it. As I watched, I suggested to them all that just as they sucked in the ring, so that person would always be important inside of them. I was attending to painful elements of mourning, and the complex loss of loving yet violent neglectful parents, which caused disturbance and confusion in these young siblings.

Following this, the elder two siblings Green 1 and Green 2 said they wanted to tell their puppet story again. They gathered the characters, handed them out to the whole group and retold it verbatim. The children ended by the automatic singing of the nursery song created in the previous session.

6.3.7 Session Five: Hope

In this session, child Green 3 arrived wailing with unrelenting consistency, interspersed with non-compliance and spitefully projecting her pain by directing physical attacks towards her siblings Green 1 and Green 2. However, during the sand tray time she noticed her sibling Green 2 gather pretty stones and went to gather some for herself.

This was the first time she had not taken them from her sister. She quietly and concertedly placed the pebbles with equidistance across the tray. She looked silently, and in the countertransference, I was aware of hope, possibility and new capacity for thought unravelling in the space for the first time. There was also the potential of something beautiful being noticed, however small and isolated it seemed in the tray.

Bradway and McCoard (1997) state “sand play is a form of active imagination, but the images used in sand play are concrete and tangible rather than invisible and intangible” (p.6)

Child Green 2 had covered the sand with sparkling pebbles and then returned to choose characters who she buried beneath. I had a sense that this graveyard seemed too vibrant, and therefore waited to see if the sparkling pebbles activated new possibilities. She placed small wooden houses across the top of the sand and said “I want the people to come alive again.” I wondered with her about wanting people to be alive and present. Suddenly child Green 3 interrupted, grabbing some of the wooden houses and dislocating the tray. Child Green 2 screamed “She’s ruined it!” I empathised with what felt unfair and sad, whilst also noticing that child Green 3 had for the first time, considered the concept of new homes by virtue of stealing from the role model her sister had offered. I supported child Green 2 and in contained the emotional chaos, she was then able to recreate her external representation of her internalised world. I wondered at Child Green 3’s desperate desire to have her sister’s emotional availability.

Child Green 1 continued to use the sand tray to expel his anger with regards to grieving his mum and his nan. He punched the sand, saying “I want to see daddy, I miss him.” I had a sense of the children struggling with the notions of separation and loss and playing out their unresolved grief. Throughout this session, each of the children continued to express their grief, sadness and anger with regards to the traumatic family material.

6.3.8 Session Six

Traffic lights; Explaining transition and the promise of ongoing therapeutic support

In this final session, I explained as at the beginning of every session, how many times we had left together, and how afterwards, they would see me again when it came to moving time. Using paint and glitter, the children were given the task of creating traffic light pictures. Mills and Crowley (Ibid. p.161) use the term ‘the artistic metaphor’ to describe how “the artist begins to transpose a reflective experience onto canvas.” I began to talk to the children about the meaning of traffic lights.

I asked the children the meaning of each colour and they were quickly able to understand the literal meaning. I then offered them “another way that the traffic lights can mean something for us.” I explained that the red light would change to amber when it was getting ready to move time, and at this point, I assured them I would come to talk to them and play with them about what this would mean. Then just after that, the light would turn to green and I would show them pictures of new parents and homes. I would then visit them in their first week once they had moved and continue with special play until they felt settled and safe. Throughout their painting, the children explored questions about new parents, new homes and leaving their foster carers. I explained to them that right now, they were on the red, and could use anything they liked to be sure of knowing that they were not moving yet. The children all chose craft items i.e. glitter, jewels, felt mosaic pieces, and added layers upon layers around the red traffic light. I had a sense that it was very important that these children felt very secure in the notion that they were not suddenly to be removed in a traumatic fashion; and whilst they were also conveying something of the goodness of foster carers, that fear of loss was represented.

Strawberry shoelaces; ‘Sibling Chords, a therapeutic intervention to convey ongoing sibling connection in the midst of transition

This particular activity was to offer yet another sense of assurance to the children, but this time with regards to the nature of their sibling connectedness.

I said to the children “You will always be brothers and sisters and nothing will ever change that. Whether you live together or apart, in the same homes, or different homes from each other. Whether you like each other, or don’t. You will always be each other’s brother or sister. So tie the strawberry shoelaces you have each got to your brother and sisters. Then, when I say go, start nibbling from your end until you all meet in the middle!” The children all loved this activity, not least because it involved a sweet. However, there was a sense of something shared, enjoyed that was fun and sweet of nature. At the end of this activity, they had to say to each other “You are my brother/sister, no matter what!” All three A children joined in this activity. Even child Green 3 did not whine!”

“Within this exercise, I was aware of them engaging in a sense of inter-sibling functioning and fun, bearing to be a sibling group and having a sense of cohesion. In this final session, the attempting of new behaviours had become possible and child Green 3 was able to momentarily notice that her presence was of relevance and enjoyed within her sibling group. I knew that in this process, these three siblings were only beginning to understand something of how their individual emotions were integral to the way they behaved as a sibling group. At the end of the final session, we shared in remembering the various things the children had found and learnt together, emphasising constantly on celebrating the progress they had made. I reflected to all the children that they had been able to play and think about what had happened in their own families, where they were now and why they might move to new families, even though it was unsure whatever might happen next.

6.3.9 Changes to Decision Making

Post group work, material from clinical supervision formed the thoughts that were taken into practice meetings to consider the future placement designs for the children. The rich narrative material from the children conveyed their feelings and displayed aspects of their sibling bonds. Sandelands and Boudens (2000) state that stories are “a kind of living form that objectifies feeling... The story’s dynamic tensions capture the listener’s interest and draw him or her into the story by eliciting curiosity about what will happen next... There are questions and unresolved issues to ponder.” (p.56-57)

The analysed group work material brought a new language to the decision meeting format, providing “a legitimate and recognisable vocabulary... to describe feelings as an essential part of human experience in the public and private fears of life” (Fineman, 2000 p.175). My role was to connect accounts which attended to the honoured emotions of the children and highlighted descriptions of their shifting sibling bonds in order to enable new communication and discussion to take place in the organisational decision making space. It was as if the professional group was now able to witness the emotionally authentic interactions of the children and make sense of their connections and consider which placement and adoption design would best suit each child and their whole sibling group. Ashforth and Tomiuk suggest that this work is the “emotional labour of front line service agents” (cited in Fineman, 2000 p185). In this decision making space, questions are guided by the narratives from the group, resulting in authentic service encounters. The material of the children inspired questions that attended to their emotional care in this process and changed the nature of the agency decision making as they questioned sibling separation in new ways. I was aware that the professional group question format was changing, and the organisation was beginning to ask questions similar to those in my own research proposal such as: How can we support the siblings better as they move towards adoption and have to negotiate separation? How do we make the best contact arrangements between the siblings and their different family configurations? What types of relationships have with each other? Hochschild (1983) argues that this is the difference

between an agent who moves from surface acting to deep acting. The act of ‘practice-near’ emotional labour was in progress.

Much organisational learning began to take place in the reflective space of this meeting, as the interpreted stories and analysis of sibling dynamics enabled practitioners to engage with new possibilities of sibling configurations. Suddenly, it became possible for all professionals present to engage in both aspects of positive and negative relational consequences with regards to transition, separation and new placement possibilities for the siblings mirroring the possibility of new engagements for them. It became possible to consider the reforming and reconfiguration of this sibling relationship, consequently readdressing placement permanency adoption configurations. The subsequent analysis of the sessions offered a sense of relational hope into what had previously been deemed impossible. As a result, children Green 1 and Green 4 (the non-attending toddler sibling) were considered to be placed together, on the basis that they were less developmentally contentious and competitive. Much therapy took place post-adoption in the adoptive home of children Green 2 and Green 3. There was a marked increase in child Green 3’s state of security, as the two sisters learnt to be with each other with the care of competent, therapeutic adoptive parenting and the compensatory sibling relationship of new older, adoptive family brothers.

6.3.10 Sibling Contact: 6 months Post-Adoption

Prior to this contact I was able to have the opportunity to therapeutically work with the two sisters (child Green 2 and child Green 3) and their adoptive mother, to prepare them for the ensuing contact. Child Green 3’s fears were around her memories of the dysfunctional sibling relationship she had as a much younger child in the sibling group. Child Green 3’s fears emerged around being bullied by child Green 1 and she cried and said “I never got to hold the baby (Green 4), I want to hold him.”

I was aware that the complex sibling DNA needed to be held in mind throughout the entirety of the contact experience, otherwise these children would not be able to redress some of the difficulties in their relationship on the actual day. I became the ‘photographer’ on the day, to be positioned nearer the children in order to facilitate any questions or relational awkwardness between them and provide photographic memory of their new configuration, that I might be able to construct some new moments between them all.

I arrived at the indoor activity centre before both families. The girls and their parents arrived first and looked anxiously towards the entrance as anyone walked through. The boys arrived. The four children ran and threw their arms around each other. Child Green 1 looked shocked but was smiling and asked simple questions “Are you alright?... Look how big you are!... Your hairs changed...” Child Green 2 giggled in a high pitched tone that I had not heard since the children had been together in foster care. She hugged child Green 4 tightly. He looked at child Green 3 and she came and hugged him. They ran off as a group of four into the soft play activity space. I positioned myself by the main play slide and watched the children zoom down in pairs. They screamed and giggled “Look at me, Jill! Look at us!”. They continued to run back and forth to me, as they circuited the play equipment. I had a sense that they were conveying delight at the new found functioning sibling relationship and that I was providing a point of reassurance, containment and shared experience. In the countertransference I was aware the children were balancing euphoria, and anxiety. The two girls (children Green 2 and Green 3) were keen to spend time with child Green 4, and then children Green 1 and Green 2 realised that physically they could playfully compete in the circuits, so separated. Child Green 3 bent down tenderly to child Green 4, cupping his waist with her arm and guiding him around the apparatus with her. They laughed and ran together. As time moved on, children Green 1 and Green 2 came back to me and told me they had found a small space. They said “It’s our family space!” They asked if I could go there with them. I took with me a bag of paper, crayons and felt tips as I had a sense of them recreating a therapeutic space. They started to talk about

memories of their old foster carers house, even child Green 4 in his toddler speech talked of how he had fallen down the foster carers stairs and hurt his head. "This is our space," said child Green 1. Then he asked child Green 2 if she could remember his dog; a husky dog whose name he'd forgotten but wished he could remember. She said she remembered the dog but not the name. As they talked and asked questions of each other, they drew pictures for each other and then asked me to take photographs of them. The eldest two made the younger ones stand up and rearranged the group in ordinal sequence. I talked with them about the fact that this was their order, but in their new homes they had another order too. This meant they could be brothers and sisters but could learn how to be with different mum's and dad's. Child Green 2 said "This means we're not fighting and crying all the time." Suddenly child Green 2 said to child Green 1 that he wasn't her full brother, he was her half-brother. She was clarifying her life-story facts, so I explained that even if they had different dads to start with, they had always lived together at mum's, and in foster care, and they were born from the same mum so they were brother and sister. She giggled, he said "I know!" They laughed and moved on. Once again, I had a sense of the children redefining their sibling bonds. Child Green 1 then asked child Green 2 about her new brothers (two birth children of the adoptive family) and he then struggled to make sense of the fact that somehow, there were two other brothers. Again, I intervened and explained how new family shapes exist but there was only one special 'him'!

At the end of the trip, child Green 1 came to me and said he felt sad. He said he wanted to see pictures of his sister's school. The sadness and panic in the countertransference required attention, and I reassured him of when he'd see her again and of the adults promise to make this happen. He needed to have concrete knowledge of his siblings' surroundings to make some more sense of their different environments. He handed the girls his hand-drawn picture of them with their two adoptive brothers, followed by another picture of his three siblings. Once again, I noticed his emotional generosity in giving his sisters his permission to be part of family in a new way.

I observed that this experience had offered all four much in terms of being able to reorder something of their sibling relationships and experience positive elements of their relationships with each other, devoid of the overwhelming dysfunctional emotions that had ruded their childhoods prior to adoption (aggression, jealousy, retaliation, unhappiness). Brodzinsky (1984) suggests that it is not “until children reach around the ages of 5 – 7, that they cognitively begin to grasp the meaning and some of the implication of adoption.” (cited in Treacher and Katz, 2000 p.85) Without doubt, the three eldest children were making new sense of their adoptions and the pain involved was unavoidable in the midst of the hope and happiness that the new possibilities of adoption had brought to them.

As a result, this contact was able to show how sibling groups can be emotionally, behaviourally and psychically reshaped with therapeutic mediated parenting. Whilst at the same time, their sibling bond attended to and honoured through therapy where necessary and with the continual input of therapeutic parenting. This contact offered an important opportunity for the children to develop their significant life-long relationships. The power of their common bond was tangible and the agreement for all to undertake three post placement therapeutic contacts would offer the families ways of becoming at ease and investing in each other, making further bi-annual direct contacts more likely.

6.4 Case Study 2: Siblings Coral 1 and Coral 2

Vignette from a group with a 13-year-old boy and his 6-year-old brother

This case study illustrates the age range potential of the model and the corresponding variations of perspective of the siblings around their organisational placement plans.

I have chosen this case study as it highlights the parentified older sibling’s predicament. This is a child who, in the absence of parental protection and mediation, had taken on the emotional tasks of protecting his younger brother in the midst of the trauma of domestic violence. Much of

this case study resonates with the material of all the older siblings who come into the therapeutic work. Whilst being the eldest, they still made use of the play therapy medium and used the group space to grapple with anger, ambivalence, loss and decision making, and used professional containment to receive support.

I intend to describe the journey of a 13-year-old sibling, child Coral 1, and his engagement with the group work process, along with the subsequent decision-making process in this case.

Child Coral 1 13 years, male

Child Coral 2 6 years, male

6.4.1 Play Therapy Group Work

The composition of this particular Adoption Sibling Group project included the nine sibling children who were from three sibling groups. Four siblings out of nine in one of the groups did not attend due to extenuating case related circumstances.

Therapy Group H

The group work that the Coral children participated in comprised of 3 sibling groups:

1. Coral: Two full brothers, child Coral 1 aged 13 and child Coral 2 aged 6
2. Olive: Two full sisters, child Olive 1 aged 10 years old and Olive 2 aged 4 years old, though with difference surnames.
3. Gold: Nine children, five of whom were members of this group work course They were already sub-divided into two groups; two half-sisters, Gold 1 aged 10 years old and Gold 2 aged 6 years old, living with one foster carer and three full brothers, Gold 3 aged 5 years old, Gold 4 aged 4 years old and Gold 5 aged 3 years old, related in a full capacity to the Gold 2 and living in another foster home. The four absent siblings were the older siblings from this large sibling group.

The room was set up with cushions placed in a circle on the floor to symbolise all the siblings from each of their groups. To the side, I had arranged for a separate zone for the use of the 13 year old boy, which included a box of equipment comprising of an Airfix car model, Meccano car set, Top Gear magazine, playing cards, magic tricks etc. Another zone had been set up with each child having a covered shoe box which they could develop each week in relation to thoughts about their family.

At the beginning of each session, the children were welcomed in the waiting room and then brought through to the group room. At the outset, child Coral 1 (the 13 year old boy) was given the permission to not have to be part of the group circle time, but I explained to him that could sit and observe the other children, and consider his younger brother's position alongside his own with regards to their care plans. The purpose of including him was to provide a space for him to notice and access otherwise inaccessible material in order to make sense of their future placement possibilities.

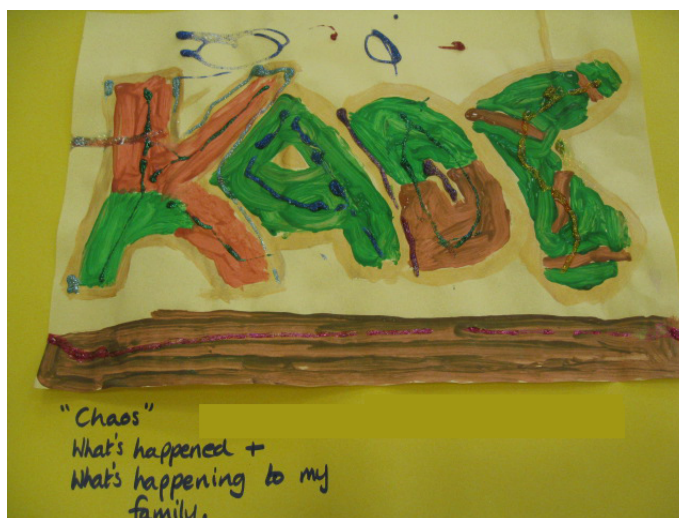
6.4.2 Vignettes from a 13 year old's group work journey

The boy known as child Coral 1 and his younger brother, child Coral 2, were placed in care as a result of domestic violence and low parenting skills. The brothers had been together in foster placement for two years. Child Coral 1 had been described as being very unhappy that his permanency plan was to separate him from his much younger brother, who was to be adopted. His Therapist had known him over the past year and said it had taken a long time to build up a relationship with him as a result of his anger. She advised me to think about his interests throughout of the course of the group work and feared he may not join with the process because of the age of the group membership.

6.4.3 Session One

On his arrival, child Coral 1 had his hoodie zipped over his chin, his head lowered, and his hood pulled and held up over his eyes. I described how he might use the space and gave him permission to engage with the group processes as he felt he could. He gave a barely discernible nod, entered the room and immediately took himself to the place where his 'zone' was to be. As the children introduced themselves, he did not, but his younger brother, in the cushion circle, introduced him for the benefit of the other children.

The children were talking about who they were, and what they liked, but child Coral 1 did not speak. I had described to them all that they were to take a shoe box and, using pencils and pens, draw on the top lid something about their family – the title on the box said "Your People".



Child Coral 1 lifted a box, took some biro's and, in graffiti style, in spite of being in his 'own zone' he took a box and wrote his name diagonally across the space with the word "KAOS" (chaos) underneath it. This offered a sense of how his world had been disrupted. Next the children were given some playdough, but he was given a packet of plasticine which he began to mould. The task was to make something about a favourite/special person or object. In complete silence, he spent the rest of the session engrossed in moulding something in that box.

I would glance towards him with a checking-in quality at intervals, and he would acknowledge with, again, a barely discernible glance and nod.

At the end of the session, after the other children had all spoken to their creations, I moved over to his space, leaving the co-worker with the group in their circle on the floor with the others. I simply gestured towards his shoe box, and he simply nodded. I noticed the intricate details of a lounge and games console area, complete with electronic wires to the screen, hand controls, and buttons on the games console. The lounge area consisted of single recliner chair, and some gym equipment. “So this is what you need”, I said. He replied with one nod, in silence. I thanked him for being in the space with the other children, and for carrying out the activities in his way. I reiterated that the purpose of him attending was to be able to notice what might next be happening for both him and his brother in this whole process of decision-making and care plans, and to begin to think about what he might feel about this.

As he left, he took the Airfix car kit home with him to make and said he would bring it back next week. These were his only words. I had a sense of relief that he had joined with me, and that he had said he would come back. Demonstrating he was able to use the space as long as I attended to and respected his developmental needs.”

6.4.4 Session 2

At the beginning of the next session, he arrived looking cautious and took himself to the side ‘zone’. His little brother became engaged in all the group activities. In this particular session the siblings were in their respective groups, painting their old houses. Sibling Coral 2 became very confused about the various houses he had lived in and his elder brother, in exasperation, came to his side and offered historic memory. He painted large, careless shapes in order of the houses they had lived in. His younger brother then painted them in and the paintings became heavier, darker, fuller. I simply looked at him and then the large sheet of paper, and just noticed that it seemed to be full of a lot of things. He nodded silently, and then the younger sibling said

“There were lots of fighting monsters.” His older brother sharply added, “They always fought, that was the problem!”

6.4.5 Session 3

As he walked into the group room, Coral 1 came alongside me, hoodie still zipped up, but hood down. He was almost shoulder-to-shoulder with me with more swagger in his gait. He immediately went to his ‘zone’. In this circle sharing time, different children spoke to changes that had taken place in the past week with regards to their families, i.e. contacts with birth families, visits from Children’s Guardians, court proceedings etc. He acknowledged that there had been new information for him as a Guardian had visited. He mumbled “My brother’s going to be adopted.” Whilst he was in my peripheral vision, my focus and vocal tone were projected into the circle of children on the floor, with whom I was sat. I said to his younger brother “So, there might be changes... There are new things to be thought about for you and your big brother: You might be adopted, and your big brother is going to ...” At this point, Coral 1 mumbled “Foster care”. The children had all shared something of the notion of being together or separated. I noticed Coral 1 watching the children throughout this process.

The task for the children in this session was to use a sand tray and show something that mattered about their family, or something that might change. He chose and gathered his sand tray objects with energy and fervour, as if hoarding something important and attending to thoughts with intent. His head was within inches of his sand tray for the remainder of the session. Towards the end of the session, the children were desperate to share with each other what was important in their trays. He looked towards me, and I suggested that he could speak now, or that I could come to him separately. He gave me his trademark nod as a signal that he wanted me to approach him separately. He waited patiently.

At the appropriate moment, I went to his side, and gestured into his tray with my hand. “Wow” I said in a quiet tone. He immediately began to speak. He started with the far corner where he

said it was his family. They were all but hidden under a sand mound within a carefully crafted polystyrene home within it. The four family members were all but visible inside, tiny dogs. On top, there was a “proowler” in the form of a wolf figure. The wolf (perhaps the Jungian archetype suggesting ancient wisdom) was heading upwards over the home mound. To the side of this, there was a large canine creature approaching a plastic institutional building. He said it was him and his dog. The largest character in the tray was this dog, and I wondered about his changing growth into puberty and age-appropriate ego-centricity. The largest building looked institutional and conveyed the institutions controlling his life i.e. courts, social services, therapists etc. To the side of the institution, there was a stile which he and the dog could cross (possibly to manage this journey), and this took him into a protected space that he called “The Waste”. It was surrounded by barbed wire fencing and accident bollards. I noticed aloud there where two worlds with the institution in the middle. He nodded as I spoke. I had a deep sense that this boy was able to use his creativity and the play activity to express the realities and sadness of what he perceived to be the case of his family life. He asked me to keep this for him for next week, and then he took a photo of it with his phone, and said he was going to show it to his therapist. I thanked him and said that I thought this was very important. He nodded and left the room to join the other children in the waiting area.”

6.4.6 Session 4

As I collected the children from the waiting room this week, I could hear manic high-pitched giggles and shrieks of fun. On opening the door, I saw they were all with the exception of child Coral 1 hiding, so as to be easily seen behind the various chairs in the room. They all giggled noisily. Child Coral 1 was perched on a child’s plastic car doing wheelies and smiled towards me. Their games had a sense of something both primitive and infantile.

During session 4, he immediately took an unopened packet of plasticine, already in his ‘zone’, and formed a sculpture. Whilst in the middle of this, he returned to his sand tray as the other children were doing. Using the symbols and characters from the previous week, he added

additional features. At the end of the session, as had happened in the previous week, he nodded to me to come and see what he had done. Once again, he had created zones in the tray, four zones. He said the first was his home, the way he had wanted it to be, all safely together with nothing bad getting in. Meanwhile, the prowler was still there. Was something wrong, wisdom present or both? I noticed that diagonally across the tray the mirroring scene was of the devastated domesticity of home. Zone two was his dog, who travelled with him past the plastic institution to look at zones three and four. Zone three was what he called “devastation”. This was so dangerous that he had put some netting over the ruins because “It could cause so much harm”. I noticed with him that even a small plastic table was upturned and I said that everything in their home had been upturned. He nodded and agreed verbally. Zone four was what he called “What I wished it was and what I want it to be”. In this zone there was a large shell and two houses. One house was a fantasy holiday home, and the other a tower block. He said that this was what it had been, and what he would like it to be, and in the end, he wanted to have it with his brother when he was grown up. He had placed a mirror in the middle of the tray beside the fantasy section. He said this was so that he could watch out for trouble and remember what had happened. I wondered about him having his “eye” on the bigger picture so that he could consider cautiously and carefully at the same time what had, was, and might happen. His dog was able to move more freely in a wider corridor of space between these zones, and his face was turned to glance mirror-wards, thus keeping his eye on it all. Then he showed me his plasticine sculpture. He had clearly given deep consideration to his sibling relationship as this was to provide a way for them to be together.



The model was colourful; it was a VW Campervan set upon a plastic mobile magic carpet. It had sliding side doors, which were open, and he said, "Ready for me and my brother to get in when we go travelling on holiday together". He told me that he was going to be a mechanic when he left school and he had started to read about VW's. He said that he was going to buy one for about £1,000 and it would take him time to fix it and get it ready to be able to take his brother on holiday. He said that he could be insured to drive it when he was 21, so that when his brother was 18, he would be 25 and they could find each other again and go on holiday.

At this point I placed my hand on his shoulder and said that I was amazed at how much he was thinking through a strategy, a plan, so that he could have that wonderful time and be with his brother again. A bit like his sand tray, where the future had something beautiful planned in it, but at the same time, that he realised how much the past had damaged what they could do and had changed how they could be together. He nodded many times. He asked me to keep this for him for the next session. He took photos to share with his therapist. I noticed in the countertransference a sense of achievement and that he was pleased that he could make a connection between the work in this group space with myself and his therapist. This group work therapy space seemed to contribute to his therapy work. I projected a sense of joy, creativity and artistry. He was able to design, consider and gather his plans for the future and the therapy space had offered him a way of doing this.

I was almost overwhelmed by just how much this boy had been able to manage the sense of the past, the present and the future in this space, pay deep attention to maintaining relationship with his brother. The sand tray conveyed the reality of his brokenness and disappointment, the sadness of the destroyed domesticity of their home. However, his resilience and capacity to hope was immense, and as such, offers me the hope that he will be engaged in the decision-making and planning process and have appropriate therapeutic support and care.”

From the outset, the Local Authority plan was for the boys to be separated because of their age and emotional availability with regards to being able to accept new parental figures. Therefore, the youngest (Coral 2) was to be adopted, and the eldest (Coral 1) was to remain in long term foster care. The plan ensured that child Coral 1 would be able to remain in direct contact with his birth parents. The Local Authority were concerned he would return to when he left foster care in four year's time, potentially destabilising his younger brothers foster placement and leaving him vulnerable to the emotionally destabilising material of further incoming foster children as well as the chaotic material of being reintroduced to his own birth family.

6.4.7 Changes to Decision Making

Active adoption family finding was continuing for child Coral 2 and the brothers remained in foster care, with their particular carer expressing a keen interest to continue fostering child Coral 1. Their birth parents wanted the boys to remain in care together, as did the children's Guardian. The Local Authority had continued to have concerns around the foster carers commitment to child Coral 2.

Meanwhile, I was asked by the courts and the department to revisit the brothers and undertake a short piece of task centred 'therapy' focusing on the boy's ongoing relationship potential for separation and provide comment. I met with my managers and service manager to re-offer my post group assessment, which was as follows;

“These two brothers are displaying deep affection and have a congruent bonded sibling relationship...”

The elder (child Coral 1) provided emotional support and a role model, whilst the younger (child Coral 2) provided the elder with a familial bond which was positive and without fraught dysfunctional dynamics. The children had already readjusted their sibling dynamics as a direct result of good mediated foster ‘parenting’, so child Coral 2 is no longer being evidently parented by child Coral 1, who now is free to engage in his adolescent world of music, peers and education. Child Coral 1 would struggle to engage with adoptive ‘parents’ as they conflicted with his powerfully held notion of parents. He was emotionally available to his foster carer, who enables parental engagement to continue. I had concerns Coral 1’s disapproval around the separate dual permanence plans would undermine the success of any future adoption.

Two years on, I met three times with the brothers. Child Coral 2 immediately engaged with me, keen to chat and reminisce about the group work. He displayed as a happy, confident child, speaking with clarity (previously requiring speech therapy) and talking freely to his carer about school, teachers, and referring frequently to his brother. When child Coral 1 arrived (later, from school) he sat down, and child Coral 2 immediately brought toys over to him to play with. He brought a plasticine craft kit. Child Coral 1 moulded the material whilst I explained that I had been asked to come and just be with them both, to get a sense of how they were growing up and their ideas about being able to think about their big, long term plan of how they would be cared for. Child Coral 1 glanced continually in my direction as I spoke.

He said he didn’t want his brother to be adopted, that they were doing well with their foster carer and she’d said they could stay with her. By the end of the session, he had produced a door plaque with his brother’s name. He said “Show them this, he’s my brother. Why won’t they listen to me?” In session two and three, he was likewise conveying the message he wanted, to be in foster care with his brother. I said I felt it would be useful for him to speak to his Therapist about these matters and maybe with his insight, write his own letter to the court; which could be

considered in the decision-making process. I contacted his Therapist, who was not currently working with him and suggested he critically needed support to have a way of thinking about and integrating his thoughts with the legal process. I suggested he write his thoughts in their sessions and perhaps present them as a letter to the court. I spoke to the foster carer on three occasions (with the fostering and service manager's permission) to explore and clarify her conscious and unconscious desires and feelings regarding long term care of both boys. She continued to say she wanted to look after them both.

The Local Authority's final view conveyed to the court was that the boys be separately placed with the younger adopted with much direct contact. This was not supported by the Guardian and the letter from child Coral 1 submitted and taken into consideration in court. As a result, a decision was made for the brothers to remain in long term, permanent foster care. In subsequent conversations with the Adoption Manager, I discussed the importance of all narratives being heard by all decision makers, to ensure that no solitary professional perspective or agenda could overwhelm the reflective organisational processes regarding sibling placements.

The longitudinal aspect of this group work model offers ongoing therapeutic intervention to attend to the children's needs and decision making throughout the lengthy process of family finding, transitions, new attachments and all legal proceedings. This service provision offers analytical rigour to the reflective thinking capacity of the organisational decision makers.

Munro (2010), p.41, 3.3) states that "Professionals in universal systems cannot and should not replace the function of social work." This model draws together the paradigms of social work and play therapy into the decision-making arena, facilitating practice, reflection and analysis to impact in the decision-making process in sibling placements.

6.5 Case Study 3: Case Study Vignettes from Siblings Violet 1 – Violet 5

The transition of three sibling boys to two separate bridging placements

This case study illustrates the complex traumas experienced within a sibling group as they consider impending transitions and separations from each other; and organisational responses to the children's mourning processes.

This case study conveys the impact of neglect and trauma, dysfunctional sibling dynamics, the importance of sibling memory, availability to play therapy methods and the organisations reflective capacity and ability to reconsider decision making around the children's care plans in light of the material offered by the children into the group work space.

Within this group, a sibling group of five children took part.

Child Violet 1 11 years old female

Child Violet 2 10 years old female

Child Violet 3 6 years old male

Child Violet 4 4 years old male

Child Violet 5 3 years old male

The children were received into care as a result of neglect and abandonment. The two elder sisters had been placed separately in foster care, as a result of their shared chaotic, rivalrous and aggressive behaviour, which had caused multiple placement break downs. Their three younger step brothers had been placed together. These boys were regarded by the department as a closely bonded threesome and based on their ages, care plan decisions were made for their adoption as a group of three. Their foster carer did not want to adopt the boys and displayed profound favouritism of boys Violet 4 and Violet 5.

The girls (Violet 1 and Violet 2) were thrilled to see their small brothers (Violet 4 and Violet 5). Running to them, grabbing them in tight embraces, kissing them, saying phrases such as “Our babies... our little ones...” The foster carer refused to allow the boys to take their coats off and said they must not get dirty. I wondered about what she could not bear, beneath the surface. The need to be tightly buttoned up and the fear of what might be conveyed. The boys looked to her anxiously. She too kept pulling the youngest two to her and kissing them. The eldest boy, child Violet 3, was left and tried desperately to engage with his sisters and his foster carer to no avail. So instead, he tugged on child 1e’s arm and tried to play with him, causing him to stumble and fall. Child Violet 3 was immediately reprimanded by his foster carer. This was the pattern of their arrival at every group session.

Once in the group room, child Violet 1 boasted to the other group members of her many detentions and boyfriends, whilst child Violet 2 commanded her two youngest brothers, children Violet 4 and Violet 5, to sit with her, kiss her, hold her hands etc. Child Violet 1 goaded child Violet 2 constantly, telling her she wanted to be adopted and did not want to be near her. Child Violet 3 sat untouched, watching and trying to engage with his youngest brothers, whose play was much more infantile and were more attuned to each other. He would try to tease child Violet 4, only to cause child Violet 4 to turn away, and child Violet 5 to cry.

In the following weeks, the two eldest girls found clarity around issues of identity and the sequence of abusive historic events that lead to their realities of being in separate foster care placements, with separate plans as a sibling group.”

6.5.1 Session Five

Sand Trays

All the children engaged in sand tray work. As usual, the youngest two siblings Violet 4 and Violet 5 moved their trays together and crossed their bodies between the trays, sharing and moving characters and objects. Child Violet 3 moved to join them and tried to add objects into the trays. They did not even notice him or turn towards him in any way, as they were so attuned to each other. Child Violet 2 gathered copious amounts of shells, stones and jewels. She placed a necklace in the middle of the tray and created ordered rows of the jewels and pebbles in rings around the necklace. The final outer ring was composed of shells. She was completely focused on the task. Child Violet 1 began to place houses in her tray, followed by characters. She said it was her family when they all lived together, and as she was placing items into the tray, her head and upper body bent close to the sand, she began a soliloquy.

“I get in... I get it... I get it! She went out of a night, all the time, we were left. She (child Violet 2) went to stay with our nan, because nan liked her, so I had no one. She (pointing to the character representing mother) went pole dancing so she’d be gone all night long. I was left with them (points to three small characters in the sand tray, and then nods towards her three younger siblings). They would cry (points to characters representing children Violet 4 and Violet 5) ‘coz they was only babies, and they was hungry (she now looks straight towards me and raises her hands in the air in exasperation) Well they would be, ‘coz there was nothing in the house, nothing in the fridge, no milk and I didn’t have anything to give them then (She cups her own breast area) ‘coz I didn’t have anything in those days. So I gave them water, but it didn’t stop them crying. So I put them in front of a DVD and they cried until they went to sleep.”

I quietly made empathic sighs throughout this rendition and something within me responded to the depth of abandonment and neglect, and asked the question “What was the DVD?”, “Hannibal Lecter.”

The Availability to Play Therapy Methods

Ginnott (1999) states that “Play does not connote its usual recreational meaning, but is equivalent to freedom to act and react, suppress and express, suspect and respect” (cited in Sweeney and Homeyer, 1999 p.18) The continuous play engagements enabled child Violet 1 to make a powerful discovery based on the information she had long held in her sensory and subconscious memories. As Siegel (2010) suggests, the therapist’s role is to serve as an attachment figure in the developmental journey of the client to make possible the trauma they had to face.

The combination of metaphor and imagination in play allow the elder sisters to come to new understandings about their mother. This vignette portrays how given therapeutic support, the two elder siblings began to understand the role and relationship of their mother and the impact of this upon their childhoods.

Suddenly, child Violet 1 began to cry. I explained to the group that they had all shared very sad memories (“rememberings”) that made sense of why they could no longer live with their families, and now it was making sense to child Violet 1. My co-worker gathered the other children around their trays whilst I motioned to child Violet 2 to come to her sister. She did, and the two held each other whilst child Violet 1 cried. She said to her older sister “You and me, we’ll live together when I come out of care.” Child Violet 1 replied “Yes, I’ll come out of care first and I’ll get a flat, and then you will come and live with me in the flat...” Child Violet 2 added “...and we’ll visit the boys... (She turned to the boys and continued) ... now don’t you never forget your name, that’s why it’s so long, because when they try to change one part of it, remember you’ve got the other parts so we’ll be able to find you that way.” (Referring to their triple barrelled surname) I spoke with the girls about the dreadful sadness they were both feeling, and that because their parents had abandoned them, they could not have

learnt how to manage together, so they had to be separated. We talked at some length, I with my hand gently on their backs to support them whilst they cried and hugged.

This vignette signified a critical moment of awareness in the children's understanding of the reasoning behind why they could no longer live with their parents, and therefore needed to have alternative care plans made. Silverstein and Livingston-Smith (2009, p.34) say that these sibling relationships validate the child's fundamental worth as a human being because the love he or she has does not have to be earned. Whilst their behavioural problems resonated in the face of each other, the children's unique bonds had a powerful life quality to them. This led me to working further with the girls to discuss with them what they felt their parenting needs would be in comparison with that of their little brothers, and the emotional availability the younger siblings had with regards to their capacity to receive new parental figures. I explained that the multiple traumas that they had both experienced had created for them such emotional disturbance and pain that the making of new attachments would be difficult. Both girls were emotional but agreed to some extent and showed an understanding of the reasons for their different plans.

6.5.2 Post-Group Work Sibling Transition: Sibling Play Therapy

Following the group work, the three boys' placements became tenuous and non-tenable; creating a situation where the boys had to leave urgently. It was decided as a result of the group work findings, that child Violet 3's emotional needs would be best met if adopted separately from his two younger brothers, in order not to be competing with them for affectionate and compassionate parenting, and their relationships sustained via considerable direct contact i.e. every school holiday, six times a year.

6.5.3 Session One

The purpose of this session was to tell all three boys that they were going to be moving from their foster placement to a bridging foster placement prior to two separate permanent long term

carers/adoption. The session included similar toys and activities as had been used in this Sibling Group Work Project, which the boys had attended six months previously. In this way there would be a frame of reference which might immediately assist the boys to re-engage with the subject matter of transition and loss. I undertook this session in the presence of the boy's social worker.

I had an immediate and strong sense that these boys now knew that something serious was about to happen. They sat down and I quickly checked they knew who I was and asked them if they could remember the 'Group Project'. They all nodded and immediately reminisced about the activities and people that were in their group. Using puppets, sand trays and branches of trees I began to outline the next phase of their journey/story. I reiterated to them how their family had changed so much and was going to change again. I talked to them about how some needed new mummies and daddies and some needed new foster carers who they would live with until they were big adults but that they would see each other. I used the branches to describe how they were going to move, like birds, from one tree to another tree. This would be their 'in-between-tree' (bridging placement) where they would get ready to move to their 'always' place. I likened this journey to the traffic light group work exercise: Red equating to stopping in a place/family, Amber to getting ready to move and Green as a time to go. I used the wording of 'four sleeps' in order to give the boys a way of understanding the timing of their move to the 'in-between-tree', i.e. their bridging placement. I described to them how they two youngest brothers would be staying in the same house, while child Violet 3 would be living in another foster family. I said this was because he needed to be allowed to be a very special, bigger brother who would get lots of love and care, just right for him and not just for the others.

I reassured the boys that they would be having contact with each other and able to speak on the telephone before tea times. I told them that I would be seeing them every week. I had a sense of child Violet 3 being resigned and matter of fact about the course

he was next to follow. Meanwhile in response to this discussion, child Violet 4 sat with his legs and arms crossed saying he was not going to move he was going to sit, repeating "I'm sitting, I'm not going, I'm sitting." He needed to vocalise what he could not manage and needed careful practice attention. I offered the children sand trays and child 1e was able to move the figure that represented himself between two other figures using cars conveying transition possibility.

6.5.4 The Negotiation of Sibling Separation: The Planned Transitions

The aim of this session was to take the boys and introduce them to their new respective foster carers.

Myself and two other social workers took the boys by the hands and talked to them about where they were going and who they were going to see. We said they were going to have tea with their new carers and then come back home to their current foster carers. We reiterated that there would be three more sleeps before they moved.

Once in the car, child Violet 4 talked through the sequence of events that they were about to go through with incredible accuracy. Both boys asked constantly about child Violet 3 and the fact that his bed was not going to be in their room. I sang the sequence of events we were about to go through to the boys and they joined in.

6.5.5 Separation: Follow On Session

The therapeutic work attended to the notion of siblingship in light of eminent separation.

Brother bracelets; Each boy chose a coloured pipe cleaner to represent themselves then they twisted all three together to make a bracelet to promise that even though they were going to be apart they would remember each other.

The boys asked me for the Haribo sweets which we had used in the Sibling Group as a way of remembering each other. I suggested to the boys we do this as we got into the car to say goodbye. So at the car doors the boys gave each other a sweet and said together that when they ate the sweet they would remember their brother was always deep inside even though they were not together. We reminded the boys they would speak on the telephone later in the day and then see each other altogether in four sleeps.

We talked about the process on the drive and this was interspersed with much infantile humour and songs of moving.

I promised them both that they would talk to their brother over the weekend and indeed they had a phone call before we left. I reminded them that in four sleeps time we would all play together again.”

6.5.6 Bridging Placement Work: Ongoing Therapy, Brothers Together Time

The longitudinal therapeutic model offers the opportunity to reengage the children in order to support them through periods of transition.

Place: Primary School

I called this ‘Brothers back-together Time’.

Child Violet 5 arrived and asked where child Violet 3 was “Will I see child Violet 3, when is he coming...” He hugged my shoulder as he spoke. Child Violet 4 and Violet 5 arrived together from the school canteen. The three boys entered the “Brother room”.

I asked the boys to draw big chalk drawings about what had happened to them or anything they wished to draw. They drew saying goodbye to each other and their new bedrooms and gardens. All this was interspersed with somersaults, chaotic circuits of the room all of which involved near accidents.

I explained to the boys that they were in their getting-ready time, getting ready, getting ready for their next families. Until then I would see them every week in the school Brother Room. Child Violet 3 quickly said bye, and that he wanted to get back to his class. He didn't look back nor did he move to hug his brothers. I wondered about him at last having his own space, and therefore being able to manage in a new way whilst at the same time defending against endings and transitions.

6.5.7 Sibling Goodbye Therapy Session

Profound thought went into constructing this particular ending session with this sibling group of 5 children. The children underwent extensive preparation for adoption and separation. The eldest two received support in conjunction with consultation from their experienced and committed social workers. The youngest three continued to be supported therapeutically by myself with the support of their social worker. Weekly work was undertaken with the three brothers together and central to this was the notion that they had different needs and therefore, would be separated for the purpose of the best possible parenting outcome for each child. Following this, the youngest two children began adoption introductions. At the same time, child Violet 3 was to meet his younger brothers new parent figures in order that he be included in the overall family design and felt that he was not being traumatically separated from them.

The Five Trees

In sand trays, the children built their own imaginary worlds. I noticed that all the trays had little plastic or wooden trees somewhere within them. I used this symbol as a basis

from which to engage with the notion that each had their own special trees, and from this metaphor emerged the following story.

The children co-constructed a story about a tree they all started on from looking at the photograph of the trees exercise in the group work. "Then what?" I asked. I offered them a very large sheet of paper and pens. They all said that the girls moved to their own care trees, child Violet 3 to his care tree to get ready for adoption, and children Violet 4 and Violet 5 to their new adoption care tree. I continued by saying that the trees were all separate. From each tree, there were strands of green wool which symbolised ways of staying in touch even though they would not all live together. I then reintroduced the jelly sweet rings used in the final group work session and also on the day the boys had separated with each other. Each child gave one to each other and ate them as a symbol of all being inside of each other's hearts. The children were told they would have a Brother Day in each school holiday and send letters to their sisters. Throughout this exercise, the children added leaves to the trees and drew the relevant family characters on each tree. This story was repeated and child Violet 3 asked questions. Then all three sat in utter silence sucking their thumbs and chewing their finger nails. Their parent/care-figures moved to hold and stroke their backs throughout this part of the process and hugged them all.

In the midst of adoption introductions, their goodbye which had been renamed to 'Til next time', was planned in which all five siblings were to be brought together with their relevant carers, parent-figures and social workers each present for all of them to ensure the children felt emotionally supported. Each child was able to retrieve memories from the group work. I said to them: "Well this is the time we were talking about, when you stay brothers and sisters but move into different houses and families. Some of you will be adopted and live a new mummy and daddy and some of you will live by yourselves with special foster carers". I introduced the elder siblings to the

adoptive parents of children Violet 4 and Violet 5. The adopters were emotionally warm and there was a sense of ease and co-acceptance between them all.

Dysfunctional Sibling Dynamics

The eldest two girls hugged the youngest two with strength and urgency, expressing their delightedness at seeing them. Child Violet 3 ran to hug child Violet 1 and Violet 2. Child Violet 1 produced a box of five large shortbread stars and gave them to each sibling. Then the two girls (Violet 1 and Violet 2) produced three large foil bags full of gifts for their brothers. However, their de-favoured relationship with Violet 3 led to him receiving less. He sadly offered sweets to all of them equally. The girls noticed and said, defensively, "Well, we'll see him again, he's not being adopted yet". As the biscuits were handed out, Violet 4 and Violet 5 were hugged by Violet 1 and Violet 2. Then Violet 4 and Violet 5 ran wildly around the room with child Violet 2, while child Violet 3 sat watching and then tried to enter the game. I offered them a box of long ribbons and referred back to an exercise in their original adoption sibling group preparation, where they had to think about the different road they might all live down. The sisters helped the brothers lay out their five ribbon roads and they were able to see how the two youngest ribbons would stay together while the other three would be separated from them, and from each other. After more urgent running around the room in which I had a sense of them expelling anxious material: Children Violet 4 and Violet 5 clambered on the backs of children Violet 1 and Violet 2, kissing their ears and clinging to their clothes. Child Violet 3 was always on the edge of the group. Sister Violet 2 was 'parentified' throughout, constantly attending to the younger two children's needs and talking to them as if their mother. Child Violet 1 sat close to her social worker and engaged in list making, to give information about Violet 4 and Violet 5 to their adoptive parents.

Throughout the session I returned to the metaphor of the five trees. Child Violet 2 said that she had wanted to be adopted, in the hope of being in constant contact with her little brothers. I explained she would not have the same access to her birth family that she currently wanted, and potentially not with her sister. With these reasons in mind, the plan for her to be adopted did not seem so appropriate.

Open Grief

I suggested we all sat together. I explained to them that the time was moving on and that even though they were not going to be all together for a long time they would always be in each other's hearts and that sometimes their hearts would be very, very sore and sad as they thought of each other. So I asked them what they thought they could do when they thought of each other when things were quiet or they were on their own, or may be even at night in bed. I offered them the bubbles. They began to blow and call out each other's names as the bubbles rose above their heads. Then child Violet 1 said she would pray for her brothers that God would protect them and look after them and know she loved them. After a few moments child Violet 3 said "I will pray for my brothers and sisters, that they are alright." The mood was quiet and thoughtful. At this point, child Violet 1 became quietly emotional and sat with her head down quietly sobbing. Child Violet 2 clung to her, in an effort to support her and then also dissolved into tears. I brought the adoptive parents quietly into the room. They sensitively talked with the children promising the girls they would love their brothers and write to them twice a year with lots of information about how the boys were doing. The adoptive parents and children all hugged together. After a few moments they quietly helped children Violet 4 and Violet 5 to stand from the huddle. The girls sobbed loudly, and so quietly and sensitively the adopters lifted children Violet 4 and Violet 5 from the room. The two social workers and I held the other three children. After a few minutes I brought all their foster carers into the room and they were all held by these sensitive, thoughtful people.

I had a powerful sense of being in the tragic presence of separation and fear of loss of sibling bonds. Where siblings were separated and deconstructed as a result of historical, generational and abusive factors. Where favouritism had bred rivalry and amplified conflict; where isolation existed and where roles had become enmeshed and constructed as a result of parental incompetence and utter parental void. At the end of this session I was aware that I had done everything possible to support the end of their physical relationship at this point and explained this to the children. At this point, the foster carers of Violet 3 had not planned to adopt him. However, they committed to six annual contacts between him and his younger brothers, which post-adoption increased further, as the adoptive parents developed good relationships. The elder sisters continue to be supported by social workers but were less available to therapeutic support and their fragile emotional states lead to a successive collapse of ongoing foster placements.

6.6 Case Study 4: Case Study Vignette from Sibling Navy 4

This case study illustrates the profound grief of a young sibling, the confusion of the older siblings and the organisational capacity to overturn the children's placement plans.

This vignette focuses on the experiences of a 5 year old girl, child Navy 4, who is the fourth of six siblings. The youngest two infants had been placed for adoption, the eldest two placed pending special guardianship, and the third child had shared a foster placement with her since they were admitted to care some two years previously. However, the guardian for children Navy 1 and Navy 2 had offered to be guardian for child Navy 3 since the care plan for child Navy 4 was adoption. The courts had said that child Navy 4 had to be prepared for adoption on account of her age, and to that end, their social worker suddenly moved child Navy 3 into the placement with his older two siblings, leaving child Navy 4 on her own. The children brought this material into the group work session the following day.

Child Navy 1	11 years, male
Child Navy 2	10 years, female
Child Navy 3	8 years, male
Child Navy 4	5 years, female

The group work that the Navy children participated in comprised of 3 sibling groups:

1. The Navy's: The four eldest children attended.
2. The Azure's: A sibling group of 2 children, aged 5 years and 3 years.
3. The Lilac's: A sibling group of 2, with the eldest child aged 4 years attending the group and the youngest child too young to attend.

6.6.1 Session Four

"I have no brother." (Child Navy 4, 5.5 years old)

The following case vignette practice example is taken from session three of therapy group J.

Child Navy 4 wailed and fell into my lap. As she slumped across my knees, I stroked her back gently and rocked. The room was silent, I was aware the other children were watching, frozen to the spot. In the countertransferential material made available to me, I knew my task was to gather the intolerable. I felt as if I was sitting in the midst of Bion's (1962b) 'nameless dread' (cited in Copley and Forryan, 1998 p.167). I said into the group space "It feels like there's no one anymore..." She continued to wail. I continued "Let's look.... Let's all look...who here is child Navy 4's brother or sister?" At this point, Navy 1, Navy 2 and Navy 3, who had been sitting in a frozen state in the group circle shot their hands in the air and shouted out that they were. "Come, it's your place to hug her." They then lurched across the space, landing on top of her prostrated body. Children Navy 1 and Navy 3 were crying also. I motioned to the co-worker to sit

between the other two sibling groups and reassure them that their sibling position was not changing.

I said to the whole group “Brothers and sisters will always be brothers and sisters, and that will never, ever be changed. You will always be tied together in your hearts, even if sometimes you don’t live together. Let’s get the strawberry shoelaces.”

I drew on the use of the previous week’s metaphor, where edible strawberry shoelaces were used to tie each sibling together in their sibling group. I wondered aloud into the group space, “Do you think it would help us to remember that wherever you live, even if it’s not together for some of you, you will always have your brothers and sisters in your heart. Even if some of you are a-dop-ted, or some stay with... fos-ter-care-ers or even guard-i-ans”

As we said the words together, the children automatically use the phonic clapping rhythm and hand actions that they have developed over the last two sessions to denote and help integrate understanding around the different types of permanency arrangements that they may have to encounter. I notice with amazement that they all showed an accurate understanding of the reconfigured placement plans. Another child from the group said “Child Navy 4 needs strawberry laces. The others all agreed. They tied themselves together in sibling groups, beginning to smile again. As I said “Go!” they all nibbled their strawberry laces together and giggled. I reiterated: “Your brothers and sisters will always be inside your hearts, even if you don’t live together, always, always.”

The children’s resilience seemed to increase in the group work space, and I wondered about them consciously being able to manage something of the notion of the possibility of separation.

The children in the group begin to mention other family members they love in relation to contact meetings and those they see no longer. They question the possibility of seeing relatives when they are adopted and some in the group struggled with the concept of indirect contact (letterbox only). I offered the children handfuls of seashells and suggested that they draw their important family members on the shells. The thought was to attend to the integration process of this complex emotional material.

The whole group engaged, except for child Navy 4, who loosely held a handful of shells and, still lying across my knee, let the shells tumble out of her hand. She weakly attempted to draw them back towards her, time after time, but they tumbled again and again. I had a sense that this was mirroring her internal world. The others in contrast, were busily creating complex shell family connections whilst Navy 4's eyes lifted sadly to notice the group...

After the group session I talked to child Navy 4's carers and said that I would ring them later in the afternoon, and again in the evening. I offered them some quick words about their containment function and strategies to use with Navy 4. I rang child Navy 4's carers one hour later. They had taken her to a park and have swung her in the swings. They were now at home and child Navy 4 was tucked in a soft blanket on the sofa with a hot chocolate and a Disney film. I rung them later that evening and they spoke to me about child Navy 4 rearranging the bedroom and placing a favourite toy on the bed of absent sibling Navy 3, before falling asleep."

With the benefit of years of clinical supervision from a wise academic practice supervisor, I have been challenged to develop a state of mind with which to be able to embrace the emotional work that such complexities of casework require. Hochschild's (1983) notion of emotional labour resonates with the therapist's engagement with both the children and the organisation. On another parallel, this emotional work and labour (Erickson, 1993) becomes the "instrumental task of the researcher in so far as we are required to extract in one way or another, rich and

valuable data... from the research subjects ... and, certainly in the case of a planned series of interviews (therapy interventions) to maintain a good enough relationship for this to take place.” (Beedell, 2009 cited Clarke and Hoggett, 2009 p.104) To sustain the relationship as therapist, consultant practice worker and researcher requires the consistent build-up of trust and rapport to “enable respondents to reveal sometimes intensely personal information about their lives and psychological states, (this then required of me) to present, react and respond like the real me, rather than as the artifice of the clinically objective researcher.” (Ibid. p.105)

By integrating psycho-social research with professional practice it was possible to inform all relevant professionals of the children’s states of mind and complex case dilemmas in order to engage them in the emotional labour of this work.

I will now describe this process in action by including an organisational vignette in response to the child’s group work material.

6.6.2 Multi Professionals Meeting; Changes to Decision Making as a Result of Insight into Placement Requirements

As part of the therapeutic model, I was able to offer therapy to attend to child Navy 4’s fragmented state. The decision makers needed to know how processes and court procedures had painfully left child Navy 4 in a limbo, resulting in her uncontainable emotional state. The boundary spanning role and task was to offer this child’s narrative material and codes back into the agency, in an attempt to create organisational thoughtfulness around her needs; in spite of decisions now seemingly intractable. The open planned organisational space i.e. the office, was to suddenly offer the possibility of enabling individual workers to be in touch with real concerns and to develop a collective depressive mind-set, shifting organisational thought and bringing new clarity to decision-making.

I walked into the Placements office. I noticed two managers (Fostering and Adoption). “Do you want to know about child Navy 4’s position now, I need to tell you; Have you got some minutes, I’ll get a room - I need to get the social workers together.” “Yes.” They both said, already rising to their feet. I hurried out of their side office and seeing Fostering support and Adoption family finding social workers I said only child Navy 4’s name, the side office, and ten minutes time. “Coffee, and notebooks – come!” “Right.” The only response needed. I ran down the stairs to the childcare team, said the same thing to child Navy 4’s social worker. This was a pivotal moment where professional energy and availability came together, and mine was the connecting role, linking organisation and child. Sadly, I also wondered at the workers being available in the computerised office space and not physically to the children.

“Ok. It’s simply this. You need to hear child Navy 4’s state of mind and think about her position.” I simply offered child Navy 4’s poignant phrase, “I have no brother”, which encompassed her codes and emotional realities. I gave a quick synopsis of the case material that had led to the multi organisational decisions pertaining to whole sibling group case plans. I then led with the three notions of;

- i. Child Navy 4’s shock and distress as a result of the latest critical incident of sibling separation,*
- ii. The state of sibling connectedness; past, present and future,*
- iii. The professional group thoughts.*

The discussion imploded and swung between case decisions and the children and professionals’ emotions. My task was to notice and offer back to the group the children’s projections and countertransference material available to us all. Then the group were able to consider the current placements and emotional needs of all the children in order to cause reflective shifts and resulting in the potential change to care arrangements.

I noticed how child Navy 4's projected emotions had impacted upon the professionals, and the countertransference material caused shock to be projected within the group. The ensuing conversation caused a rethink around permanency plans for this particular sibling group.

Following this, I went downstairs again to try and find the casework manager. On hearing the material from the above meeting, she immediately agreed with the inappropriateness of the original plans and decisions made in the earlier stage of legal and casework; and asked me what was necessary to be done to overturn these decisions and reconfigure the permanency arrangements for child Navy 4. She asked me to go to child Navy 4 and explain that she would not be going to be adopted. I said that the decision-making process had to rescind the previous adoption plan and then ratify the new practice intention. Once this was done, I could then incorporate the notion of sibling reunification based on clarity of facts and newly defined plan. I offered a working strategy with which to move forward.

- i. Case worker and fostering support social worker to undertake discussions with foster carer for the older three siblings, regarding their capacity to care for all 4 siblings, and if all in agreement, begin the process with the foster carer regarding becoming a special guardian for child Navy 4 also.*
- ii. Take child Navy 4 back to adoption panel to rescind adoption plans.*
- iii. Area team to go back to court to appeal decision for child Navy 4's adoption plan and separation from siblings with whom child Navy 4 has lived throughout her life.*
- iv. Once all of the above has been completed, I agreed to undertake further therapy with child Navy 4 and move forward reintegration with her elder three siblings.*
- v. Adoption team to work with the foster carers to securing SGO for Navy 4 and the necessary financial package to cover ongoing therapy needs.*

The culmination of the bringing together of all vested professionals, followed by the decision outcomes based on the upholding of the best interests of the child on this particular day have made the group intervention work worthwhile.

6.6.3 Transition; Possibility of Ongoing Therapeutic Support

I carried out a play therapy session with sibling Navy 4. She ran saying “You’ve come again”. I said that I had as I promised I would, when the day for the “green light” came. (In reference to group work activities involving traffic lights to denote stopping, thinking about moving and moving / transition.) “So is today the green light day?... Can I have my box house?” (referring to the shoebox exercise that ran throughout the six sessions of the group work five months previously. Here the children could move small world characters through the mid-box interior door; symbolising transition, leaving and meeting.) I said yes, and that we were going to use whatever the character’s child Navy 4 chose to represent family and carers, to tell child her story right up to this green light day, and then look at whatever happ... “ens next”, she finished. This was in reference to the name of the group work experience and title so, I was very aware of how much therapeutically stored material Navy 4 had available, ready to use in the work today.

Sand Tray

Child Navy 4 chose the characters to represent her siblings and herself. As a swimming mermaid, she swam back towards her siblings and began to give her soliloquy of her life story describing the abuse that had led to all being removed and placed in care. “So... Navy 5 and Navy 6... had to move to be ‘a-dot-ted.’” She used the rhythmic clapping from the group work to signify their new different configuration. “We (siblings) went to live with a foster carer, not nice... then another one... a lovely lady... then Navy 3 and me lived with my foster carers now, and Navy 1 and Navy 2 lived with theirs... I missed Navy 1 and Navy 2... they are with their ‘guard-i-ans’... (Child Navy

3 made circular arm movements, again devised by the children in the group work project to denote being 'guarded' or 'protected' by carers; under special guardianship order i.e.: their 'guard-i-ans'... "But my brother, (child Navy 3) and me were with our fos-ter-care-ers..." As she rhymed out the sequence I realised how much had been understood. "But where are Navy 5 and Navy 6? I miss them. Who looks after them... Will I see them again?" (Adopted infant twins) I explained that a new Mummy and Daddy had now promised to love and care for them, so they wouldn't be seeing their old Mum and Dad, or their brothers and sisters who still saw lots of the old Mum and Dad too, as their old mum and dad would find this too tricky and everything could go wrong. Throughout this explanation, she picked up the relevant 'characters' and played out the story I continued to tell.

"When Navy 3 left me, I cried. Why did he leave me? When he came back to see me, he cried too." Her face grimaced as if to cry. I explained the reasons for the changing of the care plan in terminology that we had been using together. I then went on to say how because of the group 'Whatever happens next', all the workers had been able to see how important it was that the brothers and sisters were together. and how dreadful it was when her brother, Navy 3, was moved. I told her that the big plan had changed, and that she was now going to be living with them all again.

Her face immediately lit up. I took her fingers and placed 3 digits together and then slid the fourth over tightly to the other three. I explained that she would see her birth mummy when they all the children had contact together, but not the Dad who had hurt her.

She replayed her sand tray story and then handed her foster carer the goodbye card she had made her. She hugged her, and said "I'm going to live with my brothers and sisters... Where's my things? Can I go in your car, Jill?"

She went to walk out the door, nonchalantly acknowledging the ending and asked me to carry the two small bags whilst she carried the toys. She did not look back.

During the journey, she talked constantly about her adopted siblings, Navy 5 and Navy 6, and I was aware that she was both mourning and coming to a depressive position with regards to sibling transitions and separations. She then used the word 'forever' and I said that the four brothers and sisters were now going to be together. "Where's my new door... I want to ring the bell... I want to say I'm here!" I had a sense she was regaining hopefulness and reclaiming her sibling status. She ran up the drive and rang the bell, and proudly held her shoulders back, and smiled. The female foster carer opened the door, lowered her body, held out open arms and smiled widely to welcome her. "I'm here! I'm coming to live with you and with my brothers and sister!"

At this point child Navy 2 came out to see the commotion at the door. Navy 2 gasped and grabbed child Navy 4 into a hug. Navy 3 came and did likewise, followed by Navy 1. They pulled her into the living room constantly hugging and holding her. Siblings Navy 2 and Navy 3 asked repeatedly "Is she really staying with us... really..." Navy 1 wept uncontrollably. This incredibly moving moment was heavy with sibling bond and thrill of reunification. Navy 1 collapsed into my side, and I held and rocked his fragile frame. I drew his foster carer in to embrace him, and she quietly reiterated "You see, you're all back together again."

The reintegration of this sibling group of four was made much more possible as a result of the boundary spanning role within the agency. The multiplicity of transformational organisational conversations, and the therapeutic group work practice being an integral part of placements policy and practice in the organisation; all creating the possibility for complex sibling placements.

Chapter 7

Emergent Codes and Themes; Findings from the Group Work and the Case Studies

In the interests of articulating what the model on which this study is based shows about children's experiences, I have identified 15 codes which are illustrated within this chapter and are evidenced in the Thematic Maps, discussed within Chapter 2. I have chosen to use the case study method of qualitative research in order to look into and elaborate upon the deeply embedded material where the children's complex communications are often embedded in their passive acceptance of the situation they find themselves in, over which they have no control. From this play therapy group work engagement, codes and themes are extracted from the 69 children from 22 sibling groups involved in 9 therapy groups. The children's data, codes and themes become more differentiated throughout the group work sessions and have been collated from post-session note taking. These 'expressive records' (Heron, 1996) offer a method of researching, enquiring into and capturing 'radical memory' (p.81), in order to inform the children's own understandings of self, as well as the therapist's and the organisation's ability to consider the children's psychic material and internal working models. The children's complex communications, which are rarely decoded because they are often embedded in recorded case material and accepted as part of a dialogue as opposed to questioned in order to expose or suggest their emotional positions.

This particular data offers a way of identifying what children on the brink of permanency planning show us; and enables thought about the particularities of their placement configurations in order to draw interpretive conclusions. The case studies offer a portrayal of a particular social world from which codes and themes resonate and enable the drawing together of conclusions about a type of phenomena of a particular population to which I have applied core theoretical ideas, in order to consider and comment on these codes and themes. The group work object of this social enquiry moves from the individual sibling to the group, and then to the multiple groups of siblings in care. There has been a typicality within the case studies

involved in this research, and I will consider the lateral and cross table distribution of dominant and anomalous patterns across the cohort, looking at the identifiable differences.

Through the supervisory process I have identified 15 codes and have allocated an approximate numerical occurrence of each code over the 22 groups of siblings. These were discussed in clinical supervision and evolved into an additional methodological development that I have drawn out in the course of these findings. At a certain point in time, these were revised and condensed into themes by the process of inductive coding (See Chapter 2: Thematic Maps Stage 1 and 2). This thematic analysis offers the potential for further development around each category (See Chapter 8: Implications of Findings), as my method is considered and tried out by others in ongoing research. Whilst these themes have emerged from my experience, other expressions of the model, codes and themes and representations may undoubtedly emerge in the future. This tabulation then provides a way of offering a framework for social workers and therapists to recognise the children's processes within an agency context.

I will now discuss the findings in terms of the coding and consider the percentage of each emergent code drawn from the cohort of sibling groups in this study. Play therapy became the observational instrument allowing for the recording of data in terms of the codes and themes. Detailed records were made following each group work session and these are the basis for what now follows.

I am now going to discuss these emergent codes (also referred to in Chapter 2: Methodology), as a way of signalling to the reader how a practitioner and therapist can work with children on the brink of permanency planning. This has enabled me to make links between what I have found both in the relevant literature and the data which has emerged from the children's material. In my discussion of these findings, I will draw upon both in order to produce a model which can be used in the field of adoption.

Table of Group Work Emergent Codes

Case Study	Therapy Groups	Individual Sibling Groups	Age	Grief: Open Grief	Grief: Related loss	Anger	Control / Parentified	Fear / Trauma	Confusion	Parental Idealisation - BP/FC	Conflicting Parental Models	Dysfunctional Sibling Dynamics	Insight into Placement Requirements	Sibling Memory	Professional Containment	Availability to Play Therapy Methods	Hope	Changes to Decision Making	Contact Concerns					
Case Study 3	A	Red 1	10	-	-	X	X	-	X	X	-	X	-	X	-	X	-	X	X					
		Red 2	8	-	X	X	X	-	X	X	-	X	-	X	X	X	-	X	X					
		Red 3	7	X	X	X	X	X	X	X	X	-	X	-	X	X	X	-	X	X				
		Red 4	6	-	X	X	X	X	X	X	X	-	X	-	X	X	X	-	X	X				
		Red 5	5	-	X	-	-	X	-	X	-	-	X	-	X	X	X	X	X	X				
		Red 6	3	-	X	-	-	-	-	-	X	-	-	-	-	-	X	X	X	X				
Case Study 3	B	Blue 1	10	X	X	X	X	X	X	X	X	X	X	X	X	X	X	-	X	X				
		Blue 2	8	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	-	X	X			
		Blue 3	6	X	X	-	X	X	X	X	X	X	X	X	X	X	X	X	X	-	X	X		
		Blue 4	5	X	X	-	-	-	X	X	X	-	X	-	X	X	X	X	X	X	-	X	X	
		Blue 5	3	-	X	-	-	-	X	X	X	-	X	-	X	X	X	X	X	X	-	X	X	
Case Study 1	C	Green 1	6	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	-	X	X			
		Green 2	4	-	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	-	X	X	
		Green 3	3	-	X	X	X	X	-	X	-	-	X	X	-	X	X	-	X	X	-	X	X	
		Yellow 1	12	X	X	X	X	X	X	-	X	X	X	X	X	X	X	X	X	X	-	X	X	
		Yellow 2	6	-	X	-	-	X	X	-	-	-	X	-	X	-	X	-	X	-	X	X	X	
		Yellow 3	4	-	X	-	-	X	X	-	-	-	X	-	X	X	X	-	X	-	X	X	X	
		Orange 1	6	-	X	X	-	X	X	X	X	-	X	-	X	X	X	X	-	X	-	X	X	
		Orange 2	5	-	X	X	-	X	X	X	X	X	X	-	X	X	X	X	-	X	-	X	X	
		Purple 1	14	X	X	X	X	X	X	X	X	-	X	X	X	X	X	X	X	X	-	X	X	
		Purple 2	10	X	X	X	X	X	X	X	X	-	X	X	X	X	X	X	X	X	-	X	X	
Case Study 3	D	Purple 3	6	X	X	-	-	X	X	X	X	X	X	X	X	X	X	X	-	X	X	X		
		Pink 1	11	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	-	X	X		
		Pink 2	9	-	X	-	-	X	X	X	X	-	X	X	X	X	X	X	X	-	X	X		
		Pink 3	9	-	X	-	-	X	X	X	X	-	X	X	X	X	X	X	X	-	X	X		
		Brown 1	5	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	-	X	X	X	
		Grey 1	12	-	-	-	X	-	X	-	-	-	X	-	-	-	-	-	-	-	-	-	-	
		Grey 2	11	-	-	X	X	-	X	-	-	-	X	-	-	-	-	-	-	-	-	-	-	
Case Study 3	E	Grey 3	10	-	-	X	X	X	X	-	-	X	-	-	-	-	-	-	-	-	-	-		
		Grey 4	9	-	X	X	-	X	X	-	-	X	X	X	X	X	X	-	X	X	-	X	X	
		Grey 5	8	X	X	X	X	X	X	X	-	-	X	X	X	X	X	X	-	X	X	-	X	X
		Grey 6	6	X	X	X	-	X	X	-	-	-	X	X	X	X	X	X	X	X	-	X	X	
		Grey 7	5	X	X	X	-	X	X	-	-	-	X	X	X	X	X	X	X	X	-	X	X	
		Violet 1	12	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	-	X	X	X	
		Violet 2	10	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	-	X	X	X	
		Violet 3	6	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	-	X	X	X	
		Violet 4	4	-	X	-	-	X	X	X	X	X	X	-	-	X	X	X	-	X	-	X	X	
		Violet 5	3	-	X	-	-	X	X	X	X	X	X	-	-	X	X	X	-	X	-	X	X	
Case Study 3	F	Turquoise 1	11	-	X	X	-	X	X	X	X	X	X	X	X	X	X	X	-	X	X	X		
		Turquoise 2	9	-	X	X	-	X	X	X	X	X	X	-	X	X	X	X	-	X	X	X		
		Lime 1	12	-	X	X	-	X	X	X	-	-	X	-	-	X	X	-	X	-	X	-		
		Lime 2	9	X	X	X	-	X	X	-	-	-	X	X	X	X	X	X	X	-	X	-		
		Lime 3	5	X	X	X	-	X	X	-	-	-	X	X	X	X	X	X	X	-	X	-		
Case Study 2	G	Lime 4	2	-	X	-	-	X	-	-	-	X	-	-	-	-	-	-	-	-	-	-		
		Coral 1	13	-	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	-	X	X	X	
		Coral 2	6	-	-	X	-	X	X	X	-	-	X	-	-	X	X	-	X	-	X	X	X	
		Gold 1	9	X	X	X	-	X	X	X	X	X	X	-	X	X	X	X	-	X	-	X	X	
		Gold 2	7	X	X	X	X	X	X	X	X	X	X	-	X	X	X	X	-	X	-	X	X	
		Gold 3	5	-	X	X	-	-	-	-	X	-	-	X	X	X	X	X	-	X	-	X	X	
		Gold 4	4	-	X	-	-	-	-	-	X	-	-	X	X	X	X	X	-	X	-	X	X	
		Gold 5	2/11	-	X	X	-	-	-	-	X	-	-	X	X	X	X	X	-	X	-	X	X	
		Olive 1	10	X	X	X	-	X	X	X	X	X	X	X	X	X	X	X	X	-	X	X	X	
		Olive 2	5	-	X	-	-	X	X	X	X	-	-	-	-	X	X	X	-	X	-	X	X	
Case Study 2	H	Peach 1	10	X	X	-	X	-	X	X	X	X	X	X	X	X	X	X	-	X	X	X		
		Peach 2	7	-	X	-	-	-	X	X	X	X	X	X	X	X	X	X	-	X	X	X		
		Peach 3	4	-	X	X	X	X	X	X	X	X	X	-	X	X	X	X	-	X	-	X	X	
		Maroon 1	6	X	X	X	X	X	X	X	X	X	X	-	-	X	X	X	-	X	-	X	X	
		Silver 1	5	-	X	X	-	X	X	X	X	X	X	X	X	X	X	X	X	-	X	X	X	
		Silver 2	4	-	X	X	-	X	X	X	X	X	X	X	-	X	X	X	X	-	X	X	X	
Case Study 2	I	Silver 3	2/11	-	X	-	-	X	X	X	-	-	-	-	-	-	-	-	-	-	-	-		
		Bronze 1	6	-	X	X	X	X	X	X	X	X	-	X	X	X	X	X	-	X	-	X	X	
		Bronze 2	4	-	X	-	-	X	X	X	X	X	X	-	X	X	X	X	-	X	-	X	X	
		Navy 1	11	X	X	X	-	X	X	X	X	X	X	X	X	X	X	X	X	-	X	X	X	
		Navy 2	8	-	X	-	X	-	-	-	-	-	-	X	X	X	X	X	-	X	-	X	X	
		Navy 3	10	X	X	X	-	-	X	X	X	X	X	-	X	X	X	X	X	-	X	-	X	X
		Navy 4	6	X	X	-	-	X	X	X	X	X	X	X	X	X	X	X	X	-	X	-	X	X
		Lilac 1	4	-	X	X	X	X	-	X	X	X	X	-	X	X	X	X	X	-	X	-	X	X
		Azure 1	6	X	X	X	X	X	X	X	X	X	X	-	X	X	X	X	X	-	X	-	X	X
		Azure 2	4	X	X	X	-	X	X	X	X	X	X	-	X	X	X	X	X	-	X	-	X	X
				44.9%	92.8%	65.2%	47.8%	72.5%	88.4%	78.3%	50.7%	76.8%	63.8%	73.9%	88.4%	92.8%	44.9%	53.6%	82.6%					

I have grouped the emergent codes from the children's material into four broad themes which pertain to the child and the organisation. I have grouped the children's themes into feelings expressed; mechanisms employed and internal resources demonstrated:

7.1 Categorisation of Codes

The fifteen codes can be broken down into four categories: feelings expressed, mechanisms employed and internal resources demonstrated.

7.1.1 Feelings Expressed:

- Open grief
- Related loss
- Anger
- Fear/trauma
- Confusion
- Hope
- Contact

7.1.2 Mechanisms Employed:

- Control/Parentified
- Parental idealism
- Dysfunctional sibling dynamics
- Conflicting parental models– Birth Parents/Adopters
- Sibling memory

7.1.3 Internal Resources Demonstrated:

- Insight into placements
- Capacity to use professional containment

- Availability to play therapy methods

7.1.4 The Organisational Theme:

Here there is one overarching theme identified in this study.

- Changes to organisational decision making (as a result of discoveries about the sibling's relationships arising from the group work)

In order to attend to these themes, I have drawn upon literature around the two key theoretical paradigms employed in this study, Child Centred Group Work Play Therapy and Psychodynamic Social work. These are summarised below and have been reviewed within Chapter 2.

- Group work play therapy with siblings (Sweeney, D.S. and Homeyer, L.E. 1999)
- The perspective of siblings in care facing separation (Hindle, D. and Sherwin-White, S. 2014)
- Therapy intervention with sibling sub systems (Skrzypek, K., Maciejewska-Sobczak, B. and Stadnicka-Dmitriew, Z. 2014)
- Bonds between siblings in care (Smallbone, M. (2014) In Hindle, D. and Sherwin-White, S. (Ed)
- How sibling loss and grief is supported in preparation for permanency plan (Unique contribution of this study)
- The capacity of the practitioner/therapist to know and bear the children's pain (Bion, W.R. (1989); Lanyado, M. (2018) and Hindle, D. (2014)
- Professional characteristics of the practitioner/therapist (Williams, P. 2002)

It was not until I had concluded the literature review that the children's data emerged into codes and from this, at a later stage, the themes became more differentiated. I returned to look at the data which I extrapolated from my rigorous method of recording, following each group work

session. This involved careful notetaking, photographing the children's work and record compilation.

7.2 Critique of Codes

I will endeavour to give a commentary at the cohort level from the emergent codes table and consider some of the main features of this particular cohort of children from these extracted thematic strands. Whilst not all the children consciously express or reveal all of the codes in the group space, the longitudinal timespan of the therapeutic intervention (T1-T3, See Diagram Chapter 4: The Model) gives the children an ongoing space in which to reflect, and codes continue to emerge as the children's new placement configurations prompt ongoing thought. Their familiarity with the play therapy method and continuity of therapeutic relationship creates a fast track for ongoing emotional processing. Further work and research would evidence data in terms of the pull through of the emergent poignant phenomena, as the children process their psychic material in conjunction with their developmental capacity to consider their internal dilemmas along the continuum of their placement journey. I will now comment on what is revealed to me clinically and supported by the systematic data shown in the table, exploring the various codes and discuss the meanings of the percentages with which these occur.

7.3 Grief

All the children except those still living at home who fear no actual threat of leaving their parents, express grief in either an open, related or ambiguous sense. Therefore, grief can be subdivided as a code into three sub-codes (See Thematic Map Stage 1).

I have categorised loss into;

- i. Open Grief: Emotions deeply expressed around grief, both verbally and behaviourally through play therapy group work.*
- ii. Related Grief: The loss of key characters, places etc openly expressed in play therapy group work sessions.*

iii. *Ambiguous Grief: Where there are no clear endings, rituals or makings and meanings for endings.*

In the course of the group work intervention 92.8% of the children displayed grief by both open and symbolic means through the medium of play therapy, in terms of their identity within their family.

Sibling Navy 4 (Age 6) wailed and sobbed, "I've got no brothers", (sibling suddenly separated from her 3 older siblings, due to care plans made prior to group involvement).

Sibling Lime (Age 12) had begun to self-harm, and wept, "It feels like I'm sleeping in a coffin every night because she's gone" (sibling separated from youngest sibling as part of adoption care plan).

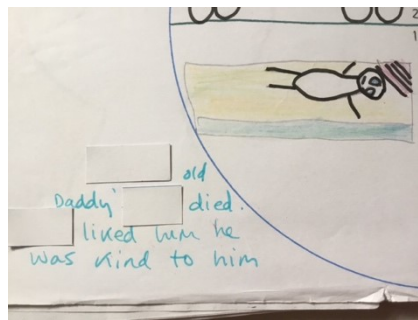
In relation to places they have lived and pets no longer with them etc. *"I don't get to see my dog."* Whilst 44% of them openly cried and discussed their grief. (Open grief), it was noteworthy that they often referred to loss in emotionless terms, such as "doing contact" and frequently using organisationally adulterated language.

The children constantly conveyed aspects of loss which resonated with them throughout the group work sessions, such as, *"I miss playing play station with my uncle",* and *"If I'm adopted then I lose everything I know...will I have a picnic with them ever? (referring to siblings)"*

Sibling Gold 1 (Age 9, severely autistic and with additional learning needs) created this dummy out of play-doh, with hung head and crumpled face said "I miss her, she was in the bath with me, she died ... this is her dummy."



This child had no idea where the male figure (with whom he had positive care giving associations) had gone and created a story that he had died as part of his mourning process.



Sibling Brown 1 (Age 5) drawing

7.4 Anger

The term anger is used to convey how the children express range and anger both behaviourally and verbally through play therapy.

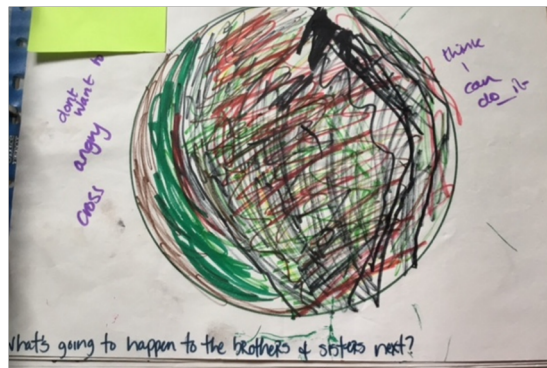
65% of the children openly and symbolically convey their anger in the group work space. In case study three; the youngest two children did not convey anger, but whilst they played conveyed a sense of manic movement rolling and giggling over each other whilst bodily placing themselves in the sand tray. I observed on many occasions younger children to play out emotional charge in this way, as they defended against their anxieties in relation to the material

projected into the group work space between their siblings. On these occasions the active presence of the co-worker sitting with the children contained them enough to enable them to discharge their latent anxieties. Various researchers and therapists report how ‘very deprived children seem to claim extra in a multitude of ways from the therapists’ (Lanyado p.69). More interestingly two years post transition and separation in his adoptive placement, the youngest sibling of this group required a period of therapeutic intervention as his primitive rage erupted in school. This was the point when began to consider the impact of his parental actions resulting in his sibling separation. He expediently referred back to photos of the symbolic group work material and their transitioning materials and was eventually able to become more integrated and re-establish a new sense of security at this phase in his life.

I consistently noticed how in the group space some of the children would speculate or display a voyeuristic interest in what the others were openly able to highlight and display symbolically or through narrative metaphor about their shared experiences and histories.

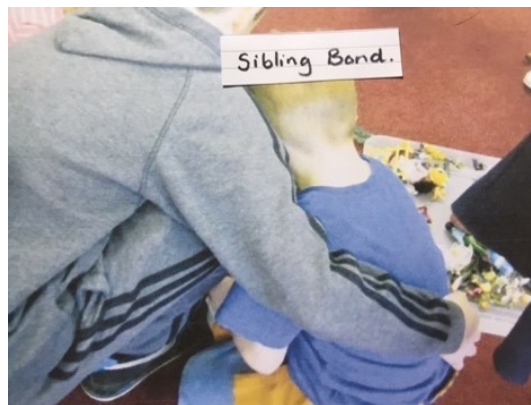
Sibling Green 1 (Age 6) “F... you! I don’t want to be adopted.” He ran around the room trying to kick other children’s work... He painted black faces and then said they were rubbish, he then painted the co- worker’s arms with black paint and looked into her eyes as she held his anger. 72.5% of the children in the study conveyed strong anger as they became more receptive to their own psychic material and aware of similarities and specifics of their historic knowledge due to the cumulative group understanding of why they were all in care and unable to return to their parents or families.

This involved the children commonly thumping moulding materials, artistically the conveying anger in their paintwork.



Sibling Green 1 (Age 6) drawing

7.5 Control / Parentified



Sibling Coral 1 (Age 13) and Coral 2 (Age 6)

This photo shows the elder sibling managing and taking responsibility to attend to the sadness of the younger

47.8% of all children in the study displayed material around needing to control or show attributes of parentification towards other siblings.

Violet 2 (aged 10) in each session, grabbed her youngest two siblings towards her, calling them “My babies!” She continually tried to kiss them on their lips and attend to their clothing.

7.6 Fear/Trauma

Fear and trauma refer to the children's ability to express frightening feelings during the course of play therapy, and this code was noted in 72.5% of the cases within this cohort.

The children displayed signs of multiple complex trauma in their play material; either in a cognisant way around that histories or in their unconscious symbolic play. While some children were openly manifesting and representing their trauma others were doing so in more vicariously or in a displaced way. Some of the children, in secure foster placements were able to hold a pragmatic logical way of verbalising and formatting what had occurred for them in terms of their family histories. *The dog died from stomach cancer and the cats died on a pole*" However once again the longitudinal nature of this intervention has offered me the ability to reengage with children's traumatic material as it represents in terms of the child's behaviour at a new point when developmentally the child has the capacity to shuffle towards conscious memory and psychic processing.

Sibling Coral 1 (Age 13) and Coral 2 (Age 6), Coral 2 said "I don't remember the houses but there's lots of terrible things, there's monsters, I don't like them."

Coral 1 replied, "Well that was just where we lived, it was like that, they fought all the time!"

Sibling Silver 2 (Age 4): "My rabbit's (puppet) got a wobbly tummy, he can't find his whiskers, he's pooing (child's flatulence pervades the play space) it smells".

The children conveyed their fear and trauma as a result of separation as they developed an understanding of the events which led to their being placed in care, using narratives and the play therapy mediums of puppetry, storytelling, art and sand trays.

7.7 Confusion

This term conveys the child's inability to make sense of self, relationships, experiences and chronological historic material.

Sibling Purple 1 (Age 14) and Purple 2 (Age 10), whilst looking at a toddler book titled 'What love is?' looked at me with complete confusion and the eldest (14) said "I don't know what love is". Another, "I've got a whole lot of worries, I don't know who my new Mum and Dad is or why our baby died". A 6 year old trying to remember where he had lived deferred to his older sibling "Did we live at number 54?"

Sibling Peach 1 (Age 10): She drew a profusion of swirly grey fog. She placed a sad face in the middle and said "it's falling, it had a hole in the top of its head, it's trying to think". (This brought to mind Winnicott's idea of a baby not being held and falling forever and ever.)

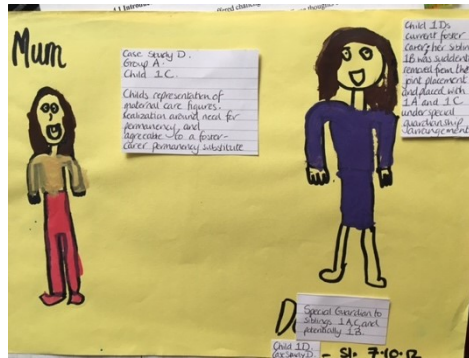
88.4% of the children conveyed their sense of confusion around events and regarding relationships within their family network. They were particularly confused about the catalogue and chronological order of events, specifics around family genograms, case workers and decisions etc. However, as the play therapy engagements progressed, clear moments of insight became available to all individual siblings irrespective of age and developmental ability. This led to new depths of understanding between the children both within their own group, and across the other groups; and provided each child with a unique sense of understanding, and control as they realised their situation now required particular permanency placements.

Further therapeutic work offered via the longitudinal nature of the model in order to support the children as they integrated and consolidated their sense of understanding about their lives.

7.8 Parental Idealisation

This concept conveys the child's sense of fantasy around their perceptions of birth parent and foster carer parenting models. Living with foster-carers offers the children order, whilst enabling continued contact where supervision potentially contains the emergence of toxic dynamics. As a result, the children develop new idealized perceptions and strengthened loyalties around parenting models available to them.

Sibling Peach 1 (Age 10, crying): "I just need to be able to stay with my foster carer, but I just need my Nan and my Mum".



Sibling Peach 1 (Age 10) painting

The complex notion of idealisation repeatedly emerged as the children defended against anxieties pertaining to the loss of their parents and the realities of parental/familial abuse and abandonment. Such plans offer both the care and legal systems ways of observing relational realities and parental viability at this point in the casework, sadly they permit the children to develop multiple fantasies and idealisations around notions of loving and able parents. In response to protecting the children and themselves from excruciating emotional realities, often foster carers defend against overwhelming emotional pain and conveying a notion that they offer consistency and stability. This translated to the children a notion of permanency with their foster carers which is seldom part of the organisational care/permanency plan. As a result, the play therapy group work space became a place in which these idealisations became activated and engaged with as therapists offered different possibilities to the ones the children presented. 50.7% of the children in the study conveyed a notion around parental idealisation throughout the course of the therapy intervention.

7.9 Conflicting Parental Models



Child Bronze 1 (Age 8): This photo captures the hope reached during the post-adoption therapy (T3) where the child eventually has the capacity and insight to manage the tensions of conflicted dual parental status. Note the acknowledgement of the therapeutic transitional relationship. This emotional position was not evidenced in T1 as the child needed to engage in the reality of transition and separation.



Child Navy 3 (Age 10), painting – New resilience as a result of support felt by adoptive parents, sitting in the front row watching her dance. Ghosts of birth parents foreboding in the wings.

This term conveys the child's unresolved conflict between birth and adoptive parental models. In the photographs above, both children highlight conflicts and reflections around negotiating dual sets of parents. Lilac 1 can be seen to engage with hope after two years of struggling to hold in mind and accept the notion of dual parents. Navy 3 paints their ability to be able to resiliently thrive being watched by new parents in the front row whilst her birth parents, whom she was gravely traumatised by, stand in the wings of the stage.

50.7% of the children in the cohort presented as conflicted around the notion of accepting or considering new parents. This occurred mostly for the older siblings who were directly engaged in relationships with birth family members and felt loyalty bound to reject any alternative permanent parental model. However foster carers did not present them with the same conflict, as they were not attempting to take the psychic role of parent. In case study 4, siblings Navy 1, Navy 2 and Navy 3 were not conflicted as they knew their plan was to stay in long-term foster care which would then evolve into special guardianship. In the case of siblings Gold 3, 4 and 5, these young siblings were already a closely formed subgroup who looked to each other as a source of security and therefore when were concerned about moving together then where they were moving to.

7.10 Dysfunctional Sibling Dynamics

This term conveys distorted sibling dynamics created by a void of parental mediation which is evident between the related siblings in the group work space.

It is impossible to understand the specific impact of traumas and histories on the children without understanding their chronological and dynamic position in their sibling group in relation to each other and their parents. Each child's identity is constructed in light of their symbolic relationships with each other and their parents; it is these unhealthy and internalised relationships that become re-enacted in the group space.

Often when a child does not present as having dysfunctional sibling dynamics it is because they are amongst the youngest siblings who have been removed as a very early age and placed into foster care where they are not having to be parented by older siblings and are learning to simply be reconstructed siblings children as a result of therapeutic foster caring.

Of the hundreds of photographs taken during the course of the group work, I have taken no photographs of dysfunctional sibling interactions as at that point, the therapist task is to ameliorate and enable the children to notice yet manage a live component that it too difficult between them. This intensity of mediation is therefore not something possible to photograph.

7.11 Insight into Placement Requirements



Sibling Coral 1 (Age 12) Sand tray

This child (Lion) powerfully showed his recognition of the need to move from a destroyed home zone (Upper RH Corner- buried white cup), with the help of the organisation (grey building) to new possibilities (Lower RH Corner shell etc

This concept conveys when children have shown evidence of gaining insight into reasons for their particular permanency care needs and bring to their therapeutic engagement deeply embedded wisdom to which they attach figurative language and creative or artistic expression I. order to present, organise and express their understandings.

63.8% of the children in the study became more aware of their individual and group parental needs in relation to permanency planning.

Sibling Coral 1 (Age 13): *“I am staying in my foster carers because I am seeing my parents, but my little brother needs parents...Dad went mad, it was a bad day, it all got ruined...things have changed, I am prepared to think”*

I was able to notice that as the siblings gathered reality around their own needs and those of their siblings, they began to be able to consider fearful material around their similarities and differences and the implications of this for their future permanency plans. The siblings were able to see and consider their ambivalent relationships and weep as they realised something about their differences situations in their family of birth and how this might mean they would need different types of alternative permanency care.

Whilst the youngest children often looked confused at the exact moments of separation, the continual therapeutic engagement allowed new transitional phenomena's the as they replayed therapy metaphors around separation and sibling relationships in the early stages of the new placements this was compounded by telephone calls from their older siblings to reassure them that they were together within each other.

7.12 Sibling Memory

The term 'sibling memory' is used to define how siblings offer historic emotional and intrapsychic memory to other siblings within the therapy group work.

73.9% of the children all referred to important memories about their various siblings during the course of the therapy group sessions. Gorell Barnes (cited in Hindle,D. and Sherwin-White, S. 2014, p.101) discusses how siblings helpfully expand one another's repertoires of understanding and build up ideas through reciprocal exchange which allows them to express their thoughts, feelings and fears more fully". Whilst I had noticed this occurring between siblings in single sibling groups I began to question how much more accessible difficult histories and feelings might be shared if the children were placed in multiple groups alongside each other.

One of the most helpful aspects of this intervention has been the multiplicity of interactions between the multiple groups of siblings allowing each group to begin to formulate their own memories based on the fact that other groups within the group space have the resilience and availability to be able to do so and share it.

Meanwhile whilst it is the youngest children who often require specific historic details to be given to them by their older siblings, it is them who facilitate their elder siblings avail painful emotional material as the younger children symbolically access irrefutable basic truths which the elder siblings cannot deny.

Sibling Bronze 1 (Age 6): *He placed 15 shells in the sand tray and wrote the initials of each of his siblings and cousins onto each shell. He then continued to describe moments with all of them and said "they're all so important to me, I need them all"*

Sibling Violet 2 (Age 10, crying): *"They're my babies! Don't take me away from my babies"*.

Sibling Violet 1 (Age 12): *"I was left to feed them even though there was nothing"*

7.13 Professional Containment

88.4% of the children in the study conveyed a request that they would be therapeutically held and guided through the processes of separation and transition and asked specifically for named worker support. I am drawing on the Winnicottian notion (1965) of the importance of the facilitating environment and the transitional phenomenal (1971b/1953) which describes the bridging of space from one emotional state of mind to another. Bion's concept of containment (1962) refers to the notion of being understood and having the incomprehensible elements of communication become more tolerable by virtue of being held, shared and tolerated by the maternal mind.



Child, Age 5 – Painting, holding the therapists hand

On many occasions, the children symbolised their need to be emotionally held using the therapeutic role. They will often reach to hold my hand; convey themselves as crossing a bridge with me or ask if I will be there at point of placement change. The photograph below is of a necklace I was wearing when a child referred to all the children in group work as beads that I would not forget, as they were hung around my neck.



Beaded necklace – “Them beads are all of us children, so you won't forget us”

7.14 Availability to Play Therapy Methods



In 92.8% of the cases, the children displayed having an availability to play therapy in the group work space. Those who didn't attend the sessions made up the remaining 7.2%. It can be noted that none of the children refused to engage in the various mediums of play therapy, which they could choose from in order to explore their own psychic material. Interestingly, play therapy was able to be taken up by all the children, ranging from the ages of 2.11 years old to 14 years old within the groups. The photograph above depicts children expediently accessing their sibling bonds, 'sibling chords', in visual and sensory ways through the medium of play therapy.

7.15 Hope

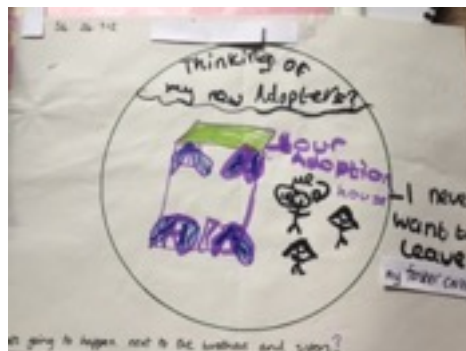
"To hope is to be ready at every moment, for that which is not yet born, and yet not become desperate if there is no hope in our lifetime... and cherish all signs of life." (Fromm, cited in Lanyado, 2018, p.133)

I have used the concept of hope to convey the child's capacity to consider the potential meaning and possibility of future relationships and family configurations; developing coping strategies and an ability to consider the reality of the present and future placement plans in the context of their own identity. Hope conveys a capacity to acquire positive emotional growth and internal change which will lead to a capacity to accept external changes, i.e. new alternative parents and sibling reconfigurations. Lanyado (2018) describes hope as "life reasserting itself after a period of bleak interpersonal numbing" (p.134). In the group work, the children evidence through play

therapy an engagement with their internal struggles, developing knowledge, coping resources and strategies, and develop an ability to become more resolved.

Sibling Violet 1 (Age 12) and Violet 2 (Age 10): The elder siblings each took long pieces of ribbon and created the various roads which symbolised the different care route that they would all be having to take. They helped their younger siblings, Violet 3, 4 and 5, move cars as if to go to their new adopted homes. They cried and said it was “Goodbye for now.... We’ll pray for you every night.”

Sibling Peach 2 (Age 7) used three tree branches and took a Spiderman character and some string and represented his movement using the string to leave his birth home, foster home, and eventually moved to a potential adoptive home. “*with the help of Spiderman, I might be able to do it*”. 44.9% of the children in the study conveyed realistic hope as they became more aware of impending placement possibilities in relation to being receptive to new parental figures.



Sibling Peach 2 (Age 7) drawing

7.16 Changes to Decision Making

53.6% of all permanency plans were changed as a result of the psycho-dynamic material from the group work which conveyed a reality about the children’s emotional capacity and propensity to live alongside each other.

Sibling Navy 2 (Age 10): He drew himself and his sister, clearly showing a decision to separate but said “*I don’t want her to be on her own, I want to be with her, I want us to live with my*

sibling's guardian". He titled his drawing 'my most important people'. Consequently, the children were all eventually placed together under special guardianship.



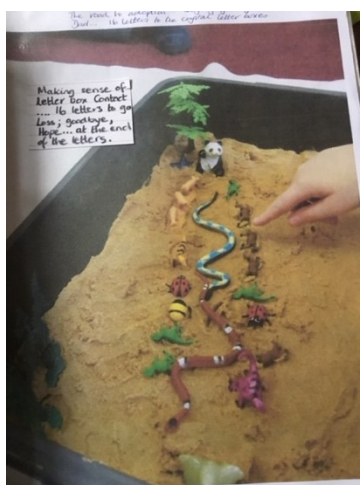
Sibling Navy 3 (Aged 8) painting

7.17 Contact Concerns

This term is used to explain the children's engagements, both directly and indirectly, with their future connections with each other, their parents, wider family members and foster carers.

82.6% of the children in the study conveyed issues around contact as they became more receptive to their own familial situations in relation to permanency and placement transitions.

Sibling Olive 1 (Age 10): She organised a scene in her sand tray which represented a path of 16 tiny creatures, 8 down each side, a jewelled love heart and panda at the top of the path and a small red letter box at the bottom. She said "*These are the 16 letters I get to write to my Dad until I am big enough to go back and live with him.*"



Sibling Olive 1 (Age 10) Sand tray

Chapter 8

Conclusion

Implications of Findings for Social Work Practice and Policy

My study makes an original contribution to knowledge in the field of sibling work in Local Authority child care and placement services. I consider that this is of sufficient significance to afford a new subject heading for which I propose: Sibling Centred Social Work Practice. Such practice is characterized by creating a sibling informed and sibling centred organisation in order to enable sibling groups to negotiate changes within their families with regards to their individual and group identity, their complex traumas and circumstances.

I will outline below three points that my study indicates to be necessary conditions in order to establish a sibling centered practice.

1. A therapeutic practice model to attend to the emotional well-being of siblings and their sibling group. Central to this is the provision of an essential reflective supervisory space in which the professional ‘dreams up’ the client in order to consider “what is occurring at the conscious, pre-conscious and unconscious level in the analytic relationship.” (Ogden, 2009 p.34) None of this is possible if there is not a reflective senior management team with whom the practice boundary spanner (See Chapter 4: The Model, Diagram 3 - The Model of the Organisational Boundary Spanning Activity) can engage in practice reflection and undertake transformative conversations. Without this, it is difficult for new creative practice ideas and projects to emerge which lead to new policies.
2. The development of an organisational sibling policy which supports practice around siblings, sibling groups and their permanency.
3. The establishment of sibling-centered training in order that organisational practitioners are informed around sibling issues, traumas and dilemmas, creating an organisation both aware of the theory and this particular community of children.

I propose that sibling centred practice can offer agility and creativity in work with siblings who have multiple care plans and permanency requirements. The therapeutic model (Chapter 4) set out within the body of this thesis is adjustable to the needs of communities of children in care facing similar care dilemmas. Whilst this particular intervention focuses on siblings facing adoption, the model can address at least three other sibling focused therapeutic requirements.

- a. Sibling relational assessments ('Just Us') – Focusing on the nature of sibling bonds formed in the neglect of good parental mediation.
- b. Group therapy around 'Whatever happened?' – The traumas, separation and transitions which resonate between the children. ('A terrible fuss!')
- c. Ongoing connections – Therapeutically enabling children to reconnect through contacts and adjust to new realities around their relationships with each other and their carers or alternative parent figures. (Re-adjust)

Over the last eight years the 212 siblings have been involved in the Sibling Group Work Project. All of the adopted siblings have remained in undisrupted placements. However, many have required additional therapeutic attention available via the longitudinal model (See Chapter 4: The Model, Diagram 1 - The Model of Sibling Therapeutic Group Work) in order to navigate new insights and manage the ongoing live material associated with their dual family status. The majority of these children are either living with a sibling or have direct contact with various siblings who are in long term permanency placements.

Wedge and Mantle (1991) reviewed case files of 160 sibling children, and Hindle's study (2014) worked with a sample of six sibling cases in order to consider key features and factors of the children. My study is the only one that presently exists which has undertaken an investigation into a large-scale group of siblings and interactively involved them in a process in order to engage with their emotional material, and long-term support.

By undertaking retrospective analysis on both my practice model and professional role, I have applied research methods to consider the emergent data (The sixteen codes and four themes:

Thematic Analysis Maps Stage 1 and 2, see Chapter 2 Methodology) from the sibling groups. The writing and research process offered a way of engaging in thematic analysis in order to consider the children's particular complexities. As discussed in Chapter 2 Methodology, my analysis produced findings from which I identified three themes emerging from group work with the children and one organisational theme (See Thematic Maps 1 and 2; Organisational theme, Feelings Expressed, Mechanisms Employed and Internal Resources Demonstrated). The organisational theme emerged from both the transformational conversations with managers and from the conceptualisation of my own role.

Being positioned between the children and the organisation, my role and task throughout was to become an organisational boundary spanner, to communicate and convey sibling pain in order that it could be seen, assessed, held and researched into. In this way, the collective trauma of the sibling and their group could be transitioned into the organisation, in order that professionals pay 'exceptional heed' (Reason, 1988) to the sibling pain of separation. It became clear to me that in order to engage in complex 'practice-near' social work (Froggett and Briggs, 2012), the therapeutic practitioner requires considerable theoretical and reflective practice and policy agility. Without which, it becomes impossible to deeply 'know', leaving the practitioner to form a thin interpretive stance which can result in professional assumptions being made around both siblings and their placement requirements. The research process and position therefore made it possible to challenge professional assumptions and place 'known' thoughts or professional hunches into an analysed framework beside the lived realities of the children.

Whatever changes may lie ahead in Local Authority Children's Services, there will always be the requirement for children to be in care, understood and known. Therefore, there will always be a requirement for therapeutic support in order to enable the children to manage complex emotional dynamics and family material. Professionals need to be communicatively open in order to offer containment to the children as biological connection is not in itself sufficient to enable the siblings to manage well in the context of each other.

By designing and intentionally placing a therapeutic model at the centre of placements preparation within the organisation, those who are continually working with children in the care of the Local Authority are more able to gather both the children's material and professionals involved, in order to understand. By becoming sibling-centric, a sibling-centred intentionality exists within the organisation.

8.01 Becoming a Researcher

When I began the project and research into it, I was of the opinion that I was solely engaged in group work practice with siblings in order to consider their dynamic relationship with each other and capacity to make use of particular permanency placements. However, much lay within this practice which required conceptualising and theorising in order to produce a sound model for sibling centred social work built from engagement with and analysis of the children's realities and needs.

My engagement in the research process created a new way for entering into dialogue with the organisation. Thenceforth, the role of the researcher took on a transformational quality. The recognition of the importance of transformative conversations (discussed in Chapter 2 Methodology, included as Appendix 1) created a way to expect and to discover new insights around practice and policy to emerge.

Conceptualisation of my role as Organisational Boundary Spanner (Williams, 2012), provided me with a way of knowing and recognising the importance of the organisational boundary spanning activity involved in conveying discoveries from the children's group work space into the organisation's decision-making arena.

In taking up the researcher role, along with knowledge of boundary spanning, I have identified the codes and themes that became evident in the material from the group work with the children, with knowledge of organisational boundary spanning activity. The result has been to create a

model which informs the practitioner of the tasks required, at different stages of the sibling's negotiation of transition, in order to offer the organisation the information necessary to make the best placement decisions possible. In T1, the Boundary Spanners therapeutic key tasks are around creating;

1. A therapeutic space in which the sibling's material can be engaged with to enable the children to make use of both peer knowledge and the therapists mind.
2. A psychoanalytic space where professional networks can begin to engage with the children's material.

In T2, the boundary spanning task is to create a deeper discussion between the decision-making professionals in order to come to a confirmed perspective and decision around best permanency placements for the sibling and their group. In T3, the boundary spanning task is to continue to engage the children in regional therapeutic services as necessary and develop authentic connectivity and intimacy between them and their new alternative parental figures.

8.02 The Limitations of the Study

The model outlined in Chapter 4 and as illustrated by diagram 1 is, in itself, my key finding. Whilst this is underpinned by child centered play therapy and psychoanalytic social work set within a Local Authority child care context, it could be extended to incorporate a variety of other professional therapeutic habitus. What is most important is that the authenticity of the model is not undermined by professional and theoretical dissonance as multiple professional bodies try to manage their associated theoretical paradigms and work together. Future research could extend to the use of the model in other therapeutic fields of work with children, and as a result, further emergent themes may be extrapolated.

In the role of researcher/teacher on sibling relationships and therapeutic social work practice which has evolved as a result of this study, it has become clear to me that professional staff require both considerable practice engagement and a valency for both theoretical knowledge and therapeutic engagement in this field.

Another limitation of this study is that a worker has to have the organisational, supervisory and theoretical space and support in order to use this model and intervention. By this I mean, the worker needs organisationally sanctioned authority to incorporate this practice method within their on-going organisational work.

There is much yet to be considered which could be the focus of further research with regards to the further development of thematic analysis around the data of both the children and the organisation, in order that we may professionally gain deeper practice with greater emotional awareness and efficacy in this field. My model evidences the ongoing reality of the need for long term therapeutic service provision for siblings in the care system who are particularly separated. The model, set out in Chapter 4, offers a way that appropriated resources must be allocated to address the therapeutic needs of siblings in care. Whilst much more is understood about the 'sibling-complex' (Mitchell, 2002) what is not discussed anywhere, is how these relationships become continually undermined and exaggerated by the ongoing lifelong flux between the siblings, their multi-family identities, and the powerful emotions and meanings that resonate as a result. These 'ghosts from the nursery' (Fraiberg, 1975) erode the children's individual and sibling identity and therefore placement stability, thus requiring there to be an organisationally resourced capacity to consider and make available long-term sibling therapy.

Hindle (2014) in her discussion asks important questions as to whether longer term therapeutic intervention would better facilitate sibling relationships. Jones (2017) comments that children's wishes are inadequately documented and that sibling contacts diminish over time. Ottaway (2017) recognizes that siblings feel a particular complex relationship that needs to be facilitated and rebuilt over time. She asserts that there is no research into this from the point of view of the sibling children and yet, much support is needed by the newly formed adoptive families. My study has offered me the possibility to support sibling groups during and post-transition from foster care to adoptive families. The evidence of this eight years of practice shows that the longitudinal model can expediently re-appropriate therapeutic mediation and support to the

sibling groups as they navigate their individual and group identities alongside their maturation. This offers both them and their placements a greater sense of resilience and capacity to endure and understand their need for their particular placement arrangements. Kolk and Krystal (1968: cited in Lanyado, 2018 p.134) state that hope is associated with “satisfactory human contact” therefore, the role of the professional in working with siblings in care facing transition and separation, is to ascertain ways of creating authentic sibling connectivity and relationship, whereby new strengths are supported and enabled after bleak periods of emergent family deprivation and abuse.

8.03 Conclusion

I began my study with the main question;

Can Play Therapy with sibling groups in transition prepare the children for future placements, and better inform decision making about the placements of the siblings? (Chapter 1: Introduction)

On conclusion, I have learnt much from the process of engaging in a retrospective study and the development of systematic investigation into the lived lives of a particular community of children, sibling groups in care, and their treatment by the organisation considering their permanency arrangements. I started by engaging in therapeutic group work with multiple groups of siblings using child centred play therapy, in order to better prepare them as they negotiated placement transitions and the notion of separation from birth family members. This however, lead to the development of a therapeutic model, practice method, and practice role within the organisation i.e. the Organisational Boundary Spanner; and the emergence of a particular therapeutic practice offered by the organisation to sibling groups negotiating transition and separation. As a result of inhabiting two professional and theoretical positions and paradigms (Psychoanalytic Social Work and Play Therapy), it has been possible to transition the therapeutic material from the children’s group work space into an organisational reflective

space and decision-making arena in order than permanent decisions can be reconsidered afresh. As a result, a permanency sibling ethos and policy exists within organisational practice.

I furthermore intend to address the subject of Sibling Centred Social Work practice, and material around the therapeutic organisational boundary spanner, by way of producing ongoing publications for practitioners, policy makers and trainers. My hope is that this material and findings might influence the curriculum of Social Work England and establish new perimeters for sibling centred social work practice whereby theoretical knowledge and practice skills may be developed and integrated into the national teaching programme for qualified social workers.

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Appendices

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Appendix 1

Transformative Conversation

Student Number: 9807532

Interview between JC

and JT Head of Placements Service, London Borough

on 20 April 2011

JC: Joanne, thank you very much for making this time in your busy busy schedule, and what I'd love to use erm (.) this (.) this time for is just to think about how we as an agency erm think about adoptive siblings and their placements: and maybe how we come to those thoughts. Particularly in your position, because you (0.2) sort of worked the whole way around the erm (0.2) the sort of field, and you are now head of service obviously! Particularly what you have noticed in your journey (0.2) umm to senior management really (0.2) about what we do and how we make decisions about adoptive siblings.

JT: Ohh! OK (0.4) erm (0.4) well going right back in time=

JC: = yes

JT: when you talk about my journey, I did my (0.2) err (0.1) for my (0.2) err (0.2) BA on openness in adoption

JC: Ahhhh!

JT: and part of that research (0.2) there was a big section on maintenance of sibling relationships

JC: Oh, fantastic

JT: Ummm (0.3) which was probably the first time as a student that I'd really (0.2) thought about the importance of sibling relationships and the li::felong relationships. There's so much focus on (0.2) the parents and childrens relationship (.) um, and I s'pose that's the obvious one.

JC: Yep

JT: ummm (0.4) so I did a lot of reading erm around the subject when I was doing that, so that that was where my my (0.2) interest in that subject first was (0.2) sort of ignited really (0.3) erm then (0.3) I mean I was a frontline social worker for (0.4) probably about 7 years and did a number of (0.2) care proceedings where there were issues of placing large sibling groups =

JC: = Yeah =

JT: = either for adoption in separate placements, or there was a combination of adoption and long term fostering depending on the erm age range of the children (0.2) erm (.) and a lot of the (0.4) I s'pose the kind of .hhh (0.3) unofficial information was that actually it was often very hard to sustain those (0.2) relationships when children were in difference placements. But when you look back to how (0.2) entwined their relationships had been when there were pre-care erm (.)there was (0.2) there was a lot (0.3) I mean they relied a lot on each other often because of the circumstances of the parents (.) umm and so even when they were half-siblings they didn't see themselves as half-siblings =

JC: = yeah

JT: they saw themselves (.) mmm (.) they saw themselves as brothers and sisters, didn't make that distinction

JC: yeah

JT: Umm (0.2) I mean there was a particular group of 4 children where every child was so damaged and so (0.2) umm (0.2) high level need and (.) no one could really predict what the future was gonna hold, they all had to be placed separately (0.2) umm (0.2) for any chance of success in a placement ((sigh)) so (0.2) and I remember when I left, you know, when I left the authority although things were sort of relatively proceeding to an end the placements hadn't been found (0.2) umm (0.2) and I and I still kind of wondered what happened so it's kind of been a bit of a theme throughout my (0.2) work and then really (0.2) it wasn't until (.) I came into this role as a senior manager that I kind of thought that I maybe had a little bit of influence over what (0.3) or about some of those issues long term really.

JC: Gosh it really resonated with you didn't it!

JT: ((Loud laughter)) yeah (0.3) yeah (0.7) erm (0.2) I think since I've been in this role what's become evident is that there are many more larger sibling groups going through care proceedings and possibly into permanency, whether that's adoption or whether that's extended family placements in some shape or form =

JC: = yes

JT: (0.3) umm (0.3) and the reality is finding an adoptive family (.) for more than two children is quite a challenge (0.3) and (0.3) ((sigh)) where you have placed more than two particularly (0.2) the (0.2) the ramifications of that then on the adopters I think you know. I s'pose the S children are a good example of that (0.3) umm of three children being placed in one family who don't have any children of their own

JC: Uh huh

JT: and then you've also got the other two in long term fostering (0.3) umm (0.3) and that sibling group have been a very (0.2) close knit sibling group for err (0.3) quite a few years really (0.2) umm (0.6) and all the all the kind of complexities that come with that, I think that the other thing that's been evident is that (0.2) social workers (0.3) in frontline teams paying very little attention to the post permanent placement contact issues and it feels sometimes like it's a tick-box thing. Stick something down =

JC: = yeah =

JT: = in the CPR without really thinking it through (0.4) umm (0.4) and that kind of then leads to questions about (0.3) how well are they supervised around those issues, how well then (.) maybe do managers (0.3) know about some of those issues, because if their background has not really touched much on permanency (0.4) they're not (.) they might be really really good at sort of child protection, frontline, immediate response stuff, but that is a very different part of social work, and not everybody has had those experiences (0.3) so you might be a really experienced CP manager but if you've not done any permanency work it's a real area of lack of knowledge in your (0.4) so then you can't then help a less experienced worker =

JC: = yes, yes

JT: if you don't really know it (0.5)

JC: (0.6) and the complexities, you mentioned there about just how many complexities there are in these sibling groups, in the dynamics of the groups, and you also interestingly talked about the half-siblings children's' perspective of who they are

JT: Yes

JC: umm and how important that is to see the children's perspective of who they are in the group (0.3) and umm (0.3) and (.) and the need that that's been noticed =

JT: = yes

JC: S:::o (0.2) with that in mind (0.2) how do you think (0.3) we do that?

JT: Hmmm (0.5) I think that there's an interesting concept ((someone at the door - interview pauses))

JC: Yes, so what I was just asking about was this sibling err dymanic and how does (0.2) our, this agency as an adoption agency then notice (.) err (.) the needs of sibling groups with regards placements.

JT: I think in terms of the actual adoption team (0.4) quite a lot of heed is paid to that and quite a lot of effort goes into finding (0.5) permanent families for sibling groups, I think that's quite .. and I think there's an (0.5) I mean an example could probably be ... I dunno ... an AP ((age 9)) =

JC: = yeah

JT: Where actually you could of thought (0.4) ((sigh)) are we likely to get a placement =

JC: = yeah

JT: for those two very damaged siblings and older =

JC: = yes

JT: but actually pull the stops out to find something for them to stay =

JC: = ah hah

JT: so that they could stay together (0.5) ummm (0.6). In terms of how the courts view it

JC: Yeah

JT: I think that's (0.5) a slightly different issue because it would often be (0.6) If a parent was viable for one of the siblings that would seem to take precedence (0.3) over maintaining the sibling group (0.4) so for example say a father comes along and says well that's my child (0.3) that one isn't but I want to be assessed to care for my child that would often take precedence over (0.3) so he's right to have his child and that child's right to be with their parent (0.3) at maybe the cost (0.4) of the sibling relationship and actually the sibling relationship may well have been a longer =

JC: = Yes

JT: relationship if it's been an absent father (0.7) so (0.3) the needs of maybe the adult and the importance of a birth parent (0.6) is (0.4) possibly the overriding factor that comes within the court, and that seems to some extent (0.4) social workers would then fall into that a lot of the time, not always =

JC: = almost being sucked into that

JT: yep =

JC: = without thinking

JT: (0.4) and when there's been decisions about separation of siblings I think (0.5) particularly (0.3) the social workers not in the adoption team a lot of them really struggle with considering that, and for good reason =

JC: = oh yeah yeah yeah

JT: but (0.5) it sometimes feels more emotively led than (0.6) what is right actually long term for these individual children, so sometimes there's (.) there's a loss of individual need for seeing the sibling group as a whole (0.5) So it's not a straightforward (.) umm (0.2) issue, although the overriding sort of premise should be, can we keep this sibling group together as much as possible (0.5) it isn't just (0.2) that isn't the only factor that needs to be taken into account and (0.4) and I (0.3) I think the adoption team have a slightly more ummm (0.5) realistic view because they see it from the adopters point of view. If we overload people with (0.3) you know? You know quite a lot of children who are very very complex, are we actually setting it up to fail? (0.5) You know, is it too much to expect of (0.3) people to be able to take on the level of damage of a group of children sometimes? (0.5) So that there's more of a balanced(0.2) err (.) consideration of whether it should be (0.3) who should remain together where there's issues of separation.

JC: So have you been aware of (0.5) any latent policy (0.3) about the sibling placements, or is it just some under riding thought (0.3) or goodwill thoughts.

JT: Yes, it probably is an under riding (0.4) yeah, it's not really (0.3) although (0.4) I'm not aware of it being explicit in a policy other than (0.4) it's very much driven I think by the goodwill and the (0.5) and also what goes on within court because the care plan is submitted and I think that also causes some difficulty because care plans submitted to court often are not done in consultation with the adoption teams so they could be submitted with the premise of siblings should remain together (0.4) and actually there's been no conversation about whether that's (0.2) a realistic plan to achieve (0.4) for an adoption placement, and there's been no

discussion with that, actually there could be issues, you know, around the local authority looking as though it doesn't know what it's doing.

JC: very interesting (0.5) because if you think back to the (0.2) 2002 Adoption and Children's Act (0.2) again, the premise that, you know, you try to keep siblings together, so if you are operating from that premise without the thoughts of actually what's really got to happen (0.5) then the (0.3) then the ideas of adoption as separate siblings doesn't even come into the=

JT: yeah, yeah =

JC: = agenda (0.5) that's what you're saying

JT: yeah, yeah

JC: R::ight (0.5) yeah (0.2) and then you can see how (0.3) the sort of grander thought of (.) "right these children have to be kept together" ends up in (0.2) in (.) the adoption team.

JT: Yes

JC: Yes (0.4) and the children who are in foster care often as a group =

JT: = yeah

JC: because often (0.3) well *quite* often children can be fostered together, not always but quite often they can be fostered together (0.3) umm and then it's well (0.4) what are we gonna do about adoption.

JT: Well then that, I mean the C children were a very good example of that (0.5) erm (0.3) where the (.) everybody was so (0.9) definite that this sibling group should not be separated, this

group of 5 (0.2) that the age range was so huge. I mean the youngest one at the time I think was 2.

JC: He was, yeah

JT: and the oldest was about 13 (0.3) thereabouts (0.2) so actually, you know in four or five years she was gonna be off doing her own thing, he was still going to be at primary school (.) you know, so in terms of (0.3) and there was several children (0.4) there was two of them that were into those teenage years and three who could have been adopted (0.3) umm (0.3) but again the overriding thing was these children should remain together, that actually was condemning (0.5) three (.) and definitely one child, and I think the other two probably were adoptable they [were

JC: [yup

JT: with not really any particular complex needs =

JC: = No, no

JT: boy and a girl (0.6) erm (.) condemning them to a life in care

JC: and it sort of (0.2) uh I mean, it's interesting that sort of case, I mean I wonder how that got caught up then (0.3) not in adoption, but in (.) erm (.) long term fostering (0.5) so they stayed in that long term fostering process unusually, in that sense, for such a long period of time for such a big sibling group of children

JT: yeah

JC: Why? (0.7) why, why did they get that option?

JT: Err (0.4) purely by chance that we happened to find (0.3) a foster carer (0.3) who was willing and able to have 5 children

JC: which was actually quite unusual =

JC: = yes

JT: because we then placed thinking that that was the right [thing

JC: [yes, yes

JT: at the point of keeping them together (0.5) then (0.3) the thought of separating them because they'd been in the proceedings for (0.2) however long (0.2) 18 months (0.4) if not a bit longer (0.4) if we'd have separated them at the point of placement I don't think we would have had those issues =

JC: = uh huh

JT: I think if they'd have been in two separate placements, and the younger ones in one and the older ones in another (0.5) I think (0.2) the outcome would have been very different

JC: But because by chance (0.5) this foster carer took all 5 =

JT: = yep =

JC: = and the children weren't presenting with complex needs =

JT: = uh huh

JC: umm (0.4) and she wasn't (0.2) err about moving children on and taking different children in (0.3) she could commit to them =

JT: = yes

JC: so she was in a position to commit =

JT: = yes

JC: and so that's why those children entered long term foster care

JT: but wouldn't commit to a special guardianship =

JC: = but wouldn't (0.2) yeah

JT: (0.7) at a h::uge cost to the local authority

JC: oh, for sure

JT: Five thousand pounds a week (0.2) practically (0.2) for these children (0.7) because it's an agency placement (0.5) so actually, the carer is getting about two and a half thousand pounds a week (0.7) so there isn't r:eally (0.4) massive incentive =

JC: to move the children in any way shape or form =

JT: = no, and especially if you've got that many children with that amount of money who are not causing you any major problems =

JC: = NO, no, no !!! (0.10) g::osh

JT: (0.6) why would you then (0.4) disrupt all of that then take (0.2) maybe (0.2) less children (0.7) quite convenient!

JC: Goodness me!

JT: (0.7) it's a lot of money!

JC: wow (0.5) gosh, that's quite incredible! (0.6) If you think about (.) erm (.) again, going back into (0.3) as an agency, London Borough of Barking and Dagenham as an adoption agency (0.3) and um, and then thinking about how they can best support (0.4) umm would be adoptive siblings into separate placements (0.6) what do you think the service offers? How do you think the service does this? (0.7) Or what are your thoughts about the service as it does this?

JT: (0.6) OK. (0.5) I have to say that I (0.2) the post adoption support (0.3) issues are not kind of really high up on my day to day agenda =

JC: = yup, yeah yeah

JT: erm (0.7) I know that (.) if people (0.3) if adopters (0.3) start to avoid those commitments the workers are quite forthright (0.2) in (laughs) in (.) pushing for them to honour their commitment that they made at the point of placement to maintain the sibling (0.2) relationship. So I think that the staff who would then be involved in dealing with those post adoption contacts would be quite vociferous in their views about that and would certainly exert some pressure on the families. (0.5) Erm (0.4) I sometimes wonder (0.7) how you strike the balance between (0.2) us as an agency (0.3) being very directive in terms of what they do, when they do it (0.4) and allowing people who actually are the legal parents of these children to make (0.3) some of their own decisions and arrangements about it (0.5) umm (0.2) and I sometimes

think (0.2) possibly we err a little bit too much on them (0.2) making their own decisions and sometimes I think to maintain good, regular, positive contact we ought to probably be (0.2) more directive at times (0.2) and also be a bit imaginative about how those things happen, I think we kind of get into habits about (0.4) what we do, where they should to, where it should take place (0.4) um (0.5) I don't always think we're very creative about that and I think we need to be helping adopters (.) be a bit more creative about that

JC: Absolutely, that's very interesting (0.5) I'm just wondering about (0.4) it's interesting about creative, about how it happens

JT: Yeah

JC: and creative to (0.5) because when you think of erm (0.3) these siblings (0.3) being separated (0.2) for at least half a year (0.2) often (.) and then, they're suddenly back together again (0.2) and then they're separated (0.3) and then they're back together again (0.6) now, actually think about that (0.7) the impact of those coming back together (.) triggers (0.3) emotional material, so I'm interested in your thought about needing to be creative about a) how we even set these logistically up =

JT: [Yeah

JC: [these arrangements up (0.2) but b) how we creatively think it emotionally possible for it to occur. (0.5) See the two levels?

JT: yeah yeah (0.5) OK, I mean I think we don't do any proper preparation with adopters prior to a contact (.) I don't think, apart from the practical arrangements (0.6) I'm not really very aware of a lot of preparation about (0.4) what (0.3) the children may feel, what they (0.3) what is the possible outcomes of the contact, both at the contact and post (.) and before (.) if anxieties (0.3) or excitement is around (0.2). So we don't really do the preparation, it's purely

practical focus. (0.6) Erm (0.4) there's often a sense of it should be (.2) based around an activity, but I sometimes wonder if that's because it's more convenient for the adults involved (0.4) for it to be something that keeps the children occupied, rather than there being an opportunity for the children to (0.5) actually converse and have some (0.5) yeah, if it was like it maybe (0.4) a big activity rather than a quiet space. (0.5) I also think that we can kind of get into habits about (0.5) what post adoption contact should be (0.2) frequency, type it could take and actually sometimes I feel there's a bit of a loss of individual (0.5) if this is an individual sibling group (0.3) who may require something very different to another sibling group. (0.5) Erm (0.3) but I do kind of feel that the (0.2) same things get tripped out a bit (0.5) oh you know, its twice a year and it's (0.7) so then that makes you then wonder (0.2) what the expectations are in (0.3) preparation for adopters (0.2) umm (0.2) does it feel like we just go through the tickbox (0.5) exercise really, about the importance of it =

JC: = yeah

JT: but do we make it very alive for them? (0.9) And do we make it easy for them to back out of it at some point in the future? (0.11) I mean because the reality is (0.2) is that (0.3) most adopted children are not gonna have much direct contact with (0.2) other birth family members other than a sibling (0.2) perhaps occasionally. (0.4) But the direct contact is gonna be with a sibling (0.6) and that's (0.5) I don't know (0.3) I think it sometimes is a bit of a tickbox exercise. (0.12) .hhhhhh (0.4) and there seems to be, I mean, but that doesn't seem to be particularly (0.2) just Barking and Dagenham, I think it's a bit of a thing about (0.2) adoption teams (0.3) erm, I think there's a real issue (0.5) about workers (0.3) working in adoption who haven't had other social care (0.3) experiences to understand (0.6) in a bit more of a sort of complex way around what the issues are through care proceedings and care planning (0.6) and although there's the importance of listening to the expertise of the adoption team because they have a lot, because they've done this a lot and they know from an adoptive perspective (0.5) more than (0.3) a care management team maybe would (0.6) because they're not thinking at all about the (0.3) the adopters perspective and you do need to take it into account. (0.7) But I

sometimes wonder if (0.5) I sometimes wonder if people's own personal views (.) about (.) post adoption contact (0.2) even if they are not (0.2) explicit in what they may (0.2) think (0.3) influence (0.4) how they may guide their adopters.

JC: That is very, very interesting what you're saying (0.2) because what you've talked about is about (0.3) erm (0.2) various teams focusing on the adults and not the children and when they focus on adults they have their own biases which may be guiding their practice.

JT: Mmmm

JC: And various teams with the experience in their fields (.) having to take cases through so that adults can't get to children, or can get to [children

JT: [yes

JC: but not quite the children (0.2) and so what's not being, what seems from what you've said is (0.4) the bit that's not being attended to (0.3) is actually the children's perspectives, and the children's understanding of who they are and what's actually happening to them at this part of the process. (0.4) And then I wonder (0.3) so what is it we need to do in adoption, or attend to in the adoption team (0.5) where we are taking heed of the needs of adoptive children as they move towards their permanent placements (0.2) be they together or separate siblings? (0.5) How do we (.) how do we gather up their perspectives? How do we (0.3) pay attention (0.3) really pay attention to the child's perspectives of what's just about to happen to them? (0.6) How do we do [that?

JT: [((intake of breath))

JC: (0.3) Is there a place for that?

JT: No I don't think there is really (.) very much. (0.5) I don't think the child's social worker does it (0.2) really

JC: So the child's social worker doesn't do it, the post adoption worker's don't do it (0.4), but is there anywhere else that that's being created with the children?

JT: The only thing is the sibling group project that we've done (0.2) umm (0.3) where (0.4) the children are there with no adults other than the facilitators of the group, so they can't be influenced (0.4) really by (0.3) other people who may have some kind of unconscious vested interest in them (0.2) so that's the only (0.4)space.

JC: And what does that gather for them? (0.2) What's your understanding of what that gathers for them?

JT: I think it gives them (0.5) a real opportunity to think through what the issues mean for them in terms of staying together and separating (0.7) and (0.2) facing up to (.) some of the pain that that may cause (0.8) and being, and having an opportunity to have those (0.3) re::ally painful things discussed openly. I think (0.2) workers avoid having those discussions because they don't want to upset the children, but actually the children do know (0.3) or they kind of half know, and the half knowing sometimes makes it worse than knowing. (0.6) Erm (0.3) and it gives them an opportunity to come to some kind of resolution, albeit that they might not be .hhhh happy (0.3) with that, but they understand why (0.4) decisions have been made and why things maybe can't happen as to what they want, so that there is some kind of line drawn under it. (0.5) And they are then (.) clear about what the proposals are for the future. (0.7) I mean you know there's been case examples with things like the P children where the two older ones were going to remain in long term fostering, and the youngest child adopted (0.5) and how (0.3) that was re::ally difficult (0.2) particularly for the older children. (0.3) Umm (0.5) but they came (0.3) they came to accept that actually that was probably best for R, their youngest sibling (0.3) even though they really didn't want it, (0.7) but there'd been no other space for that to

really be explored (0.8) and they'd been in care a long time. (0.7) Erm (0.4) but I mean there's been other examples of where (0.3) umm (0.2) I can't remember (0.5) it wasn't particularly about adoption, but how (0.4) oh that's right, we had a private fostering case where the mother had died and nobody had really spoken to the boy about the fact that (0.3) you know (0.4) did he want to go to the grave, nobody spoke about his mum, he'd been rejected by one side of the family. And it feels like the same thing has happened a bit with adoptive children or children going through these kind of situations, where because we find it difficult with adults to have those conversations we avoid having them with the children (0.5) and then (0.3) once actually the worker had actually opened up that opportunity for him in that situation, he was really grateful that somebody had actually had that conversation with him, acknowledged his mum and (.) and (.) gave him some choices about (0.5) what he did and didn't want to do, and the fact that he knew it was OK to mention his mum to that person, even if he didn't want to talk about her (0.3) it was OK to mention it because she wasn't (0.7) skirting around the issue really. And I think (0.4) I think it's the same (0.5) for workers when they're talking to children about these issues (0.6) and of separation, and not being together (0.4) that if you don't feel confident in tackling those issues, particularly if you're struggling with it yourself, you're not giving the children the opportunity to talk. (0.5) So the (.) the only place that that's really happened (0.3) properly (0.3) has been within the sibling group project.

JC: So what you're talking about is (0.2) trauma =

JT: = mmm ((in agreement))

JC: all the trauma issues for children (0.5) and a space for those to be (0.3) discussed and discussed in light of what it's going to mean for them in the future =

JT: = yeah

JC: and (0.6) looking at how professionals in our area of work (0.3) can support the

children through these traumatic separations (0.5) or these traumatic memories (0.3) and carry that information into their permanent placements with permanent adopters. (0.4) And (.) then how that then gets sustained through the children's lives (0.4) in permanence (.) and what our (.) our policies, or our unspoken policies (0.5) maybe not quite policies (0.2) procedures I think we're probably talking about here, what are our unspoken procedures that do or don't or need to address things and make sure children get these things (0.3) erm issues attended to because the contact thing is still alive =

JT: = yeah

JC: so the comings and the goings and the comings and the goings from each other are constants (0.3) they're not going anywhere (0.3) that's going to carry on happening. (0.4) So what procedure (0.5) do we in practice need to put into place to actually (0.3) erm (.) support that?

JT: I suppose in the first instance erm (0.3) it's important to have a team ethos =

JC: = yes =

JT: = about (0.5) these issues because if you've got (0.2) if you're not giving a consistent message to adopters, (0.2) to children in placement, (0.2) to post adoption work (0.6) as a team, you're already in a difficult position.

JC: Yep

JT: So there needs to probably be some (0.3) reflection within the team about (0.6) you know, adoption today is probably different to what it was ten years ago =

JC: = yes!

JT: You know, let alone (0.4) twenty or thirty (0.3) erm, it's changed very quickly. (0.5) So there's probably some work to be done and with the team (0.5) I think there's probably scope (0.5) for us giving the post adoption workers (0.2) in particular to address the issues well into placement. (0.6) Umm I think more thought probably needs to be given to the issues in the preparation of adopters (0.4) where it doesn't feel like you're just doing the tickbox "we've addressed that issue" (0.3) and how we can make (0.3) because it's the one thing that causes adopters a lot of anxiety (0.4) contact =

JC: = it does, yep

JT: Erm (0.5) and what that may bring up for the children, so they can get into an avoiding mode, thinking oh (0.4) you know (0.3) there's going to be upset, or there's going to be (0.3) you know (0.3) a step backwards after (0.2) contact or (0.3) the issue of (0.3) will somebody (0.6) drop them in it about where they live and is that going to put the placement at risk - all of those kind of issues (0.6) but in the days of (0.3) Facebook (0.3) you risk =

JC: = the risks are going to be [there

JT: [the risks are going to be there (0.5) rm so we probably need to do a lot more on that in the preparation.

JC: So, what you mentioned is (0.6) umm (.) thinking of procedures (.) putting practice procedures in place with regards reflection of the team, scope for umm upskilling post adoption workers and for (.) er (.) with regards to preparation, with regards to contact preparation =

JT: = Yep

JC: for adopters with post adoption contacts =

JT: = Yep

JC: again (0.3) what we've not mentioned is the children

JT: True (0.5) that's true

JC: So I'm just wondering (0.6) you know (0.2) that might be fine (0.3) or is that something that might need attending to as well?

JT: (0.12) I can see some problems with that (0.2) because once (0.3) the children are in placement and particularly when they're adopted (0.4) getting access to the children, you've got to kind of ((laughter)) go through their adoptive parents.

JC: These are sibling groups we're talking about (0.5) so I'm just wondering with regard to sibling groups (0.3) and we don't tend to completely bow out of their lives (0.3) ith sibling groups =

JT: = r::ight

JC: because of the complexities of the children =

JT: = yeah

JC: with regards to the development of traumas (0.7) so why don't with sibling groups (0.3) we've still got =

JT: = a foot in the door, right OK

JC: why? (0.13) why?

JT: (0.7) I mean (0.5) there's only one of you and the reality is (.) is that we would probably do with more (0.3) hours (0.6) whether's it's you (0.3) or whether it was (0.3) you know (0.3) another post that did the same kind of work. (0.6) Because the reality is is that we don't have a huge team of staff, so there are resource implications for this. (0.4) If you're going to make it a really meaningful (0.5) piece of work (0.4) I mean because (0.3) you've still got the option then of maybe doing (0.5) work with the sibling group in a placement (0.4) but you've also still got (0.4) I mean (0.7) when we had the sibling group project several of the sibling groups were coming together, where they were sharing experiences which is a different type of work with children. (0.6) Umm (.) and sometimes that probably (0.6) can be more beneficial in terms of we're not the only ones going through this. (0.8) But it had massive resource implications. (0.3) But (0.2) I don't know I mean it would be interesting I think, there would be an interesting piece of research maybe for a lot of the children who've been (0.5) gone through our adoption process (0.3) as adults now (.) to find out (0.4) what the sibling issues (.) contact issues were for them (0.7) growing up (0.4) in a way. (0.6) We don't actually (.) we're not actually there yet because we don't actually know from our own practice in B&D rather than it being a wider thing (0.3) how we've managed or not managed (0.3) and whether those adults (.) those young people now as adults (0.4) were they satisfied or not satisfied with the level of contact (0.4) and the type of contact that they had with their siblings. (0.6) We kind of start from the point of (0.3) do we know whether people have thought we managed that well or not.

JC: I suppose it's interesting thinking about (0.3) what is it that we're managing or not managing (0.3) or helping them manage (0.4) with regards contact, because I think the difficulties are going to be there (0.5) there's no getting away from that (0.3) but it's (0.4) whether that's being managed or contained for them as they go through it. (0.5) It won't change the situation that they're going to be separated or not =

JT: = yeah

JC: but I wonder is there (0.3) what you think about the you know (0.3) when the support they're being offered in that makes it possible for them to get the most out of their relationship even though they are separate

JT: (0.9) I don't think we do anything really much (0.4) do we? I don't think we do.

JC: Well (0.4) it's interesting I mean (.) this is your interview so I feel I shouldn't really say much ((laughs))

JT: ((laughs))

JC: umm (0.3) I think what's coming out of umm (0.4) what I'm working with (0.5) is (.) is that I'm now actually umm (0.4) insisting that when it comes to sibling group contacts (0.3) that I prepare the children beforehand =

JT: = uh huh

JC: So that someone is there in the contact arena (0.5) with the adopters and so far they've all said yes they want it

JT: That's interesting (0.6) I wasn't aware that that was happening

JC: and this is only recent =

JT: = right

JC: this is only in this last (0.3) sort of umm (0.3) er (.) 6 months 9 months that I've been doing this (0.4) and because a lot of the sibling group contacts are now coming up =

JT: = right

JC: umm(0.3) I'm sort of kicking that one in (0.3) and (.) um (.) what's happening is that it's very painful for these children as they come (.) no (.) it's very lovely for them when =

JT: = yeah =

JC: = they actually come together, but it's horrifically painful as they leave (0.4) and actually the need for the support (0.3) is crucial at that leaving =

JT: = yeah

JC: at that ripping apart of relationship again all over again (0.3) umm (0.3) and acknowledgement that (.)they (0.3) will see each other again, that the promise, so they're hearing that promise (0.2) way back in the sibling group that it's not a lifelong split, it's something that will be maintained with them. So they're just beginning, through the project, they're just beginning to see "yes (0.3) we've been promised and yes it is happening (0.5) yes it's been promised and (0.3) yes (.) you're still supporting us through it".

JT: OK

JC "and we want that". So that's only just beginning now =

JT: = OK but then that makes perfect sense then really. I mean because if (0.5) if (.) if there's the opportunity to do that, umm (0.3) it's a really direct way that the children can feel (0.4) that there is some continuity and that the, you know, that the department takes that seriously, it's not just relying on their mum and dad (0.4) umm (0.3) to facilitate it, actually somebody else is looking out for that as well.

JC: now there (0.3) that's where your unspoken procedure comes in (0.5) that (.) I'm wondering about the need to (0.3) err (0.4) actually make it more explicit (0.4) from a departmental point of view, that these children need to be taken seriously at these points and that there is the support evident and put in there to ensure that these very painful comings and goings (0.4) in their separations can be managed, and can be worked with (0.5) and not just a tickbox exercise =

JT: = yes

JC: (0.4) which says meet up at Macdonalds

JT: Yes (0.2) yeah absolutely. (0.8) .hhhh hmm (0.7) I mean there (0.3) I mean now is the time, it feels the time is (0.6) right for some changes (0.4) I mean there's been (.) you know a change =

JC: = yep

JT: within the department (0.4) there are (0.5) slight changes within the team =

JC: = yep

JT: erm (0.6) so there are already some new developments going on, umm (0.8) so we're probably at the right point for the team (.) to take on some of this on board and move it forward a bit really. (0.9) And I don't know whether (0.4) I'm not quite sure the way to do it, because in a way those issues need time (0.5) to have some thought about them really, they're not something even in a team meeting that you could necessarily rush because you're often caught up with (0.4) the (0.3) errr (0.3) business.

JC: so it needs time to reflect on. (0.10) Umm (0.3) I mean a lot of this only (0.2) just coming and happening as we speak almost (0.2) umm (0.4) because what I've done is got alongside the post-adoption workers and my manager and suggested that there's quite a few things that I'm noticing about these bits =

JT: = right

JC: and about tickbox exercise and how the two aren't quite coming together =

JT: = right

JC: and the distress (.) that's being caused in the middle (0.4) for both the children and for (0.2) the (0.3) adoptive parents and post-adoption workers =

JT: = right

JC: and (0.3) you know, the need for the department to think or the agency to think, about (0.4) erm (0.2) how this is experienced and how it can be better managed (.) for all (0.7) and then (0.4) another (0.2) so that's one thing, so we're going to meet and actually think about from a ??? point of view =

JT: = ok

JC: umm, and then (0.2) later down the line put it into an extended team meeting, and then (0.3) perhaps at an away day =

JT: = yes

JC: discussion about what this means for us and the way we work. (0.6) And then the third

thought was actually putting it into (.) umm (0.2) places like (0.3) the adoption panel =

JT: = .hh yeah =

JC: = so they need to think about the dynamics for adoptive siblings and (0.2) the (0.4) developmental traumas that these groups, that exist within one group (0.3) and how err (0.6) adopters (0.4) might be strategically placed to manage that sort of material or not

JT: Yeah (0.5) I mean panel is, I mean lots of debate goes on at panel (0.5) about some of these issues, umm (0.7) so I certainly think that that's (0.4) that's an extension of the stuff that goes on in the team really definitely. .hhh yeah and it does feel like it's got to be (.) you know (.) either some specific time set aside to look at these particular (0.3) issues (0.2) for the team as a starting point. (0.7) Because really (0.4) with the right kind of (0.3) support and (.) you know (0.3) training for post-adoption workers, they should be able to manage the majority of this =

JC: = oh of course

JT: you know, they should be able (.) you know, rather than it all being (0.5) managed by (0.5) somebody like yourself, I mean there's going to be times when that's going to be really important =

JC: = change the way we do the task =

JT: = yeah, yeah (0.6) yeah

JC: and there might be a way of (0.3) of (0.3) consulting to that or whatever =

JT: = yeah

JC: but there's a way (0.6) there's just a potential change to the task

JT: mmmm (1.0) And I suppose (.) I don't know (.) I think it'd still be useful (0.2) you know to find somehow to find out (0.4) how what the children's experience of this is (0.5) I mean we can make (0.3) lots of assumptions about it but actually is there a way of (0.4) finding out that directly from the children, what's positive and what's not.

JC: One of the ways that's a potential way of doing that is to actually put almost (0.4) a (.) a (0.3) questionnaire, but also, I mean you could do a pictorial questionnaire for younger children which gives them space boxes and feelings spaces above it (0.4) and they could draw whatever picture they want underneath it; whatever this offers to them about their family, their brothers and sisters for instance and they could draw their experiences about that (0.3) so there's ways of (0.5) potentially gathering that pictorially and verbally.

JT: .hhh because the reality is a lot of (.) adopted adults want to know and find out have a relationship with (0.5) their birth family (0.4) but it feels like if (0.4) if that process of contact is going to be difficult challenging and painful (0.5) parents (0.3) automatic response is to protect children from that so that's where I think there's a risk that if a difficult separation is not managed well they'll avoid it.

JC: That's very interesting because avoiding it (0.4) the other place where avoiding goes on (0.3) is (0.3) umm I'm just wondering about when at the end of the contact everybody's whisked away (0.5) back into their own reigning territories

JT: right

JC: (0.4) now (0.2) to get back into that clear evidence isn't always easy

JT: right

JC: but maybe at the end, a bit like when you do a training day, you're asked to fill in like a (0.4) sort of (0.3) evaluation =

JT: = ((laughs)) [yeah

JC: [form at the end of the day =

JT: = right

JC: in some sort of way (0.3) if the support (0.4) if the supporting supervising worker (0.5) is sufficiently trained in this field like our workers should be, and are (.) can be (0.3) umm (0.4) they could be part of that process =

JT: = yeah

JC: in helping the children to gather their thoughts at the end (.) but the place that that's not going to work in is Macdonalds =

JT: = yep

JC: so it has to be in a venue that can look at (0.3) as you said right at the beginning (0.4) it helps the children actually (.) look at things rather than cloud them out with activity

JT: yeah

JC: there needs to be the space in the venue (0.2) for (.) for some thinking as well as some activity =

JT: = yes (0.12) And it kind of adds a sort of (0.3) a calming down at the end =

JC: = yes =

JT: = and a coming together (0.5) and although we kind of see it maybe as evaluation, it's actually drawing a natural end to the session with everybody together doing this rather than "ooh activity's up (0.3) in the car (0.3) off we go"

JC: (0.7) So I think there's a precious moment there

JT: yeah

JC: ((loud police sirens outside - the speech is held)) And again that speaks to (0.4) umm (0.2) procedural application

JT: yeah

JC: (0.5) and putting together almost like a (.) a menu (0.5) that can best attend to

JT: yeah

JC: (0.3) the children's positions and thoughts

JT: (0.9) .hhh yeah and because (0.3) this (.) this kind of links to some of the issues that we've had at court where the court is reluctant to separate siblings and if we were able to evidence (0.4) the packages of support and the processes and procedures that we go into to make that as positive and (.) and lifelong commitment that we make to facilitate it (0.5) that may alleviate some anxiety in court around (0.4) "well local authorities say they do things but

actually where's the evidence that they do"?=

JC: = hmmm (0.7) the importance of evidence

JT: yes (0.13) so in a sense your reflection part (0.3) and the work done with the team will hopefully naturally lead (0.3) to (0.5) the processes and the procedure that we (0.2) would like to follow (0.4) so it kind of naturally comes out of (0.5) and (.) and because it's everybody's kind of buying into that, you then get the sign up and commitment from the workers to make it a reality (0.3) rather than it being foisted upon them, that they're not really convinced of.

JC: That's a very important step

JT: yeah (0.4) yeah (0.6) yeah

JC: (0.8) How's that (0.4) How can we best do that?

JT: (0.10) I mean I think there's definitely got to be the space and time as a team to get together, I think it would be useful (0.3) to have an expectation that maybe they did some preparation (0.3) some reading (.) umm prior to that day or half day whatever's going to be allocated (0.3) so that they've already had a maybe a range of articles or whatever=

JC: = right

JT: that umm (0.4) that look at the different issues (0.5) so they come with some preparation really. Umm(0.7) I think (0.5) it would be also interesting to hear what their experiences are to date about the positive and negatives of what they think works and what doesn't (0.5) because they've got to be able to reflect on that before we can move it forward really. (0.7) Umm (0.5) I also think it's important that we give a very clear message that the department are committed to making the sibling group contact work (0.5) is important but (0.4)

it's striking that balance between "we're going to do this ((laughs)), what's your input into how we do it?". (0.7) So there's got to be an element of direction, it's not really a choice because if people's own views are different (0.3) you kind of (0.2) the debate isn't there about whether we should be doing this or not (0.5) it's going to be, but it's how? (0.4) How can they contribute to it? (0.8) .hhh and trying to still get (0.3) I mean I still think there's an element of (0.4) being quite adult focussed. I mean I know there's (0.2) there's been a shift of (.) having to take on (0.2) some of the children in care prior to placement (0.3) there's been quite a number of workers have not been too keen on working with the children (0.3) and taking on the (0.4) LACK issues (0.4)you know because=

JC: = yeah, that's true

JT: and actually we are a childcare team (0.5) who are (0.3) very much wanting (0.5) some people are wanting to avoid (.) and they're ok with the adults, the adopters (0.6) post-adoption around the adults who've been adopted or birth parents (0.5) but in a way that kind of (0.3) getting your hands dirty with the children themselves. (0.5) Not a lot of people are really up for it.

JC: (0.13) It's very interesting what you've just said because (0.4) erm (0.2) it is about emotionally getting into dirty places (0.7) in the adoption siblings project. (0.3) You have to get your hands dirty because it's play therapy=

JT: = yeah =

JC: = so, you're right down in the mess, in the sand in the paint in the glue (0.3) their own equipment (0.3) whatever it might be. (0.6) And I'm just wondering what your thoughts about (.)you know (.) how (0.5) you know, in some ways this might be too direct and in other ways maybe not, but certainly with (0.3) some workers who've already come alongside to be a part of that experience (0.3) umm (0.4) my feedback from them has been how much they've got

from doing that, (0.3) and I'm just wondering about whether that's (0.6) not all the time just maybe one off's (0.5) it might be getting their hands dirty to understand the dirtiness for these children the emotional dirtiness as it were, of what these children carry.

JT: I think it's really important if we're going to carry on doing the sibling project, then I think it's really important that everybody in the team (0.3) has some direct link with that by co-working or working alongside in shape or form

JC: How do we, I mean what's your thoughts on the importance of that (0.3) that the tickbox seems to get in the way (0.4) the tickbox role (0.4) we cover so much in a procedural tickbox role in post-adoption support (0.5) how how can that time be carved out of (0.6) how can that thinking help (0.3) move (.) move someone literally from (0.6) computer space and the tickbox and the (.) the logistical planning job (0.5) into the (0.2) getting into the emotional place=

JT: =the post adoption work?

JC: yeah yeah

JT: (0.6) .hhh I mean I did explore some while ago but it never really got off the ground (0.4) the opportunity (0.5) well it wasn't really an opportunity, it was more I wanted it to happen, rather than they had a choice about it particularly (0.3) was doing like shadowing somebody=

JC: = uh huh =

JT: = from care management, so (0.4) coming up with a certain amount of days that they would (0.6) so they would have a wide range of experience, so they would maybe go to (0.3) a case conference, they would go to court on a contested (.) you know (.) through the court

proceedings, they would do home visits with a worker. (0.7) .hhhh so I suppose (0.4) it's striking a balance between not an overly onerous amount of days

JC: hm hmmm

JT: I mean I was probably thinking about 5 (0.6) over a period of a couple of months maybe where they would have (.) the opportunity to experience a range of different work (.) well the home visits (0.3) were really important (0.3) so not just the professional (0.4) environments (0.5). Umm (0.6) maybe that's something that we could revisit (0.5) umm, particularly for workers who've not done it before

JC: That's so true, maybe the workers who aren't (0.5) actively seeing the impact of (0.3) developmental trauma in the home (0.2) and what it really looks like=

JT: = yeah

JC: from the points of view of the child and also the points of view of the adopters in the home (0.5) because until you actually see that (0.4) you're not really going to (0.3) you can read it

JT: yes =

JC: = but you're not really going to know (0.4) why those people are saying no to something

JT: It's very very different when you're actually in somebody else's home.

JC: Yes! I think they need to understand what adopters are trying to manager, and see it really and understand it.

JT: S:o maybe there needs to be a way of them observing and making sense of the dirtiness of the difficult stuff the children are presenting with and managing and how this affects the adopters too. Maybe (0.6) there's no way round this (0.5) maybe the post-adoption service has to engage with it and really see and listen to what's happening in these difficult placements (0.9) There's so much to think about.

JC: (0.7) There is so much (0.3) but this space is offering a (0.2) place to consider the dynamics at work in the adoptive home (0.5) and also think about how we can best respond to it in practice.

JT: hhhhhhh (0.4) well (0.5) I've really enjoyed thinking (0.6) there's so much

JC: (0.8) is there any more you'd like to say (0.2) or need time to think?

JT: .hhh (0.6) no (0.3) I think that's it. (0.4) There's so much we can do, but I think we're doing a lot as well.

JC: Thank you so much for giving me your time J. (0.6) I think we've found some very interesting things in this conversation that may well (0.3) influence future.

Appendix 2

Itinerary in the lead up to the Execution of the Therapy

Pre-Group Planning

- Emails and telephone call to all SWs and SSWs to gather CPRs/reports.
- The briefing gathering
- Invites sent out to children
- SDQs for carers to fill in on week one

Equipment itinerary

- Snacks – doughnuts, grapes, juice, strawberry shoelaces, tea, coffee, biscuits, milk, sugar.
- Hot water urn, cups, plates.
- Felt tips, crayons, pencils
- Glue sticks.
- Paper plates
- Paints, disposable mixing trays and brushes
- Glitter, glitter glue, glitter glue pens, stickers
- Sand and small sand trays
- A3 coloured paper, roll of lining paper
- Stickers with facial expressions,
- Aprons
- Shoe boxes
- Sellotape
- Plastic floor covering

Post Group Work

- Report writing for case files/legal intervention.

Sibling Group Work – The Power of the members

- A naturally occurring group, with defined boundaries. This group work is naturally defined by the term ‘sibling’
- Thus embracing age, gender, ethnicity and developmental range
- Full, half, step, care, ‘pseudo’ siblings
- A store of rich material about the conscious and unconscious world of the siblings.
(Canham and Emanuel, 2000)
- A cohesion, created by birth not dynamic
- The Wisdom of the child

The Siblings Unique Perspective of Family

The Practitioner Therapists Role

- to become the organisational-parental intervener in order to re-order, restore sibling dynamics

Preoccupations of the siblings:

- with their own wishes and fears that they may not perceive the distress or cues of other siblings, the group work becomes a space to *notice*.

Sibling subsystems affect the individual siblings

- Again, the group work provides a space to *notice*.

Prolonged conflictions

- with the family and sibling group affect sibling subsystems and individuals (?et al., 1973; Resick et al., 1976)

Sibling Group Work: The Methodology

- This group work may involve an individual sibling, a sibling subsystem or the entire sibling group.
- Provide a safe, permissive space where sibling thoughts can be expressed freely
- Provide a place for the discovering of dynamics and feelings
- Provide a space to highlight the reworking of sibling material (modifying sibling role relationships)
- Engage with professional and academic interest in Group Work theories, methods and skills
- The worker must be receptive to, and engage with counter-transferential material
- Groups promote spontaneity
- A space where vicarious learning and catharsis take place
- An observational lens to consider the real life sibling group experience.

Themes and Subthemes

Group cohesion is built around anomalies of

- siblings
- trauma/unsafe relationships
- loss/separation/sadness/longing (evoked emotions)
- placements
- separations
- managing changes
- nurture/comfort/regression/calm/safe
- attunement/touch

- attachment/connectiveness to others/belonging/focus on self
- challenge

The Power of the Agenda/Menu

Children are kinaesthetic learners

The safety of the 'prop'; the meaning imbued in the prop, the meaning the child makes of the prop

The tangible concept

The Power of Puppets: Puppet Drama

Puppet scenarios:

The King/Queen look down on the kingdom and sees that there is a problem...

A prince/princess needs a new castle...

A wise, wise bear...

A rabbit who covers its ears...

A bull with hurting horns...

The lobster with nipping claws...

A messenger...

Whatever Happened

My parrot couldn't live with his parrot family anymore...

Does anyone's puppet know what might have happened...

Could it be the same as what's happened to parrot...

Whatever Happened Next

Does anyone's puppet know what might need to happen next?

“Oh dear, I feel...”

Dizzy, anxious, worried, scared, small...

“How are we/she/he feeling today...”

The Power of Craft

- Shoeboxes; transition boxes, characters who move, leave, stay
- Branches; changing families
- Felt heart pockets; important people always in our hearts
- Shell families; clarity around birth family membership and geographical locations

The Power of Art;

Paints, sparkles, collage

The Power of Clay/Plasticine/Playdoh;

Processing emotion into form

The Power of Musci/Rhythm;

- clapping phonies; new concepts
 - o “fos-ter-care-ers”
 - o “a-dop-tion”
- Using common nursery tunes e.g.
- Frere Jacque – “We're the same (x2), It might change (x2), We live with foster carers (x2)... It might change (x2).

- Here we go round the Mulberry bush – “They’ll always be in my heart, in my heart, in my heart. Even though I will move (or) Moving makes me feel (child adds word/s)
- Percussion –
- Free play; the emotional state of the group/individual
- Formed play; Shakers/foster carer, bells/transition thinking, triangles/moving.

The Power of Food

- Group snack; nurture, processing and integrating group material
- Haribo hearts and strawberry laces

Evacuation of Pain;

- The need for the toilet, the smell in the room.

Self Esteem;

- Jewels in the clay lidded pot
- “I am good at...” Each member says something each session and places a jewel in the pot.
- “I like the way you...” Each person says something they like about each other.
- ‘Can stack’
- Cans of fruit, sticky labels
- Each person draws something they ‘can do’ and sticks it on a can

Worry;

- Worry webs; all in a tangle (wool/string – confusion)
- More and more – colours representing family material tipped into water. Chaos when stirred.
- Therapists task – Modify the activities to meet the distinct needs of the children in each group session.

The Emergence of the Unspoken Drama

The organisational child's rhetoric v The real child's inner world

Aims

The therapist's role is

- to consider the child's capacity to process anxiety
- to enable new states of self to evolve.

The Power of the Group on Divergent Thinking

The members resonating material evokes thoughtfulness in the other, enabling shifts in thought, new thought, transformative thought. (Capacity to approach painful material, consider painful material, manage painful material.)

Gelzels and Csikzent-mihali (1976) – Sensitivity to problem solving and finding

Sternberg (1988) – Insight and synthesizing abilities

Saltz, Dixon and Johnson (1977) – Capacity for imaginative play and divergent thinking

The Age of the Child;

From the age of three early research has shown that children navigate investigation and problem solving and develop insight through play (Sylva, Bruner and Genova, 1976; Vanderberg, 1980), and that free play facilitated divergent thinking in pre-school children (Dansky and Silverman, 1973; Dansky, 1980).

Once they had been able to access and engage with make-believe play [Intemat Book of Play Therapy, Schaefer, McCormack and Ohnogi, 2005].

Setting Up the Group

Setting the stage for Sibling Group Play Therapy

- 'Usual group theories apply!' and modus operadi appli
- Focus on the formal aspect of the material (Rothenberg, 1988) i.e. the creative content.

The therapist's tasks include;

- Considering the external and internal holding environment (winnicott, 1971): conscious and unconscious material.
- Attending to boundaries (the facilitator/therapist task)

Therapist facilitators tasks;

To consider the preoccupying concerns of the sibling agency.

- Being 'known' in the professional field of the clients
- Being 'trusted' by the professional organisations
- Being well placed to collate details of siblings; their legal positions, agency care plans, contact details of supporting professionals (SW's, SSW's, FC's, GAL's, IRO's, Service Managers, team leaders in Childrens and Adoption and Fostering teams)
- Gathering and reading historic case material of each child; and relevant reports pertaining to child and their family.
- Therapeutic/therapy trained, with required clinical supervision.
- Time to plan, prepare practical materials required
- Ascertain the group therapy room

- Prepare co-workers

Running the Group Work

- Coordinate and orchestrate pre and post-group work briefings for all professionals and carers to compulsorily attend.
- Organise equipment and 'menu' for each of the six sessions.
- Analytical debrief following each session with co-worker.
- Mid-session coordination with support co-worker and foster carers (containment to all).

Implications of Findings

What we 'know' but don't practice

- Know importance of divergent thinking
- Know importance of group dynamics and thought
- Know importance of creative free play
- Know importance of therapists facilitating skills
- Know nature of Sibling relationships

New Findings

- Don't know impact of multiple narratives on the organisation
- Don't know internal working models of sibling groups in organisation
- The power of the group – to design best care plans
- The primitive power of the held knowledge and wisdom of the sibling group.
- To proffer the best permanency outcome for each and all.

Appendix 3

Social Work Practice Governance Ethics

Practice and Procedural Document for the London Borough of Barking and Dagenham

Based on the principles of the children's act (1989,s.31), the Local Authority has the right to make decisions in the best interests of the Child. In becoming the carer, the Local Authority has decision making control for the purposes of a full care order. Legally, parents however are required to be informed of aspects of the child's care. To this extent Social work practice procedures' need consistently to attend ethically to this work. Where necessary the intent to offer therapy should be explained and outlined to birth parents, and included into the Child Care Social Workers final statement and care plan. In this way social workers inform parents of the practice and provision, should the child require support in the event of further transitions or emotional fragility.

1. Parents can be informed of the specific benefits and provision of the therapy, so that it would be offered in the best interests of the child.
2. As a matter of procedurally protocol, relevant Heads of Service, and managers should inform their staff of the necessity to include this provision in their final statements and care plans.
3. The agency's Legal department should be informed of the Social Work practice intention; therefore ensuring it is included in their final evidence, and set out as an intention of the final order.

The Play Therapy Intervention

The Child Centered Play Therapy model offered supports the child through a) their understanding of their situation. b) consideration of separations. c) what might happen in the

future. d) sibling and birth family connectedness.

The model of therapy offers;

1. Expedient individual therapy support,
2. Expedient sibling group therapy,
3. Sibling Group Play Therapy Project support (multi sibling group peer mentoring model)

The above therapies can be offered when appropriate.

Appendix 4

Responses to the Model and Material, March 2014

1. Doctoral Conference

2. Enfield LAC Development day- Focused on how the material actually gets heard, ie. the importance and understanding of the power of the child's narrative and ensuing professional transformative conversations that emerge from the child's material. The fluidity of the information and how it powerfully crosses the boundaries. The professional, role of the respectful Reticulist.

3. End of year masters conversion lecture – Tavistock.

4. Ofsted inspection, July 2012-Focused on the Play Therapy Intervention/ Best Practice for Children in transition, and Sibling group work.

5. Diagnostic inspection, Feb 2014- Focused on the Boundary spanning role and the interventions affect on the Organisational decision making process. On the importance of the model being in the right hands. Requiring evidence of change in the decision making process as result of the practice intervention. New tables to chart change for each sibling group.

Appendix 5

Therapeutic Narrative

Maybe, Just Maybe

October 2013

Thinking about being adopted/preparation.

The creatures all lived in adoption zone part of the forest.

They'd been there a long long time, they'd got used to being there.

It was even good there, the Kind Carer creatures were always there for them.

There was always nice berries and fruit, sweet and juicy.....you see the kind carer creatures thought about them.....they taught them how to eat

There were cosy nests and feathery leafy beds.....you see the kind carer's thought about them.....they taught them how to sleep

They had fun, they played and flew to fun places. They swam in twinkling river poolsyou see the Kind Carer's thought about them.....they taught them how to be friendly and kind.

There were their own parents, their old mums and dads creatures.....they thought about them too.....they wished that maybe it would have been different

Some of them were sick, and they couldn't manage their baby creatures.....they wished that maybe it could have been different.

Some were so angry they fought a lot, squawked and screeched, pinched and attacked....they just did, so it was dangerous.....they wished that maybe it could have been different.

Some just met wrong creatures and went off doing wrong things and leaving their little ones alone, in the big jungle....they wish that maybe it could have been different.

Away back when they first came to live in the Adoption zone with the kind carer creatures they heard that MAYBE JUST MAYBE there might be a new creature Mum and Dad, whose little

creature you might be, and live with till your grown up yourself. When this happened they would be given a silver shell.....

Why?.... asked the creature

It means" We are fine.....wait and see"

The creatures looked puzzled.....MAYBE one day it would all make sense.

But the little creatures loved the Adoption zone, they didn't want to think about movingever!

"I don't want to leave here" said one

"I love my Kind Carer Creatures" said another.

"I'm not doing it " growled another

MAYBE JUST MAYBE we won't have to move ever!

MAYBE JUST MAYBE we can just go on flying and swimming, eating and being where it's nice.

MAYBE JUST MAYBE the Kind Carer Creatures ARE our mums and dads, cried a little creature.

The little creatures rolled their eyes.....don't be so silly!

But one day they noticed that the little blue and green and red feathered creature had gone, just gonebut the black feathered creature brought back a message for them all to see.

One day they noticed the furry twitching nose creature had gone....but the black feathered creature brought a message back for them all to see.

It was the silver shells.

The two greys stayed together just as they'd come into the Jungle Adoption zone together.

A little antelope and cheeky croc still stayed togetherthey were there for a long long time.

But they looked t the silver shells glistening by their bedsides, and remembered, it meant the others were fine!

So MAYBE JUST MAYBE it would happen for them one day too, but until then they would stay with the Kind Caring Creatures.

Appendix 6

Local Authority Organisation Consent Form

The consent has been given by the Divisional Heads of Children's Services and Placement Services that the researcher may rely upon the data collected to be used as part of this research, subject to full anonymity being adhered to. The necessary consent has been acquired to use the data without repercussion and in adherence with ethical practice and procedures.

Head's of Service:

.....

Therapist/Researcher :

Date:

Appendix 7

Child Participation Information Sheet

For the therapist/worker to talk/play through with the child up to 2 weeks prior to the group commencing

1. The Group is called ‘Whatever Happens Next’. It is a special space where you will think about your family, brothers and sisters, who you live with now and what happens when things change again.
2. There will be two other families of brothers and sisters who, just like you, are all having to think about ‘whatever happens next’ for them. You will all meet together six times for one hour (as long as two kids TV programmes).
3. I will be there every time with (...my other worker). We will help you and after the group, I will be there when it’s time for change and keep visiting until it all feels okay again.
4. Your foster carer will be having tea and biscuits in the next room, and you can go there any time you need to.
5. I will be learning about what children are thinking when their families have to change so much. This will help me to explain what will be best for you next and also it will help me to teach other workers who are working with brothers and sisters how they can best help them as well. I may ask you if I can use a bit of your story or play picture to help other workers learn. No one will ever know it is your piece of work because it wont have your name on it and you will get to keep your picture.

This template will offer a consistent and sensitive approach for future workers to explain the context of the group to the children. Each child will get their own personal invite, and this explanation sheet. If they are distressed or anxious, there will be the facility for them to be

spoken with immediately after the group, telephones later that evening and/or visited individually between this and the next groups session.

Appendix 8

Legal Advice regarding Therapy and Care Proceedings

Subject: Data Protection

Jill,

When a care order is made by Court the local authority ‘shall have (a) have parental responsibility for the child; and (b) have the power ... to determine the extent to which (i) a parent, guardian or special guardian of the child, or (ii) a person who by virtue of section 4A has parental responsibility for the child’: s.33(3) CA 1989. As I see it, once a care order is made, the local authority has full parental responsibility unless they exercise their power under subs.(3)(b) and give some power to a parent, for example.

That being the case then the authority have the power to decide whether to consent to you processing for research purposes the personal data of children under their care. The Data Protection Act 1984 provides that unless one of the exceptions applies (I don’t think they do), one of the specified conditions must be met whenever you process personal data. The relevant one is – ‘The individual who the personal data is about has consented to the processing’. I would have thought the data would be classed as sensitive data but the same condition applies. Absent such consent use of personal data can lead to a hefty fine from the Information Commission.

Consent is not defined in the Data Protection Act. However, the European Data Protection Directive (to which the Act gives effect) defines an individual's consent as:

“...any freely given specific and informed indication of his wishes by which the data subject signifies his agreement to personal data relating to him being processed”.

The fact that an individual must “signify” their agreement means that there must be some active communication between the parties. An individual may “signify” agreement other than in writing, but organisations should not infer consent if an individual does not respond to a communication – for example, from a customer's failure to return a form or respond to a leaflet.

Consent must also be appropriate to the age and capacity of the individual and to the particular circumstances of the case. For example, if you intend to continue to hold or use personal data after the relationship with the individual ends, then the consent should cover this. Even when consent has been given, it will not necessarily last forever. Although in most cases consent will last for as long as the processing to which it relates continues, you should recognise that the individual may be able to withdraw consent, depending on the nature of the consent given and the circumstances in which you are collecting or using the information. Withdrawing consent does not affect the validity of anything already done on the understanding that consent had been given.

You should review whether a consent you have been given remains adequate as your organisation's relationship with an

individual develops, or as the individual's circumstances change.

Consent obtained under duress or on the basis of misleading information does not adequately satisfy the condition for processing.

I'd suggest you check with your legal advisors on the extent of the consent given in the context of the care order and whether that consent extends to the use of (sensitive?) data for the purposes of research. If that is accepted, then get not only a letter from the authorised person to confirm the research use of the personal data, but also a letter for legal confirming compliance with the Data Protection Act. I would have thought you would need a specimen copy of a care order from the batch of 69 children used to show the extent of the authority's power.

Iain

Barrister

Appendix 9

Development of Practice and Policy October 2016

During a meeting with Deputy Director of Social Services; I offered an exemplar case from the ongoing sibling group work project, which highlighted the lack of clarity between the social workers, the guardian ad litem and the Judge. This led to a separation plan for the children which highlighted confictions within the Agency around this plan. Following this we discussed the importance of professional practice in relation to the separation of siblings.

This led to the emergence of the following points:

1. The impact of changing Team Leaders upon awareness of the project; policies and practice around siblings in care within the borough. Over the past 18 months considerable staff turnover had impacted upon thinking about siblings, and resulted in abstract assumption led social worker thoughts pervading the practice arena again and being less challenged by the incoming Team Leaders.
1. We discussed my thoughts and findings in regards to the professional social workers current Habitas and incongruence around their role and practice in reference to their knowledge and capacity to engage in 'deep practice' alongside their need to attend to rigorous governmental timescales and recording.
2. We discussed the notion of supervision in terms of both reflective and analytical case consideration.

In response to the above we considered ways of raising the profile of practice and putting in place policies around sibling work that would be adhered to across both 'child in care' and placement teams. The following ideas were then drawn up:

1. Training to be designed for social workers and managers.

2. Presentation to the LAC (Looked After Children) Panel; a forum wherein Social Services and Education Staff consider best plans for particular children.
3. The sibling agenda to be added to the good practice staff presentation and discussions sessions. (A topic based lunch time forum to reach staff interested in particular practice genres).
4. To design master classes around working with siblings.
5. To insert adoption and sibling practice into the agenda for the PIOG Group in order to raise the profile of siblings in social work and for this meeting to be made mandatory and include Cafcass and IRO's (Independent Reviewing Officers).
6. To co-lead master class training on adoption and siblings for the department alongside Professor Julie Selwyn.
7. To explore the construction of reflective practice clinics (in 2017) in discussion with the Tavistock Clinic Model (Brighton/York), Clare Parkinson and Andrew Cooper.

Our discussion further considered the importance of enabling staff to engage in deeper reflective practice in order that the paramountcy of the child's emotional core is considered in both psychodynamic and systemic ways; with a realism around staff bringing particular strengths to the work. However, an acceptance that this will be a continuous practice development programme.

Appendix 10

University Research Ethics Committee Approval, 25th June 2013



25 June 2013

Dear Andrew,

Project Title:	A study of a method of Group Work with siblings in the Adoption process, and Organisational responses
Researcher(s):	Jill Comfort
Principal Investigator:	Andrew Cooper

I am writing to confirm the outcome of your application to University Research Ethics Committee (UREC), which was considered at the meeting on **Wednesday 12th June 2013**.

The members of the Committee present gave a favourable ethical opinion of the above research on the basis described in the application form, protocol and supporting documentation, **subject to the conditions specified below.**

1. Confirmation is required that the Local Authority has provided consent for the records to be used for research purposes and that the Tavistock and NHS Portman Trust are happy for the research to proceed.
2. Confirmation is required that clinical data can be used for research purposes under the Data Protection Act. The Chair of UREC will seek advice from UEL's solicitors in relation to this.

Please note, your favourable opinion is **conditional** and completion of the amendments requested by the Committee is a mandatory requirement **before your proposed research may proceed.**

If there are any questions please do feel free to get in touch at any time.

Yours sincerely,

Joanne Wood
 University Research Ethics Committee (UREC)
 Quality Assurance and Enhancement
 Telephone: 0208-223-2678
 Email: researchethics@uel.ac.uk