

# Don't Forget to Include Me: Remembering Siblings

Chris McNeill Bivins

**MediCoping** LLC

[medicoping@gmail.com](mailto:medicoping@gmail.com) (920)737-3310

# Me & My Siblings

- Personally
  - Oldest of 3 – collectively we've helped each other through
    - Body Dysmorphic Disorder, Eating Disorder, Depression / Suicidal Ideation / attempt, PCOS / Infertility
    - Child Sexual Abuse, Sexual Assault(x4), Homosexuality
    - House Fire, Car accidents (x5), Business ownership, Weddings, Funerals (x8 family), Bullying, Friend suicide (x4), Cross-country Relocations (x 12), 9 pregnancies / 4 live births so far, etc
- Professionally
  - Medical School, MS, CCLS, CTP

# Objectives

- Increase awareness of common concerns and strengths of **siblings** of children with special needs
- Increased understanding of unique needs of **siblings** and how they may change over time
- Techniques to minimize **sibling** rivalry when there are special needs in the family
- Increase knowledge of tools to use when working with **siblings**

# Is this really a concern?

In the United States, there are over 4.5 million people who have special needs; most have typically developing siblings. Brothers and sisters are too important to exclude because:

- They are in the lives of family members with special needs longer than anyone; often after parents are gone.
- When provided with support and information, they can help their sibs live dignified lives.
- Siblings share many of the same concerns that parents have, including isolation, a need for information, guilt, concerns about the future, and caregiving demands.

# Common Sibling Issues

## Strengths

- Empathy / Compassion
- Patient / High Tolerance
- Independent / Achievers
- Interpersonal skills/Nurturer
- Coping skills
- Creative problem solvers
- 'Big Picture' view

## Concerns

- Resentment / Jealousy
- Embarrassment
- Pressure to Achieve
- Dealing with peers /Isolation
- Contagious / Genetic
- Will I have to be their care-provider?

# Sibling Rivalry Reducers

- Provide accurate, age-appropriate information
- Label feelings and promote E.Q.
- Expectations - managed
- Aid positive sibling / family interactions
- Start planning now for adulthood
- Everlasting unequivocal love
- Recognize & Support unique talents
- Self-Care

# Provide Accurate Information

- Be Honest
  - Because what they imagine is often worse than the truth
  - Because they are more attuned to body language, what you say and don't say than you want to believe
  - Because you want them to trust you
    - This is as much as we know right now
    - I don't know but will try to find out
- But you can be selective
  - If they won't sense or be impacted
  - If you're certain that it's not yet relevant
  - If it's not the right time for them (not you)

# Provide Age- Appropriate Info

- Infants
- Toddler – awareness. Similarities / differences. Identify special need
- Preschool - reassurance they didn't cause the sibling's problem, especially if the disabled child is younger. They may also need to know that he can't catch a disability.
- School-aged children often have to explain their sibling's disability to friends and classmates. They need to practice and master the social skills that will allow them to answer children's and adults' questions, even when they're unspoken.
- Adolescents, who are struggling with their own wishes for independence, need to know what the family's long-term plans are.
- Young adults sometimes feel that they can't leave home or go away to college because they wrongfully assume that they'll spend the rest of their lives caring for the sibling who has special needs.



# Label Feelings and promote EQ

Expect squabbles, jealousy, anger – these types of interactions with sibs enable us to better cope with our peers.

- Label & acknowledge your children's feelings and fears even if they're not directly expressed.
- Let your children know it's OK to have negative feelings toward the disabled sibling: Such thoughts don't make them bad kids, and you won't reject them because of those feelings.
- Good or bad, they can always share their thoughts and feelings with you.

Intervention is only warranted if there's a safety concern or they can't resolve the issue independently.

# Expectations - managed

- Typical sibs
  - Be cautious about expecting too much
- Sibs with Special Needs
  - Be cautious about not expecting enough
- Typical Sibling Relationship
  - Remember they are siblings

# Aid positive sibling interactions

- When possible, anticipate & prepare for stressors
- Assign chores – each according to ability / parent vs kids / group tasks
- Have family meetings, movie / game nights, do things together
- Ensure each child has some private time & space
- Maintain high behavioral expectations for each child
- Model and mandate respect
- Acknowledge each child's strengths and challenges

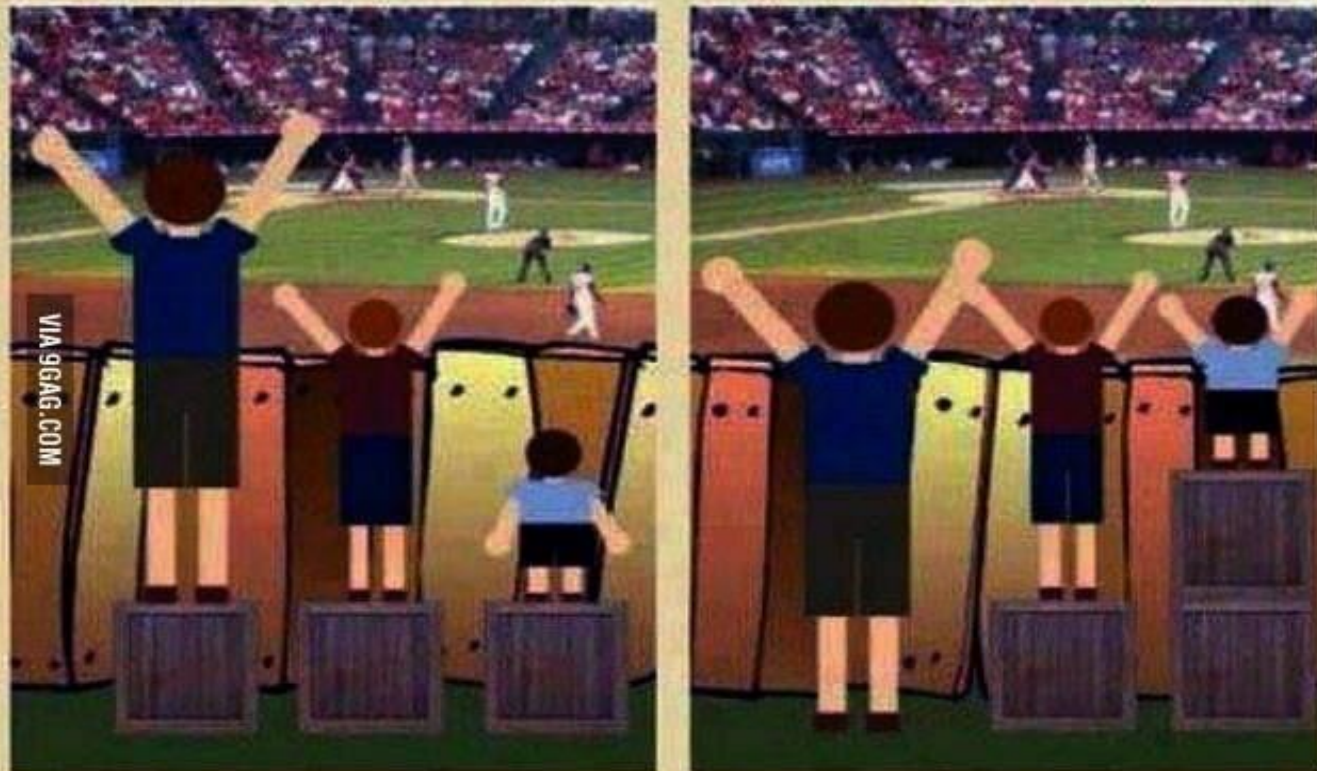
# Start Planning now for adulthood

Consider inviting (but not requiring) siblings to attend informational, IEP, transition planning meetings, and clinic visits. Siblings frequently have legitimate questions, informed opinions and can make positive contributions to the child's team.

It shouldn't be expected that a sibling will automatically care for their sibling. It may be something they choose after they're an adult....but the choice needs to be their own, not forced or pressured, and they need to understand that there are options if their situation changes and they're no longer willing or able to provide care.

# Everlasting Unequivocal Love

Equality doesn't mean Justice



This is Equality

This is Justice

# Everlasting Love is....

- Talk to all your children about the 'elephant', but also their concerns including any perceived unfairness.
- Arrange to spend time alone regularly with each of your children. This is especially important for families, in which a child has special needs. It guarantees a time, even if it's only five minutes a day, during which your kids don't have to compete with each other for your attention.
- Listen!
- Keep your promises.



# Recognize & Support talents

Dr. Howard Gardner – Multiple Intelligence

- Verbal / Linguistic, Logical, Visual /Spatial, Interpersonal, Intrapersonal, Musical, Kinesthetic, Natural / Plant & Animal and Existential / Spiritual

Dr. Bill Hettler - Dimensions of Wellness

- Emotional, Intellectual, Spiritual, Social, Cultural, Environmental, Occupational, Financial and Physical

# Self - Care

- When parents seek support, information, and respite for themselves, they model resilience and healthy attitudes and behaviors for their children.
- Special needs often result in occupational, financial, marital and other stressors. When we're stressed we often make poor choices, are short-tempered and feel drained. In order to be good caregivers we need to take care of ourselves



# Tools

- Books
- Websites
- Toys and Games

# Warning Signs

- Significant Anxiety / Fear of separation
- Withdrawal
- Frequent Crying or Worry
- Severe Anger
- Loosing interest in friends
- Decreasing school performance
- Perfectionism + Over-achievement
- Changes in eating or sleeping patterns
- Rebellious / Acting out
- Loosing interest in activities (sports, music, clubs, theater, etc.)

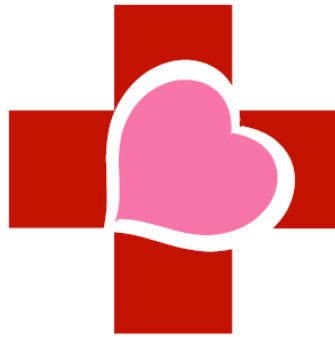
# Where to go for more help

- Medical team –Pediatrician, Psychologist / Psychiatrist, or the specialist who works with the child with special needs
- Social Worker, Counselor / Therapist, Clergy, CCLS
- School – Teacher, Counselor, Social Worker, etc.
- Camps or Support groups
  - Wisconsibs
  - One Step At A Time Camp
  - Camp Angel
  - MediCoping

# Did I Meet Objectives?

- Do you have a better understanding of the needs & strengths of **siblings**?
- Do you have a better understanding of how **siblings** needs may change as they mature?
- Do you have questions about any of the 'PLEASERS' techniques to minimize **sibling** rivalry?
- Did you learn about some tools to decrease **sibling** rivalry?
- Any other questions?

# Thank You!



MediCoping LLC

**Chris McNeill Bivins**  
**[medicoping@gmail.com](mailto:medicoping@gmail.com)**  
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