

History and Background of Continuing Bonds

Prior to World War I, it was universally accepted that death had a lifelong impact on the survivors (Devita-Raeburn, 2004). Indeed, the accepted thinking on the grief process incorporated the concepts of continuing bonds and ongoing attachment to the deceased. Victorian widows grieved literally and figuratively for years (Neimeyer, as cited in Devita-Raeburn, 2004). A major shift in thinking occurred in the aftermath of WWI throughout Europe. In Britain alone, there were hundreds of thousands of war-related deaths (Devita-Raeburn, 2004). The sheer number of deaths literally overwhelmed those left behind and “almost overnight,” said Neimeyer, “there was a new posture toward loss. It became a patriotic duty to repress one’s grieving, and to distance oneself from it. This model of self constraint, rather than self expression, became the approved way of reacting to loss” (Neimeyer, as cited in Devita-Raeburn, 2004, p. 140).

Since that time, emotional detachment, which included severing ties with the deceased, was seen as a critical part of the grief process (Klass, Silverman, & Nickman, 1996). In fact, from a Freudian and medical model perspective, emotional disengagement was essential to the successful adaptation of bereavement (Field, Gal-Oz, & Bonnano, 2003; Freud, 1917/1957; Klass & Walter, 2001; Raphael, 1983).

Historically, the study of bereavement has been focused on the psychology of grief as an individual, mostly internal, experience. Emphasis has been on the pathological aspects of grief and has advocated for emotional detachment or letting go to achieve closure. Such views were reinforced by the medical model that compared grief to a wound that eventually heals, perhaps leaving some scar tissue; and once it has healed, the wound is forgotten (Davies, 1999).

Alternative views of grief and grief resolution have been developed more recently—perceiving grief as “work” (Worden, 2004) and active coping (Attig, 2001) and as continuing bonds (Klass et al., 1996). There has been a shift from emotional disengagement and detachment to working through the loss by relearning the world in a way that helps one accommodate and live with the loss (Attig, 2001). In the view of Neimeyer (2001) and Attig (2001), we have a continuing relationship with the deceased:

“the premise that moving on means letting go is wrong” (Neimeyer & Attig, as cited in Devita-Raeburn, 2004, p. 143).

A major shift has become evident in bereavement research as well. Findings have supported the significance of ongoing connections with the deceased (Klass et al., 1996). There has been increasing attention in the bereavement literature focusing on the function of a “continuing bond” in relation to coping (Field, Nicholas, Holen, & Horowitz, 1999; Field & Friedrichs, 2004; Field, Gao, & Paderna, 2005; Klass & Walter, 2001; Klass et al., 1996; Stroebe, Gergen, Gergen, & Stroebe, 1992) and adaptation following the death of a loved one (Klass et al., 1996). It is now generally accepted that despite the permanence of physical separation, the bereaved can nevertheless be emotionally sustained through a continuing bond to the deceased (Field et al., 1999). The majority of this research has focused on adults and on the nature of continuing bonds following the death of a spouse. The concept of “continuing bonds” has been discussed in relation to children’s grief but it has occurred only in the context of parental loss (G. H. Christ, 2000, 2002; Silverman, Nickman, & Worden, 1992; Silverman & Worden, 1992). These studies specifically describe how children maintain a continuing bond to the deceased parent in an attempt to preserve this relationship. The phenomenon of “continuing bonds” has not been labeled as such in the sibling bereavement literature, which in general has been quite limited to date, although similar concepts have been described in relation to sibling bereavement (Davies, 1991, 1999; Devita-Raeburn, 2004; Hogan & DeSantis, 1992). In this article, the authors demonstrate how the “continuing bonds” concept applies to the sibling relationship and we describe the unique, ongoing relationships and bonds formed by children and adolescents following sibling loss.

Uniqueness of Sibling Relationships

“Sibling relationships are the total of the interactions (physical, verbal, and nonverbal communication) of two or more individuals who share knowledge, perceptions, attitudes, beliefs, and feelings regarding each other, from the time that one sibling becomes aware of the other.” (Cicirelli, 1995, p. 4)

Sibling relationships have attributes in common with all interpersonal relationships, but in addition they have certain

characteristics that address the extent of their unique bond (Davies, 1999). Sibling relationships last a long time, essentially a lifetime. In fact, it has been determined that siblings are likely to spend at least 80–100% of their lifespans with each other, more time than with any other family member (Bank & Kahn, 1982). Even when parents divorce, the marriage relationship ends, but it does not end the relationship between the siblings (Davies, 1999).

Sibling bonds develop because there is high access and contact between siblings. Further, siblings use each other as major influences or touchstones, in a search for personal identity (Bank & Kahn, 1982) and understanding the world around them. Siblings play a crucial role in identity development, by way of personal exchanges through which they define one another (Bank & Kahn, 1982). Research also highlights the importance of the sibling bond (Packman et al., 1997b; Wiley et al., 1984). The pediatric bone marrow transplantation (BMT) literature has shown that the sibling bond between the patient and sibling donor actually intensifies following BMT (MacLeod et al., 2003; Packman et al., 1997b; Wiley et al., 1984) where one sibling's provision of a life-saving measure for a brother or sister connects them in a unique way.

The significance and uniqueness of the sibling relationship portends the profound effect that the death of one child can have upon brothers and sisters (Davies, 2002). The death of a sibling means loss of a playmate, confidante, role model, and friend: Nothing can prepare the survivor for such a myriad of losses (Davies, 1995). Siblings' identities are intricately connected because they share similar histories, so that when one sibling dies, the survivors essentially lose part of themselves (Devita-Raeburn, 2004).

The Concept of Continuing Bonds with Siblings

The concept of continuing bonds with regard to sibling bereavement was initially examined by Davies (1991, 1999) and Hogan and DeSantis (1992). Among the long-term effects of sibling bereavement in childhood, bereaved siblings maintain connections with their deceased brother or sister by engaging in specific actions that serve to keep them in touch. Nineteen-year-old Rod, whose brother died when Rod was 10, says, "I think about him a lot. I've got a picture of him by my bed . . . and we've got pictures of

him all over this [parents'] house, so it's . . . like he's still here." Other siblings purposefully include the deceased sibling in their ongoing lives, often by incorporating some favorite memento into special events: Candace, for example, had her sister's favorite peach colored roses for her wedding: "We used peach roses for her funeral. And for my wedding . . . it was just a real sense of having her there with us." Many siblings have ongoing conversations with their sibling, or pray to them for protection or guidance during difficult times: Janice, now 21, was 12 when her sister died and prays to her sister "Jackie, watch over me, take care of me." Although some siblings must disentangle from destructive aspects of relationships, such as abusive or friction-filled relationships, bereaved siblings allow their siblings' influences to shape their lives and characters. In fact, some have noted that their wish to stay connected or reconnect to their deceased sibling is even stronger as they grow older (Davies, 1999, pp. 191–193).

Hogan and DeSantis (1992) referred to continuing bonds as "an ongoing attachment." The "ongoing attachment categories" include:

1. regretting—desiring to have a better relationship; wishing to continue a shared relationship;
2. endeavoring to understand—searching for reasons for the sibling's death; wanting to know circumstances of the death;
3. catching up—asking what heaven is like; how are things? bringing the siblings up to date;
4. reaffirming—loving and missing the sibling;
5. influencing—seeking guidance from the sibling; and
6. reuniting—anticipating reunion in heaven.

Many of these categories—reaffirming, catching up, influencing, reuniting—speak to the desire of the bereaved sibling to maintain a continuing bond with the deceased sibling.

Batten and Oltjenbruns (1999) also reported that bereaved siblings experienced an ongoing attachment with their deceased brother or sister manifested in two ways: first by acknowledging a continuing bond with the deceased, who although no longer physically alive, seems to exert a presence felt by the survivor. Although the relationship has changed, in a sense, it continues. "It's . . . like he's still here . . . It's kinda like there is still a piece of

him with me . . . Sometimes that is fairly comforting” (p. 540). Second, through “continuation” the memory lives on through the things the deceased sibling did and the kind of person he/she was.

In their study of interviews with bereaved adolescent siblings, Forward and Garlie (2003) found the most important variable in the grief process was a search for new meaning that encompassed “continuing the bond.” This search for new meaning took years and for some it remained ongoing. Bereaved siblings examined their lives and wanted to know what their purpose was, how to make meaning out of the loss, and how to go on despite the fact that their sibling had died. Specifically, spiritual beliefs contributed to this sense of a continuing bond and provided comfort, in that the majority of teens believed the sibling was in a better place and they would be reunited again. They believed the deceased sibling was still with them, even “watching over them.” Bereaved siblings also reported it was helpful to have or wear the deceased sibling’s possessions (i.e., photos, wallet, clothing, watch). Keeping memories alive by sharing positive recollections of the deceased sibling was yet another way to maintain the connection. Two bereaved sisters who lost their firefighter brother in the World Trade Center attacks designed a book of photos, cards, and poems to commemorate their deceased sibling. For these sisters, maintaining a bond with their brother helped them come to terms with their sibling’s death and find meaning out of their loss.

In her 2004 book, *The Empty Room: Surviving the Loss of a Brother or Sister at Any Age*, Elizabeth Devita-Raeburn referred to continuing bonds as the phenomenon of “Carrying.” Based on interviews with 77 bereaved siblings, she found the surviving siblings carry, or bring forward, their deceased sibling into their current lives without attempting to replace them. The deceased siblings remain part of their identity as parallel travelers in life. Thus, bereaved siblings were “carrying” their deceased sibling with them and continuing the very bonds that had always defined the relationship. In the book, Meredith provides an example: She runs marathons in memory of her brother, Jon. This allows her to travel—which her brother loved to do—and the money she raises is donated to neuroblastoma research, the cancer Jon died from. Devita-Raeburn insightfully explains:

Running has given Meredith a way to keep Jon with her as she moves into the terrain of her own future, one that she looks to more willingly now. She has invented a new relationship with him, one that acknowledges that he is dead, gone from her life but present too. Running has helped Meredith to redefine life after loss. (p. 136)

Like Meredith, bereaved siblings may feel disloyal in moving ahead and leaving their deceased sibling behind. Their love for them and sense of connection lives on despite the fact that they are not physically present (Devita-Raeburn, 2004).

It is important to note that grieving siblings' continuing bonds expressions are likely to be influenced and shaped by their former relationship with their siblings (Davies, 1988a, 1999; Devita-Raeburn, 2004). Although some sibling relationships are marked by warmth and caring, others are hostile and adversarial. Moderate amounts of sibling conflict exist in even the most optimal sibling relationships, but this is balanced with support and closeness (Newman, 1994). However, in instances where the relationship between the siblings was primarily ambivalent or conflictual, the connection to their deceased siblings may be disturbing or even frightening (Normand, Silverman, & Nickman, 1996). For example, a bereaved teenager had a conflictual sibling relationship wrought with competition and fighting. After his brother's death he had numerous nightmares and was disturbed by the feeling of his brother's presence in the home. Moreover, bereaved siblings may be contending with negative things they said or did prior to the sibling's death, which can intensify feelings of guilt. In addition, siblings may have unfinished business, if they did not have a chance to say good-bye, apologize, or tell the sibling how much they meant to them, leaving them with lingering regret. In such instances, the grieving siblings' continuing bonds expressions may not be comforting.

Overall, it is now widely accepted that maintaining an ongoing connection and continuing relationship with the deceased does not end after a death but remains and becomes an integral part of successful adjustment (Attig, 2001; Field & Friedrichs, 2004; Klass & Walter, 2001; Stroebe et al., 1992). So we find that bonds do not need to be broken and that individuals maintain them in many different ways, continuing to experience the presence of the deceased in their lives.

The experience of a sibling's death has profound and long-lasting effects on the surviving siblings (Horsley & Patterson, 2006). The depth of the emotional closeness that existed between siblings prior to the death influences the surviving child's grief process (Davies, 1995). Surviving siblings will need to learn to define their roles and relationships in the absence of their primary referent (Balk, 1991; Bank & Kahn, 1982; Devita-Raeburn, 2004). It is not unusual for the impact of sibling bereavement to last a lifetime. For years following the death, many bereaved siblings report that they still actively miss their deceased brother or sister, and often experience renewed and intense grief on occasions that would have been significant in their lives together (such as births, graduations, weddings, retirements; Davies, 2002). To help process this devastating loss, surviving siblings continually renegotiate the "relationship" with their deceased sibling as they reach successive developmental stages (Devita-Raeburn, 2004).

In the next section, we examine how children and adolescents preserve and maintain an ongoing attachment to the deceased and highlight the crucial role of the family system in supporting children and adolescents.

Role of the Family

"Of all life experiences, death poses the most painful adaptational challenges for the family as a system and for every surviving member, with reverberations for all other relationships." (Walsh & McGoldrick, 1991, p. 3)

One cannot adequately look at the bereavement process of surviving siblings without taking into account the entire family system. Death within the family has been found to be one of the most painful events that individuals can experience, creating what amounts to a total disruption of family equilibrium, putting the entire family in crisis (Bowlby, 1980; G. Christ, 2006; Walsh & McGoldrick, 1991). Bank and Kahn (1982) found that after the death of a child, family life is forever modified, including the sibling subsystem. Because the grief process is both an individual and family process, a child's death disrupts the way the family functions, alters the way parents and surviving siblings relate to each other, and changes the expectations family members have for themselves and for the family as a unit (Detmer & Lamberti, 1991).

After any death, the family must restructure and readjust, but doing so after the death of a child is exceedingly difficult (Davies, 1999; McCown & Davies, 1995). How families manage this process of adaptation is greatly influenced by the degree of communication and cohesiveness in the family as well as the amount of support the family receives from extended family members and friends (Christ, 2006; Davies, 1988b, 1999; Horsley & Patterson, 2006; McCown & Davies, 1995; Spinetta, 1981). These conditions very much affect how surviving siblings adapt to the loss. When siblings experience closeness or a sense of togetherness in their family and when they share in the support offered by friends and family, they demonstrate fewer behavioral problems following the death (Davies, 1995; McCown & Davies, 1995).

Impact of Parental Grief on Siblings

Parental reactions to the death of a child and parents' patterns of grief have a significant impact on the surviving siblings who themselves are going through a grief process mourning the death of a brother or sister (Balk, 1991; Bank & Kahn, 1982; Cain, Fast, & Erikson, 1964; Davies, 1995; Horsley & Patterson, 2006; Rosen & Cohen, 1981; Rubin & Malkinson, 2001). After a child's death, just when surviving siblings most need the stability and security in their family, parents may not be able to support them (Davies, 1995). A number of authors (e.g., Bank & Kahn, 1982; Cain et al., 1964; Davies, 1995; Devita-Raeburn, 2004; Mufson, 1985; Pollock, 1986; Rosen, 1986) refer to sibling loss as a double loss—not only the death of the sibling, but also the loss of their parents' support. Overwhelmed by their own grief, parents' capacity to look after the needs of the surviving children is sorely limited even though they remain concerned for their children. They often just do not have the emotional energy to adequately reach out to them.

Children's grief and fear may be compounded by witnessing parents' distress and vulnerability along with the explosive nature of their parents' feelings; they often attribute their parents' behavior to some fault or failing of their own (Horsley & Patterson, 2006). Nothing in their previous experience gives the surviving children an accurate idea of the depth of their parents' grief or how long grief lasts, so they may become overwhelmed and impatient with their parents' grief reactions. Whether children

are suppressing or expressing their feelings, they are nevertheless grieving and are affected by their parents' expression of their own sorrow and vulnerability (Davies, 1995). The parents' distress is often so intense that bereaved children and adolescents protect their parents by not mentioning the deceased as they believe it will upset them even more (Balk, 1983; Forward & Garlie, 2003; Horsley & Patterson, 2006).

Sibling grief may be further complicated by the failure of those around the bereaved siblings to acknowledge that they suffered a significant loss as well (Davies, 1995; Devita-Raeburn, 2004). Bereaved siblings are often "the forgotten or invisible mourners" receiving overt and covert messages from significant others to repress and deny their grief (Devita-Raeburn, 2004; Rosen, 1985). Bereaved adolescents, for example, are frequently given messages to ignore and/or postpone their own grief and "remain strong for their parents." These teens reported being told, "The death must have been really difficult for your parents." Such statements minimized their grief, leaving them feeling invalidated, unacknowledged, and ignored (Horsley & Patterson, 2006).

In addition, the nature of continuing bonds expressed by parents plays a role in how siblings cope. For example, if parents are preoccupied with the immortalization of the deceased child (altars throughout the house, numerous photos of only the deceased child, daily visits to the graveyard), this may leave parents without any emotional energy, space, or time to deal with surviving siblings. This may, in turn, affect siblings' well-being and cause them to assume grown-up roles and, in essence, lose their childhood. In contrast, parents who are avoidant, that is, parents who demonstrate no activities, behaviors, or conversations about the child who died, may be limited in their ability to tolerate continuing bonds expressions, as well as be unavailable emotionally for the surviving siblings.

In sum, the importance of parental support cannot be underestimated in mediating surviving children's experiences of a sibling's death. Parents play an essential role in helping siblings cope and adapt to the loss (McCown & Pratt, 1985).

Family Communication

Open communication in the family is crucial in the aftermath of a sibling death. Unfortunately, in families where children are not

allowed to frankly express their feelings or talk about the deceased, the surviving children often feel overlooked and consequently alone in their grief (Davies, 1988b, 1999; Horsley & Patterson, 2006; Rosen, 1991; Spinetta, 1981). The presence of open family communication, along with the candor with which the death is discussed provides a supportive environment for the remaining children, helping them work through a range of emotions (Cain et al., 1964; Horsley & Patterson, 2006; Siegel, Mesagno, & Christ, 1990; Spinetta, 1981). Most bereaved siblings can benefit from opportunities to talk about their responses not only at the time of the death but for many years to come as they reach new developmental levels of understanding death. If they are denied opportunities to talk about the death and their reactions, children will suffer needlessly (Davies, 2002). Thus, open communication and parental support are crucial in helping the surviving sibling adjust to the loss (Davies, 2002; Horsley & Patterson, 2006; McCown & Pratt, 1985).

Studies on Sibling Loss: Negative Consequences and Opportunities for Growth

Bereaved children have been found to exhibit psychosomatic disorders and behavior problems, and attempt to restore order to their lives through dreams, art, play, sports, and school (Cicirelli, 1995; Davies, 1983, 1999; Eth & Pynoos, 1985; Lieberman, 1979). Reactions among some children may not become evident until later on as they may tend to use denial for a longer period of time than adults (Bowlby, 1980; McCown & Davies, 1995). In one study, about 25% of bereaved siblings demonstrated behavioral problems at levels comparable to those children referred to mental health clinics (McCown & Davies, 1995). In the general population, only 10% of children have behavior problems that reach this level. Researchers have noted (Bank & Kahn, 1982; Christ, 2000; Christ, Siegel, & Christ, 2002) that adolescents often appear unemotional and avoid discussion of the deceased in order to control powerful emotions. Adolescents often make efforts to appear normal despite their loss, so that they will not appear different from their peer group (Christ, 2000; Christ, 2002). Studies investigating the effects of loss on adolescents report that common grief reactions include anger, depression, anxiety and guilt (Balk, 1983; Mufson, 1985).

Beyond the negative consequences and problematic outcomes of a sibling loss, there are also opportunities for growth (Davies, 1991, 1999; McCown & Davies, 1995). Following the death of a sibling, bereaved adolescents reported psychological growth evidenced in increased maturity, improvement in academics, higher moral values, and a more mature attitude (Balk, 1983). Looking back, many siblings perceived some positive outcomes of the experience. They felt more comfortable with death and were able to help, rather than avoid, other individuals who were facing a death in the family (Davies, 1991; McCown & Davies, 1995). They felt their experience facilitated the development of a sensitive outlook on life; and their learning had been enriched in the sense that they had matured and they felt better about their abilities to handle adversity (Davies, 1991, 2002). One teenage boy commented: "I have a better outlook on life now; I mean, I realize how important life is as a result of my sister's death." Interviews with parents also indicated that they perceived their children as more sensitive and compassionate, and more aware of the problems of others as a result of their experience with death (Davies, 1999, p. 90).

Similarly, Forward and Garlie (2003) reported that bereaved adolescent siblings reported positive changes including (a) more maturity, (b) deeper appreciation for life/living life to its fullest, (c) taking less risk, (d) expressing affection toward significant others in their lives, and (e) a greater purpose of their life. In more concrete terms, one study reported that bereaved siblings scored higher than the standardized norms on a measure of self-concept (McClowry, Davies, May, Kulenkamp, & Martinson, 1987).

Growing through adversity is not unique to siblings who experience the death of a brother or sister; their growth may begin even before the death, and may be a pattern that is set earlier in the course of the sick child's illness. For example, Kramer's earlier research (1981, 1984) with siblings of children with cancer showed that when a child is diagnosed with a life-threatening illness, the shift in family responsibilities and the new atmosphere of unpredictability provided opportunities for growth for well siblings. Well siblings matured earlier, were less dependent on others, contemplated life and death, and learned at a young age that life holds many disappointments and challenges that forced them to become more adaptable and flexible. They developed a greater capacity

for empathy, cooperation, and compassion. They developed a great respect for the ill child and all he/she had to endure. Through all these insights, they came to realize the importance of making the most of each day.

In a related vein, in a study of the psychosocial impact of BMT on donor and nondonor siblings, donors were rated by teachers as having significantly more adaptive skills—social skills and leadership characteristics—than non-donor siblings on a behavior rating scale (Packman et al., 1997a). Parents also described positive changes in donors as a result of the BMT experience, for example being, “more mature, getting better grades, and gaining leadership skills.” It is possible that the donor’s role in the treatment process may have a positive effect on their development. Sibling donors may have emerged from the BMT experience “curiously ripened” (Freud, 1952) with increased sensitivity and enhanced personal maturity. Thus, BMT can be seen as a life-growing experience (MacLeod et al., 2003).

Indeed positive outcomes or potential for growth can be enhanced when parents and other adults validate and support the unique reactions of the healthy siblings when their brother or sister is seriously ill or dies (Davies, 1990, 1991; McCown & Davies, 1995).

Uniqueness of Sibling Bereavement: Factors that Influence Sibling Reactions

The impact of a child’s death on siblings is manifested in four general responses, best characterized in the words of the siblings themselves (Davies, 1999, p. 199). Not all children who have had a brother or sister die will experience all responses, but most bereaved siblings will demonstrate these responses to varying degrees.

“I Hurt Inside”

This first response focuses on emotional and psychophysiological responses normally associated with grief, including for example, sadness, anger, frustration, loneliness, fear, anxiety, irritability, and guilt. However, unlike adults who more readily describe their emotions and reactions, children manifest their hurt in other ways.

They may cry, withdraw, seek attention, misbehave, complain of aches and pains, pick fights easily, argue, have nightmares, fear the dark, lose their appetites, or overeat. In addition, a study by MacLeod et al. (2003) found that when a sibling dies, the donor sibling often feels guilty, angry, and blames him/herself.

“I Don’t Understand”

Children begin to make sense of death depending in large part on their level of cognitive development. Findings from several studies indicate that reactions to loss, the understanding of the finality of death, and mourning are influenced by the age and developmental stage of the bereaved child (Christ, 2000; Fanos, 1996; Forward & Garlie, 2003; Leon, 1986; McCown & Davies, 1995). As children mature, they move from concrete operational ways of thinking toward more abstract or conceptual ways of thinking. If children are not assisted or guided in their understanding of the death and related events, they become very puzzled and confused. When children reach new developmental levels, they need to re-process the events around their brother or sister’s death.

“I Don’t Belong”

A death in the family disrupts the usual day-to-day activity of family life. Parents are distressed, familiar and unfamiliar visitors invade the home, and children feel overwhelmed by all this activity. They may feel as if they are not a part of it, they are in the way, and they don’t belong. Any sense of normalcy is lost. Realignments in the family also may make siblings feel as if they have “lost their place.” Moreover, bereaved children frequently feel different from their peers; again, this may contribute to their feelings of not belonging.

“I’m Not Enough”

This response may result when children feel as if the child who died was a favored or perfect child, particularly as parents become pre-occupied or all consumed with their grief. Such children may conclude that they should have been the one to die because no matter what they do, they are “not enough” to make their parents

happy. Some siblings react by striving to be good at all they do, trying to prove they are good enough, that they are worthy; others will tend to respond in the exact opposite way, seeking “proof” that their parents still love them. In their grief, parents, other family members, and friends tend to immortalize the deceased child, overemphasizing their admirable qualities. The surviving sibling often feels inadequate compared with the sibling who has died. Everyone always asks about how their parents “are doing,” not recognizing or validating their own grief or needs.

Siblings’ reactions to the death of a brother or sister do not occur in isolation (Davies, 1983, 1999; McCown & Davies, 1995). Characteristics of the children themselves, the circumstances surrounding the death, and environmental factors play a role. These various factors, categorized as individual, situational, and environmental characteristics, interact with one another, coming together to influence siblings’ responses to the death of a brother or sister:

1. *Individual characteristics* include physical characteristics as well as the following: gender and age, health status, coping style, temperament, self-concept, and experience with loss and death.
2. *Situational characteristics* include circumstances surrounding the death such as cause of death, duration of illness, place of death, time elapsed since death, involvement in events surrounding the illness and death, such as visiting in the hospital or participating in the funeral.
3. *Environmental variables* constitute the third category of factors that influence siblings’ bereavement responses. These include shared life space, centrality, family environment, parent–child communication, parental grief, family functioning, continuing bonds expressions of parents, and ability of parents to foster continuing bonds expressions in the surviving children.

The previous factors (individual, situational, and environmental) coupled with parental responses (Rubin & Malkinson, 2001) and the parents’ own use of continuing bonds expressions (adaptive vs. maladaptive), play a large part in determining how children cope with death. Furthermore, parents’ tolerance toward fostering continuing bonds expressions in their children may lead to

adaptive and maladaptive outcomes (Silverman, Baker, Cait, & Boerner, 2003).

Clinical Implications

Fostering Continuing Bonds Expressions in Siblings

Articles that have addressed continuing bonds expressions and clinical implications have been written with adults in mind. In our view, these concepts are equally applicable to children. One thing that has been amply observed and demonstrated in the limited research on siblings is that parental support is important in mediating the child's experience of death and helping the child adjust to the loss. Accordingly, collateral work with parents, by clinicians, can serve an integral role in helping their children facilitate adaptive use of continuing bonds. We know children learn most things by observing their parents' behavior and it is no different when it comes to the mourning process. For this reason, it is important that parents use continuing bonds adaptively, and give their children permission to do so as well. It can be very helpful if the clinician works with the entire family, because the parents are often so deeply absorbed in their own grief experience that they feel helpless in assisting their surviving children through the bereavement process (Bank & Kahn, 1982; Christ, Siegel, & Christ, 2002; Furman, 1983; Horsley & Patterson, 2006; Rosen, 1991; Siegel et al., 1990). The task of mourning "successfully" is linked to the ability to use continuing bonds in adaptive ways: figuring out how to preserve and continue a connection to the love that existed prior to the death.

How to Help Siblings: Opportunities and Interventions

Siblings work through their grief in bits and pieces. Play, school, and continuing with normal activities can be powerful tools that help children cope by modulating their grief, allowing them to "take breaks" from both their own and their parent's intense grief. Sometimes parents misinterpret this kind of behavior, believing that the children's "normal" behavior signifies that they are not affected by the death and are not grieving. Parents need to be prepared to expect children to reprocess the death and its impact over

time, as the surviving children mature and build their own identity. Parents (and other adults) must also realize that some siblings may not be as verbal as adults in expressing their feelings and memories, or may not be as willing to talk about the deceased sibling. Instead of talking with their parents, perceived as overburdened with grief, surviving children may turn to a trusted teacher, aunt, uncle, or friend for support, sometimes done to protect the parents. Of central importance is respecting the individual coping style of each surviving sibling.

Siblings' memories may be triggered by particular objects, other people, certain places or familiar songs. Because our connections to the deceased continue through our memories, this waxing and waning of emotionally charged memories are to be expected. It is important to prepare siblings for these experiences and let them know this is part of grief. Talking about these experiences when they occur is helpful. It would also be useful for parents to share memories and their own personal triggers when they occur as a way of preparing children for these experiences.

Many siblings say that in an ongoing way, they continue to think about their deceased brother or sister at special times, such as starting high school, graduations, birthdays, weddings, or family reunions. Thus, it would be helpful to anticipate and openly talk with surviving siblings about these important life events and the keen absence everyone feels. Parents can encourage them to think of such times as opportunities to think fondly of their brother or sister rather than triggers for only feeling sad. Of importance, siblings need the consistency of continuing important family and holiday celebrations, even though this can be emotionally draining for parents. It is helpful to think and plan ahead about how to approach these important events. Sometimes, it helps to start new family rituals or traditions, which incorporate the memory of the deceased child in some way.

Adults might share with the bereaved children what other siblings have done in similar circumstances—carry their sibling's photograph in their wallet, keep belongings that have special meaning (e.g., one child kept her brother's stuffed animals on her bed and found comfort in them every night). Many siblings continue to talk to their sibling quietly or internally. Keeping in touch with one's sibling can be a life-long activity for many—for example, the young woman who chose peach colored roses for

her wedding flower to commemorate her sister's "presence" at this special event. Finding comfort in remembering the deceased siblings can be particularly helpful during times of loneliness. Some siblings turn to their deceased brother or sister in conversation or by offering prayers to them during difficult times. Adults can reassure siblings that many siblings do this even though they are sometimes embarrassed to tell anyone that they do it.

Encouraging siblings to attend bereavement groups can be helpful because in such groups, children and adolescents learn that they are not alone in experiencing grief. Through sharing in the group, siblings learn about what others do to manage the situation and learn to share their own thoughts, feelings, and strategies.

One of the most important things for caregivers/adults to do is to model the kinds of actions and activities that allow for the development of continuing bonds: listen sympathetically and non-judgmentally, offer comfort, and offer presence. Caregivers themselves cannot make the connections for grieving siblings; they can only offer suggestions, encouraging actions and activities that may facilitate the creation and maintenance of continuing bonds. The nature of such actions and activities, and the nature of the bonds, are individually developed and expressed, being highly personal for the surviving sibling. Adults can offer suggestions or share stories of what other siblings have done, but must refrain from offering pat answers, simple formulas, procedures or directions.

How parents handle the siblings continuing bonds' expressions is critical. Some parents get worried or frustrated when siblings rarely talk about or express their feelings about the deceased child. Parents need to be reminded that they can gently encourage siblings to share feelings but sometimes siblings choose more private ways of expressing their thoughts or feelings, for example, by keeping a journal or writing poetry/music. Parents need to foster and tolerate various continuing bonds expressions from the siblings; this may be difficult for parents to do sometimes, as it was for the parents of 14-year-old Johnny who insisted on wearing the football jacket of his older deceased brother. It is also important to let siblings know that the strength of the connection to their deceased brother or sister may change over time. It may lessen, strengthen, or take on a different meaning as the sibling matures.

Adults also must listen to and support siblings as they puzzle over who they are now or how they are different without their

sibling's presence. Adults can help them to rediscover self-confidence by reassuring them that they can retain "lessons learned" from their deceased sibling, by remembering the positive aspects of their relationship and by talking about the difficult aspects of the relationship as every relationship has many dimensions. Although their identity is influenced by the sibling relationship, siblings' individuation needs to be supported. We need to give them permission and encouragement to not feel guilty about going on with their life. It is critical that surviving siblings are encouraged in their efforts to pursue activities and interests that enhance their self-concept and the establishment of their own life-goals.

In instances where the relationship between the siblings may not have been a good one, such as in abusive or manipulative situations, reinforcing the development of "positive" continuing bonds may not be a good idea. Because negative ties can sometimes bind more tightly than positive ones, it becomes even more critical to listen to siblings about their thoughts and feelings; explore if there was anything "good" or "pleasant" or even funny aspects about the relationship, or events, that the surviving siblings can remember. And, for all siblings, do not burden them with expectations that they "should develop continuing bonds." Such bonds may develop and change over time and are unique to each sibling.

It is important for adults to take into account any special circumstances (i.e., developmental delays, cognitive impairments, past history of depression or other such challenges) about siblings that may affect their grieving. We want to help siblings develop "healthy" bonds, but not to the extent that they are totally preoccupied with the deceased sibling for a long period of time. As well, the siblings may have to contend with things said or done that they wished they had not said or done; or the opposite—wishing they had said or done certain things. The greater the siblings' experience of unfinished business the greater is their difficulty in adapting to the loss. This may affect the developing of continuing bonds that are not necessarily helpful or comforting.

Adults need to realize that even very young siblings experience grief and they must pay attention to their needs and experiences. For example, parents and other adults sometimes tend to dismiss the significance of the sibling's relationship to the child who died—particularly when the child was a neonate or when the ill sibling was hospitalized for a long period of time

before dying. It is helpful to include siblings in the events surrounding the death (in the hospital or at the bedside at home) so that they will feel part of what is going on. Parents should talk with siblings directly to ascertain at what level they want to be involved; some siblings want to visit every day and help in the care of the child, others prefer to watch from the sidelines. Taking photographs of the siblings with the ill child provides concrete evidence of the sibling's involvement with the child who died. These photos and videos can be particularly meaningful for very young siblings who may not remember the circumstances and their own involvement around the time of the death.

It is important to identify when siblings are at risk of complicated grief and more likely to need specialized professional services, such as in cases of traumatic or sudden death. Dealing with the immediate crises and the siblings' response to it are of primary importance, but later on, it can be helpful for parents or other adults to review the event with the siblings, again emphasizing the importance of the role they played, talking with them about the facts of the situation and about their reactions and feelings.

It is useful to emphasize to siblings that finding ways of staying connected with the deceased child occurs naturally as a part of the human experience of grief. Continuing bonds are not something to "create" but to foster through listening and accepting whatever is meaningful to the siblings. Emphasize that continuing bonds develop over time, that is, they are not something that are suddenly created at the time of death.

Future Directions

Within the areas covered in this article, new questions are raised for future investigations that elucidate the uniqueness of sibling loss. In particular, we need to place sibling grief in its family context to increase understanding of how the nature of the family system may affect the course of grieving in siblings and the nature of siblings' continuing bonds expressions. Of course, we must also explore the impact of the larger community and society on siblings' capacity to develop, maintain, and adapt continuing bonds throughout their lives.

Most of the existing literature focuses on expressions of adaptive continuing bonds in siblings. It would be fruitful for future

research to examine maladaptive as well as adaptive expressions of continuing bonds expressions. Related research has described parentally bereaved “high-risk” children and adolescents as having had a continuing bond with the deceased that was primarily negative (Silverman et al., 2003). In the case of siblings, an investigation of unhealthy/maladaptive continuing bonds would be of particular interest in the context of an unhealthy or dysfunctional family (i.e., where there is lack of good caregiving, lack of talking about the death, parentification, neglectful/abusive parents). For example, in the latter situation of abuse, there may be unhealthy/maladaptive continuing bonds expressions by siblings. When the sibling was alive, there may have been a very strong bond between the siblings that the survivor maintains with the deceased sibling. This could be maladaptive in that surviving siblings may become totally engrossed in their private world where they keep the other sibling alive. Of concern, siblings may only hold onto the relationship with their deceased sibling and this would prevent them from moving out into the world.

In contrast would be the use of healthy/adaptive continuing bonds expressions by siblings in a dysfunctional family. Here, the continuing bond to the deceased sibling could be important to compensate for a poor relationship with the family. This could be the case where the siblings were confidants and there has always been a close sibling tie. When one sibling dies, they are still there internally for the surviving sibling and the continuing bond functions in a healthy manner.

Future studies could focus on distinguishing sibling loss from other kinds of losses (spousal, parental, loss of a child) and investigating what factors are unique to sibling loss. Possible factors to explore include sibling birth order. For example, loss of a younger sibling may involve issues of protection especially if the death involves a sibling who died of a chronic illness which proved fatal. On the other hand, loss of an older sibling could involve loss of an important role model.

Ultimately, life is an ongoing process and so is grief; we all form and then reformulate our bonds to others while figuring out how to continue those bonds throughout our lives. When one child dies, the remaining children in the family still think of that child as one of their siblings. The sibling is an integral part of one’s past and present and the relationship is naturally expected to continue

throughout adulthood and into old age (Horsley & Patterson, 2006). The bond itself is going to change over time, the task is how to learn again how to be and act in the world without those we love by our side (Attig, 2001).

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