

Checklist: Sibling contact planning

This resource is a checklist only and does not provide guidance in relation to assessment. Casework practitioners seek practice and specialist guidance in relation to the complexity of each individual assessment.

Child and family views and wishes

The views and wishes of a child and their siblings are considered and have highest priority.

The views and wishes of a child's parents and family/kin are important and all are considered. However, these views and wishes are secondary to those of the child and their siblings (see above).

Carer's views

The carer is likely to have specific knowledge, observations and insights that might not be readily apparent and can only be attained by providing daily care.

Child development

The child and their sibling/s age and development is considered, recognising the changes in cognitive, emotional and physical development with the passing of time since entry to OOHC. What has changed? What is now possible?

Child needs

Individual needs of a child and their sibling/s are considered, including identity, health and education needs. A child may have specific and significant health or behavioural needs that:

- require specialist or therapeutic care
- result in a qualified professional (for example a medical specialist) recommending that an existing placement not be disrupted, or that these needs be addressed in a placement separate to the placement of their siblings.

Placement stability and strength of attachment

A child or their sibling/s may have entered OOHC at different times into different placements which have proved to be very stable placements with a history of meeting most of their needs.

Assessment weighs up:

- OOHC care research¹, which provides strong evidence of the importance of sibling relationships in OOHC, including their potential to improve the stability of placements and
- the impact of removing a child from an existing stable placement.

¹ "Overall, studies that have examined functioning, mental health and educational outcomes, have found that children placed with some or all of their siblings tend to do better than children separated from all siblings." Institute of Open Adoption Studies (2018). Sibling co-placement and contact in out-of-home care and open adoption. Retrieved from <https://www.barnardos.org.au/media/347540/sibling-coplacement-jun2018.pdf>

- the impact of disrupting secure attachment.

Assessment of attachment is undertaken by a psychologist, or by a casework practitioner in consultation with a psychologist.

As a guide, the beginning assumption² is that an attachment has formed when the child or their sibling is:

- under 2 years of age, and the existing placement duration is over 6 months
- older than 2 years of age, and the existing placement duration is over 12 months.

Risk of harm

There may be circumstances where it is not in the best interests of children to be co-placed or co-located, because of the dynamics of risk that caused entry into OOHC or persisting risk that requires close supervision. For example, when a child and their siblings' history record sexualised behaviour between siblings.

Assessment of sibling risk is undertaken by a multi-disciplinary team including casework practitioners, casework specialists and other specialists.

Cultural suitability

When a child and their siblings are from a culturally and/or linguistically diverse background:

- priority is given to placing them with carers from the same cultural, linguistic or religious background as their own
- placement of CALD siblings together is a strategy that could significantly assist them to retain connections with culture, language and/or religion
- consideration is given to disadvantages that may arise if this involves disturbing placement of one sibling who is with carers committed to maintaining the child's culture, language and/or religion.

When a child and their siblings are Aboriginal:

- Priority is given to placing an Aboriginal child and their siblings with a member of their Aboriginal community, or a member of another Aboriginal family 'on country', residing in the vicinity of the child's Aboriginal community (noting Aboriginal Placement Principles section [13](#))
- Members of the siblings' extended family or kinship group, Aboriginal organisations and Aboriginal caseworkers are consulted to help identify a safe placement that best matches each child's demonstrable needs for kinship, attachment and permanence.

² "Australian practitioners and stakeholders generally agreed that placing siblings entering care within 6-12 months of each other was desirable to achieve placement stability." AIHW (Australian Institute of Health and Welfare) 2002. Guidelines for interpretation of child protection and out-of-home care performance indicators. Cat. no. CWS 17. Canberra: AIHW.

□ **Other factors**

There may be circumstances where assessment recommends co-placement or co-location, however other factors come into play. For example:

- It may be in the best interests of a child to be placed with a relative/kin who can provide a safe and permanent home (in context of permanent placement principles – section [10A](#) of the Care Act), but the relative/kin is not able to accept care for another child.
- A court, having considered all of the evidence, may order that a child is restored but their sibling is not (or vice versa).