

## “Yes” There are Positives for the Typical Kids!

It is always great to get positive news! For adoptive families, it can be a ray of sunshine amidst a sometimes dark and dreary situation. It is especially nice for parents to know that, “yes”, your sons and daughters, developing “normally”, can and do come out of a difficult family situation with some great qualities!

From very practical sentiments like, “We got a bigger house” or “I didn’t have anyone to play with and now I do” to more principled thoughts, brothers and sisters express many positives of sharing their “home” with an adoptee with mental health issues (i.e., Posttraumatic Stress Disorder, Oppositional Defiant Disorder, [Reactive Attachment Disorder](#), Attention-Deficit/Hyperactivity Disorder, [Sensory Integration Disorder](#) and [Fetal Alcohol Spectrum Disorder](#), etc.)

Overall, six main positives emerge from living within a family raising a combination of children with and without mental health issues. These six positive factors are identified below. Mixed in are the reports of actual brothers and sisters. These birth and/or previously adopted siblings range in age now from 15 to 25. They were between the ages of 7 and 16 at the time their families adopted. Their families adopted children ages 10 months old to 13 years old. The adoptees have now been a part of the family for between six and twelve years. All of the adoptees received various therapies for their difficulties.

### *Compassion*

Our typical children develop a compassion for those less fortunate from having lived with a sibling with mental health issues. They are able to realize that adversity strikes many—young and old alike. They listen and strive to see beyond the outside of a person. They acknowledge that there are individuals who require help. Compassion lends to the development of tolerance, insight and empathy.

*“As a whole, I believe that our family has had to make numerous sacrifices since my sister’s adoption, but we have gained from it. Spending time as a family is more difficult now, and the household is definitely less peaceful. However, I find it much easier to relate to children with differences and the families of those children. Before, when I saw a badly behaved child, it was easy to attribute that to bad parenting. Now I realize that other factors may be involved. Even with a loss of family time, I feel that we have become closer as a family because taking care of my sister brings us together.”*

### *Appreciation*

There is an understanding of the fact that they are well-off to have been born to (or adopted by) and raised by healthy, loving parents (Smith, Greenberg & Mailick, 2007.) On one level, the typical children tend to appreciate fun times and quiet moments. On a different level, they acknowledge that they are fortunate to have escaped the often horrendous long-term effects of neglect, abuse and abandonment.

*“I think a positive experience for me is that this has made me become a stronger person. I look at my brother and see what a horrible past he had with his foster mom (very neglectful). I look at my past and think ‘Wow’ I was really lucky to have a foster mom as good as I did. She treated me good and gave me food and all that. My brother grew up in a whole different situation.”*

## *Maturity*

A maturity develops as a result of the knowledge that life can be unfair, things might not get better, and bad things do not always happen to others (Meyer & Vadasy, 1994). This maturity produces children who are well-adjusted and more responsible than most same-age peers (Meyer & Vadasy, 1994).

*“I think it’s been a positive experience just in the fact that it opened my eyes to other issues that are out there. Like in school, my French teacher would always talk about students who would trash the desks—write on them and stuff—and that it was the parents’ fault. The parents didn’t care about their children. Bringing in disruptive children, who we have tried to help as much as possible, let me see that, “No, that’s not always the case.” There are parents who actually try to help and do whatever they can. This child, in her own mind, doesn’t want to follow it and chooses not to do what the parents want. So, it opened my eyes to the fact that it’s not always the parents that are causing the problem. It may be the child herself.”*

## *Aware of Consequences*

In setting their own life courses, brothers and sisters of children with mental health problems may have a heightened awareness of the consequences of various actions. For example, regarding drinking and pregnancy, they know firsthand how drinking while pregnant can condemn a child to brain damage and a lifetime of challenges (Olesen, 2004)

## *Making the Best of a Difficult Situation*

*“We found a way to occupy our time with making the best out of the situation. You learn how to work with what you got. This is good.”*

In essence, we all have to learn to “work with what you got.” This process helps to develop problem-solving skills. The resident children become quite creative in making life with a sibling with mental health issues work to their advantage. It is not uncommon that they negotiate with parents ways to earn money for comforts like a television, an iPod or CD’s. These supplies allow a comfortable escape during major family storms. They learn to be heard when absolutely necessary—demonstrating improved communication skills. Certainly, enhanced problem-solving, communication and negotiating skills, as long as not used maladaptively will serve them well throughout their lives.

## *Vocational Opportunities*

Brothers and sisters whose siblings have mental health issues frequently gravitate toward the helping professions (Meyer & Vadasy, 1994). These young adults are more certain of their own futures and about personal and vocational goals than comparable young adults without similar experiences.

Several families that I have worked with are currently the proud parents of psychologists and social workers in the making as well as a psychiatrist!

In closing this segment on how living with a troubled sibling offers positives for our typically-developing children, here is a contribution from an adult now in her 50s. Her parents were foster

and adoptive parents throughout her childhood, starting when she was age 4. At present, she is the adoptive parent to two children ages 12 and 17.

*“To say that these children disrupted our home life would be an understatement. They had a variety of mental health issues. I will add that I often became the butt of their anger. My imposed siblings would steal and/or destroy my toys, hurt me physically and embarrass me constantly.*

*“In addition to the chaos and disruption these children brought to our family life, they also robbed me of the time and attention that my parents should have been giving to me. But, even as a child, I was keenly aware that I had a far better life than my foster/adoptive siblings could ever have. I guess I had the ability to put myself in their shoes. Instead of resenting them I was able to empathize with them. And, in retrospect, I have been able to apply what I experienced as a child to enrich my life. Having a bird’s eye view of this twisted microcosm of the world during my young life gave me a deep awareness of human nature and the ability to relate to all people in a positive way—in a way that has helped me to continue to grow as a friend, co-worker, leader and, most importantly, as a parent.”*