

Through Sibling Eyes: Who Helps Me?

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Introduction & objective: There is significant literature related to the impact of schizophrenia on the individual and parents, but little that reflects the impact of the illness on the well sibling. This has become a critical issue however, as parents' age, and there is an expectation that the well sibling will take on more of the ongoing responsibility for the adult living with the illness. This research studied the impact of the illness on the well sibling in order to determine the education and social supports necessary to ensure ongoing support and involvement with their ill sibling.

Methods: A qualitative narrative study was conducted to explore the experience of younger siblings, who had lived with an older sibling diagnosed with schizophrenia. Four adult siblings reflected on critical points in their lives: first memories of life with the sibling, teenage years, and finally the present. Tapes were transcribed and participants then reflected on their own stories. A final interview allowed them to make recommendations regarding support needed by health care providers.

Results: Key themes were: 1. inherited (shared) social stigma; 2. ongoing fear and survivor guilt; 3. loss of traditional childhood roles and memories; 4. changes in social structures; 5. perceived significant burden of care; and, 6. lack of support by the health care system. As the unaffected sibling they were left out of the treatment process. All siblings report a significant impact on their own occupational development and life long lasting impact.

Conclusion: Living with a sibling with schizophrenia impacts the well sibling throughout key developmental points in their lives. Lack of involvement with the health care team prevents them from obtaining the information and skills required to effectively support their sibling later in life.

Implications for Practice: Siblings need early education and inclusion by all health professionals, including the occupational therapist in order to effectively maintain the required supportive relationship with their diagnosed sibling later in their adult lives. Professionals must make a conscious effort to ensure that this inclusion is reflected if treatment is truly client centered.