



# Psychoanalysis of Siblings' Influence on Individual's Development

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**Abstract.** Sibling relationships contribute to the healthy mental development of each individual. Its importance has been increasingly accentuated both in clinic practices and academic research during clinical practices and academic research over the past few years. This review intends to investigate siblings' influence on individual development through the lens of psychoanalysis and the vicissitude of sibling relationships in psychoanalytical theories and practice. Sibling relationships and sibling objects have as lasting an influence on the patients as their parents. Discerning these factors will be a boon not only to the positive progress of the therapy but also to the perfection of related theories. This review will contain the following three parts: 1) the shift from overly-emphasized parent-children relationships to the emerging sibling factors; 2) sibling relationships presented in psychoanalytical cases; 3) the influence of sibling relationships on psychoanalytical therapy and individual growth.

**Keywords:** Psychoanalysis · Siblings · Rivalry · Horizontal axis

## 1 Introduction

Many researchers complained that psychoanalysis does not put its focus on sibling relationships. It's not that classic psychoanalysis did not mention a word of siblings, but in most cases, the interaction between siblings is located in the context of parents-children relationships. The foundation of this trend was undoubtedly laid by Freud. The Oedipus complex theory gained widespread recognition, which observed that children compete with a parent for the other parent's love (positive and negative Oedipus complex). Siblings come on stage as intruders without changing the dynamics of libido (pleasure principle seeking the total satisfaction of happiness) and phenomenological behavior (excluding the competitors to grasp and cement parental affection). Yet Freud did not include siblings in his discussion. "Little Hans" was a paradigm of his understanding of sibling relationships. Freud believed that Little Hans' phobia of animals condensed his hatred and murderous wish toward his younger sister, but his frightened of the horse was mainly seen as hostility and fear toward his father. Sibling rivalry is considered to derive from the primary Oedipus complex. "When other children appear on the scene, the Oedipus complex is enlarged into a family complex" [1].

Later, researchers emphasized siblings' influence on children's growth. However, the first child is always a substitute for the parents. When parents cannot meet their children's needs due to death, divorce, illness, or other reasons, the elder would take up their place. E. M. Agger said, "If at any point along the dual track of maturation and development an important parent fails to supply the appropriate empathy, care, or limit-setting, the child may naturally instinctively turn to a sibling substitute" [2]. Anna Freud intended to prove this point in an article about war orphans, *An Experiment in Group Upbringing*. After the Second World War, rescuers found six children in a concentration camp whose parents died in the war. When they were rescued, the children formed an indestructible union. They greatly cared for each other, shared food and toys, and acted as a whole. Even after they were sent to Britain, all six children would remain upstairs in the children's school as long as one member refused to go down. But Anna and her colleagues also observed that conflicts mounted within the group with adults' intervention. As the children built a close alliance with the adults, their lateral union showed signs of breaking up [3].

Colonna and Newman [4] mentioned Group Psychology, in which Freud demonstrated how group members' negative emotions could transform into positive ones. Such transformation could not be achieved without the help of vertical relationships. Only when all the individuals in a community identified a shared leader could resolve their internecine conflicts and form a unity. Unsurprisingly, researchers and therapists often turn to parental influence when they encounter sibling problems. Marianne Kris & Samuel Ritvo: "Specific aspects of children's experience with each other are colored by both the conscious and unconscious wishes and fantasies of their parents" [5]. To a large degree, parents' persuasion, threat, consolation, punishment, and role assignment determine the siblings' identification and interaction. Sometimes, children would adopt their parents' attitude toward their siblings (For example, kids would imitate their mothers to care for their younger siblings).

In the 80–90s, many researchers started to study siblings' influence on children's growth. Peter B. Neubauer mentioned that preoedipal sibling rivalry could affect the oedipal object relationship. He provided a case in which the focus shifted from the parent-children relationship to the sibling relationship. The patient was a 27-year-old female who took pride in being her father's favourite. After she left home for university, she called back home regularly and came home from time to time, but she always went directly to her father. "She aimed to involve only her father in discussions about her future. She presented herself to him as someone with difficulties to force him to respond and solicit his assistance. She knew that by doing this, she eliminated her mother and was trying to disrupt her parent's relationship" [6]. This patient showed typical features of the Oedipus complex. However, through three years of analysis, the analyst realized that her attachment to her father "covered a deep longing for mother's acceptance." The patient had two younger sisters. After the birth of the first sister, her mother paid much less attention to her, which propelled the patient to turn to her father. The patient was too close to her father because of the positive Oedipus complex, jealousy toward her sisters, and disappointment in her mother. These also correspond to the masculine identification in the patient's mind. "She wishes to be masculine to win her mother, imagine herself in the male role," showing homosexual propensity. Penis envy reminded her of insufficiency, leading to disruptions in both her work and love. S. A. Sharpe and

A. D. Rosenblatt proposed that oedipal rivalry between siblings is more intense than the rivalry between children and parents for the following reasons: 1) In comparison to conventional parental oedipal rivalry, the taboo of sibling rivalry is less severe, so the hostility and aggression are less likely to be completely repressed, and the goal is more realistically attainable; 2) Giving up the oedipal desire to destroy a parent will keep the family structure intact, which can offer protection and a sense of security for the children, while sibling rivalry will not bring such benefits; 3) Failure in sibling rivalry has a more severe impact on children's narcissism [7].

Accordingly, the article mentioned that sibling incest is less likely to be forbidden than oedipal incest. Under the shadow of parent-children relationships, seduction and sexual exploration between siblings are relatively independent. In traditional psychoanalysis, sibling incest is often regarded as the pathogenesis of neurosis and "a less menacing derivative of the incestuous wishes and fantasies which involve the parents" [8]. Many current researchers believe that because sibling incest is less of a threat than the Oedipus complex, it can help "avoid the greater threat of incestuous fantasies incestuous parental gratifications" [9]. Resolving the preoedipal competition can be an adaptive strategy or a bridge, mitigating oedipal conflicts in the future and helping to direct children's libido from parents to peers.

In her book *The Importance of Siblings*, Prophecy Coles mentioned a case of sibling incest between an older brother and a younger sister. The emotional tie between them was exceptionally tight. Throughout the book, although failing to provide sufficient evidence, the author made her bold hypothesis that there are other positive effects that sibling relationships could have beyond the sexual drive. But Coles emphasized, "I do believe that to see the parent-child relationship as the sole seat of health and pathology is to omit the importance of the sibling/peer relationship" [10]. This opinion is now common sense. The Oedipus complex highlights the parent-children relationship. The School of Object-Relations and the School of Independents almost attributed early intrapsychic development solely to the dyadic interaction between mothers and babies. Now, more researchers and analysts have realized that this theory oversimplified the question and attached higher importance to the multiple objects in individuals' inner worlds.

In a family system, the relationships among family members are not a simple addition of "one-on-one" relationships, but they are more complicatedly intertwined, which brings difficulty in establishing an "independent structural" theory of siblings. Analysts also found that most patients were exposed to the dual influence of their parents and siblings. Juliet Mitchell argued that some space in the theoretical superstructure of psychoanalysis should be reserved for the horizontal axis, which "is to have interactive but relative autonomy" [11]. In Bion's works, he indicated an infant's general phantasy of having a twin for closeness and intimacy. Some children psychologists further speculated that such phantasy might prove some kind of preoccupation with sibling relationships existing in unconsciousness, like mother-baby relationships [12]. It could be expected that, as clinic materials accumulate, sibling relationships in psychoanalysis will be scrutinized and studied further.

## 2 Emotions Between Siblings

Classic psychoanalysis theories concerning sibling relationships pay more attention to sibling rivalry. From this perspective, sibling interactions are often seen as a negative, "unambivalent rivalry" [7]. Undoubtedly, until today, analysts still often recognize jealousy, hostility, aggression, murderous wishes, and the derivative guilt and fear in patients. There was a patient who could not face success. Whether it was a job promotion or an excellent romantic relationship, he would unconsciously screw it up and show vomiting symptoms. Psychoanalysis showed that the origin of his symptoms dates back to when he first saw his brother at four. He was eating snacks at that time. In the shock of seeing a newborn baby for the first time, he spouted the food onto his brother's face, and a dog came and licked the food crumbs away. A sense of guilt had haunted him since then, restricting his progress in his career and personal relationships [2].

Freud linked aggression to sexual or self-preservative drive in the early years. Children are hostile to their siblings because the siblings, as intruders, block children from fully satisfying their sexual desires. After Beyond the pleasure principle, aggression was associated with the death drive. Juliet Mitchell went further from this point of view. She believed the birth of a sibling is a similar traumatic event as hysteria, which makes people "feel catastrophically displaced and non-existent because another stand in his place" therefore, hatred "is a reaction to the need for survival-the urge to humiliate the other when one is in danger of being annihilated oneself" [13]. In essence, defense against death derive is a demonstration of narcissism. Hysterics cannot fall in love with someone; they just use others to fill up the blank left by their trauma. Like pervasive delusions of pregnancy (both males and females), "a hysteric can create many fantasies concerning other people around him. However, the prototypical knight to a white charger who is an imaginary impregnator is there solely to give attention to the hysterical subject who is asserting her omnipotence through producing babies essentially on her own; he is there neither as a subject in his own right nor as someone who can be an object of her desires". It is also out of narcissism that emotions toward siblings often swing between hostility and affinity. Meanwhile, Juliet Mitchell believed that school bullying, which is frequently reported, roots in the same trauma, so "bullied victims, madly, are imagined to be standing in the bully's place."

Many psychoanalytic therapists and researchers do not believe non-sexual, primary attachment, and intimacy can exist among siblings. They assert that positive emotions can only be transformed from negative through reaction formation. A group therapist provided a case to demonstrate reaction formation in group therapy. A group of young people about the same age all confronted challenges in living independently, establishing personal relationships, maintaining emotional stability, working, and studying. They were supposed to have many conflicts in group activities, yet "they frequently repeated how well they felt in the group, how well they fit together," which was affirmed by the 100% attendance. Under closer analysis, it was found that their unity and compatibility were but a false image. They disavowed comparisons and rivalry by creating an idealization of a perfect group. The analyst also found herself excluded during the whole process. All the patients subliminally avoid that an individual could get something someone else did not receive, that there was a figure whose possessions were coveted and, simultaneously, limited, unevenly distributed. Conversely, the group members converged on a

tacit agreement and “created an ideological, social cohesion that allowed them to bypass this problem instead of exploring it [14].

In *Rivalry, Envy, and Jealousy*, Peter B. Neubauer suggested that although sibling rivalry is generally seen as negative interaction, envy can promote healthy mental development (such as separation and individuation) among children as a non-traumatic emotion [15]. Moreover, conflicts caused by sibling rivalry are not unresolvable. Parents play an essential role. Suppression, denial, obsession with equal status, or adopting the last illusion of seeing children as the embodiment of purity and ignorance will only breed deeper potential conflicts. Primarily, parents should learn to “take a certain degree of jealousy and rivalry for granted” [4]. Observation indicates that children can detect their mother’s changes (in their appearance and withdrawal of attention) during the pregnancy. At this point, parents’ comfort can effectively reduce children’s anxiety and aggression. Suppose the parents fail to show enough care or scold the children to stem sibling collisions. In that case, they will push sibling conflicts toward unambivalent (Some believe dissatisfaction toward the parents can transform and add to children’s antagonism toward their siblings). Other factors, like the absence of parents, can also aggravate sibling rivalry. Jeanne Magagna observed infant brothers fighting each other under unsupervised conditions, and she pointed out that the presence of parents can contain children’s instinctive impulses and make them less aggressive. Like Juliet Mitchell, Jeanne thought children’s aggression was mainly a defense against pain. “To protect himself from feeling helpless, jealous, and in pain, he is turning to a potent, cruel self and thus, developing an identity as a ‘bad boy with hard cold self-encrusting his vulnerable self.’” Children project their pain to others or adopt misformed interaction in attacks because “any human response feels better than no human contact at all” [16].

A host of literature mentioned that parents’ sibling complex could be reactivated by the birth of a new family member. A male patient suffered from an unresolvable sense of “exclusion” after his son was born. He saw his son as his younger brother, who he was once jealous of. His son took away his wife’s love, as his brother took away his mother’s love, while the man himself was permanently excluded [17]. Sibling complex affects people’s attitudes toward their children, so it’ll help the children develop a healthy mental state and sibling relationships if the parent’s sibling complex is adequately overcome. E. M. Agger offered another example. Female A’s mother left A to her grandparents early and kept A’s two younger brothers by her side. A’s mother had gone through fierce sibling rivalry during her childhood and “never forgiven her parents for the birth of her young brother, who usurped her position.” She saw her daughter, A, as a rival.

Meanwhile, A’s grandparents saw A as a substitute for their daughter, who did not live up to their expectations. To win her grandparents’ love, A appeared to surpass her mother in every aspect. She seemed to be confident and competitive, yet profound in her heart, A harbored great fear of competition [2].

Researchers also call for more emphasis on positive sibling emotions as the focus shifted from parent-children relationships to sibling relationships. Researchers like Peter. Neubauer, Henri Parens, Michae. Kahn, Margaret Rustin, etc., all emphasized sibling attachment. Siblings support each other and share their happiness to fight against the loneliness and setbacks they confront in families and society. Prophecy Coles insisted on her idea of “brotherly love” in *The Importance of Siblings* and tracked back to two

concepts Freud and Klein put out in the earlier years, "immature erotism" and "secret complicity." She took the view that only in a weakened family environment would sibling incest occur and lead to "unnatural estrangement" among the siblings. "If the connections between children of the same family are running smoothly, and sadistic wishes do not distort the immature erotic attachments, siblings give back to each other a particular reflection that no other relationship can supply" [18]. Martin Leichtman thought that siblings experience "contributes to the formation of attachments and building up of schemata in which siblings are included within the symbiotic orbit" [19]. He supported his argument with a case in which sibling attachment appeased the separation reactions during the mother's absence, except for Vivona. J. M., a few researchers still have discriminated against the influence of the substitutes and the original parents [20].

### 3 Influence Factor

#### 3.1 Sibling Relationships in Clinics

Early psychoanalysis overlooked siblings' position in the complete landscape of an individual's inner world. Current researchers looked back to the establishment of psychoanalytic theories and suggested different reasons: (1) Freud ignored siblings due to countertransference since he experienced fierce sibling rivalry himself. (2) Freud tried to avoid male hysteria and was influenced by the social ideology of patriarchy in his era (3) As a disruptive theoretical concept, the Oedipus complex satisfied Freud's narcissism and thus took over the space in his theory that should have been dedicated to other factors. Nowadays, researchers believe sibling relationships have a more lasting influence than the Oedipus complex.

As early as 1978, Ruth M. Lesser pointed out that failing to discriminate sibling relationships and sibling transference would negatively affect the therapy, even making the patients quit. A female patient suspected that she had a tumor. Her father died of cancer, so the patient's hypochondria could quickly be diagnosed as hysterical identification. But in fact, the patient had a twin brother, yet "the twin pregnancy was misdiagnosed as a single pregnancy, and that the other was mistaken for a uterine tumor." The patient was the first child and thought her brother was a redundant tumor. If the analyst only treated this as a case of the Oedipus complex and disregarded the sibling rivalry behind it, the therapy would not make any significant progress.

Besides common theoretical bias, some patients would unconsciously conceal the existence of a sibling. For example, they may not be able to count the exact number of their siblings [4], which brings trouble to the analyst. (Sibling complex can also be recognized by the patient's relationship with other patients of the therapist. Lech Kalita and Anna Faber called these "therapeutic siblings" [21]. A patient might imagine himself as a favored sibling and fantasize that the therapist appropriate other patients' sessions to him, or they might imagine themselves as a less-favored sibling, envying and deliberately ignoring other patients of the therapist.) Ruth M. Lesser also observed that out of superiority, the therapists might customarily place themselves in the place of authority (the parents) and automatically exclude the possibility of sibling transference [22]. Daniel Coleman put forward a transformation of methodology related to the social background. Traditional psychoanalysis, he claimed, is like a modernist, "positing a more

insightful analyst who opens the patient's understanding through wise interpretations." At the same time, under the guidance of postmodern relativism and multiculturalism, therapists and clients should "coexist with one another and engage in a mutual dialogue" [23]. In the two-way interaction, therapists should change their role from authorized parents to siblings.

### 3.2 Sibling Relationships for Individuals

Unresolved sibling problems would affect individuals' object relationships, such as marital partner choice and interactions with people of the same age at work and in daily life. Many cases demonstrated that a person's prototype of libidinal cathexis is more likely their sibling than parents. Many patients were helplessly drawn to people bearing the same features as their siblings and found it hard to extricate themselves from the relationship even when it brought more pain than gain. Similarly, individuals would adopt the same reactions they used with their siblings in the early years to defend or adapt to resembling emotions and impulses. For instance, in group therapy, a patient lied that his condition had improved and took the initiative to leave when a new member joined. This patient refused to be analyzed; "he wanted to accept his problems only as a kind of disease, a flaw, or some inherited inclination." During his childhood, he denied and shunned sibling rivalry in the same way [14]. Another patient suddenly fell silent during a session, reflecting her jealousy toward her sister. However, her aggression found no way of expression. It was suppressed into silence because she idealized her sister and subdued her initiative to bask in her sister's halo [2]. This type of client is usually accompanied by a strong sense of inferiority and insecurity and an intense fear of competition, so much so that they could not face success. In their subconscious, they always reenact the role of losers or victims.

Unresolved sibling problems also affect the separation-individuation process, hindering individuals from gaining independence and a unique identity. Siblings can help children to achieve separation from their parents (especially mothers), but high with siblings can also lead to excessive psychological dependence. Martin Leichtman shared a case of a little girl who imitated her brother in every possible way, including his behaviors, hobbies, habits, and even gender. The little girl demonstrated a masculine quality. She played superhero games, acted as a male leader in a TV show, and insisted on standing in front of the toilet to piss even though she acknowledged anatomical differences between males and females. When something reminded her of the differences between her and her brother, this girl would throw a tantrum or stubbornly deny it. After her brother left home for school, the patient immediately showed a host of regressive behaviors, such as bed-wetting, night terror, and sucking her thumb [19].

Sometimes, the patients fantasize they are in a symbiotic state with their siblings. In one case, a girl always claimed that only her sister could truly understand her. For this girl, it's challenging to part with her sister. Yet sticking together, the girl also suffered a lot. Many patients have similar experiences. For example, a patient might be marginalized when she tries to force herself into her sibling's social circle, but the patient can benefit even with pain.

Sometimes, a sibling is worshipped and idealized to such an extent that the patient loses their reality testing. Such patients would demand themselves to live up to the level

of perfection while overlooking their unique talents, characters, and reasonable requests. In a Christian case, the male patient's older brother was seen by his family as a baby Jesus since he died as a baby. The patient identified that and strived to make himself a saint, even at the cost of his personal needs. In a session, the patient worried that he would "never be able to have a sexual relationship and to marry," yet he enjoyed it as martyrdom [24]. In many cases of sibling rivalry, aggression appeared amid idealization and admiration, leaving the patients struggling with ambivalent feelings.

Many analysts noticed polarization among siblings, especially when they are twins or have a small age gap. Some patients usually describe themselves as opposed to those used for their siblings, like good and evil, healthy and weak, pretty and ugly, independent and dependent, mature and naïve, neat and messy, etc. Other than a disparity in nature and the differences between their roles assigned by the parents, Jeanne Magagna thought that projection plays an important role. She had a client called Hanna, who was 17 years old and had a twin sister Sarah. Hanna thought herself stupid, selfish, trouble-making, and lonely. By contrast, Sarah was intelligent, kind, and likable. Jeanne Magagna explained, "It is probably that Hanna introjected Sarah, but when Hanna consciously or unconsciously jealously attacked and competed with Sarah, Sarah became a damaged and weakened internalized sibling. Hanna seemed to have identified with the weakened, damaged part of the twinship [25]." Jeanine M. Vivona called this process "differentiation" and suggested that siblings try to use such strategy to manage their rivalry [26]. One of her patients had "an array of delinquent actions, some of which brought police officers to her parent's home." She analyzed that the patient thought her transgression defended her unique position, and "were both a refusal to participate in the competition with her sibling and an effort to win it by engaging in behaviors beyond the reach and imagination of her siblings." However, behind differentiation lies deep identification. Jeanine M. Vivona wrote, "Identification and a sense of commonality emerged as the motivated differentiations were relinquished."

## 4 Conclusion

In summary, siblings play a pivotal role in children's identity formation and independence. "Sibling" discussed in this review is a general concept. In real cases, the sibling relationships can be manifested as more nuanced and sophisticated variations depending on different genders, age gaps or family environment. For instance, Anna Freud and other researchers thought that if the siblings are of similar age and their mental development is at the same stage, sexual exploration among siblings is relatively harmless. However, one should be more cautious when the age gap is large, and the siblings' psychological development cannot synchronize. Generally, the more significant the age gap, the more independent, the elder siblings will be, so they can adapt to their younger siblings more efficiently and keep their hostility under control. The latter will face fewer conflicts during individual separation. Observation of children proved that the elder siblings could help the younger adapt to society and be socialized. On the flip side, a glaring age gap also makes the more youthful, more vulnerable victims of bullying. Due to limited space, more concrete situations like twins, disabled siblings, sibling death, or siblings in step-families cannot be covered. But it's for sure that detecting sibling relationships in sessions

and observation not only corrects the theoretical bias in psychoanalysis and improves the therapy outcomes but also contributes to the development of psychoanalytical theories and exploration of the intricacy and diversity of the human mind.

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