



# Secure Base

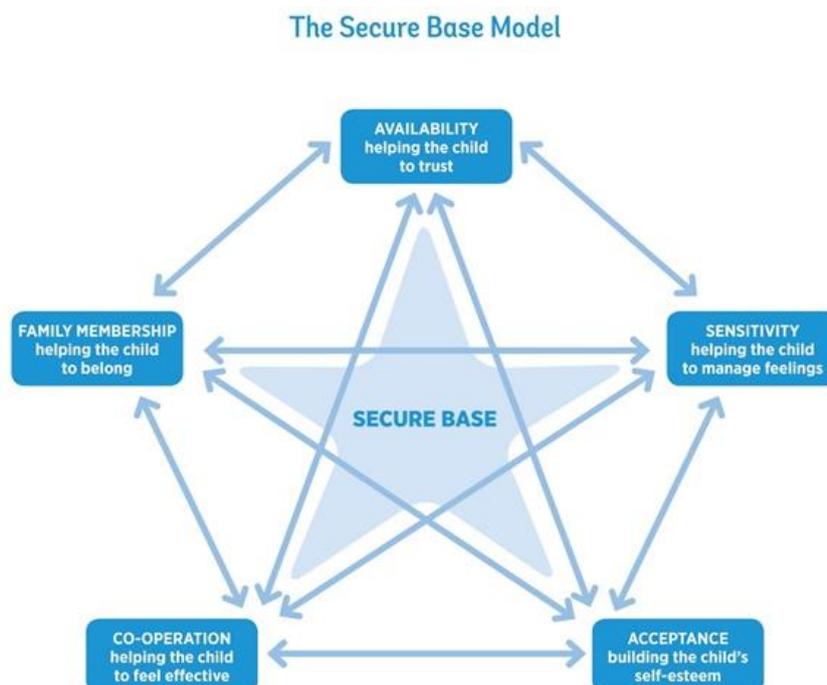
## The assessment of prospective foster carers and adopters

This section provides guidance on the use of the Secure Base Model when assessing prospective foster carers and adopters.

The model provides a framework for considering the skills and capacities associated with offering therapeutic care as part of family life in foster care and adoption.

The five dimensions of the model may each be discussed with prospective foster carers and adopters. Consideration will need to be given to their skills and capacities within each dimension. There are particular capacities required during the early stages of a placement or for short term placements and additional issues to be considered for long term fostering or adoption. Evidence of caregiving capacities can be sought in the previous and current life experiences of the applicants. Areas for further training and or additional support can be highlighted. Occasionally, if there is very little evidence of the capacity to provide a secure base, this might contribute to the evidence to support a negative recommendation.

It may be helpful to use a diagram ([The Secure Base Model](#)) and brief description of the Secure Base Model to assist applicants in their understanding of the skills and capacities that they will need to evidence.



## Availability

We know that the best environment for children's healthy emotional development is one in which they can take for granted that nurture, comfort and protection are readily available from caregivers when needed. This provides a secure base for exploration and allows children to begin to trust in themselves and others.

To provide a secure base, caregivers must be both physically and emotionally available. They must respond promptly, both when children and young people need closeness and protection and also when they are ready to move away and explore. They must have the capacity to reflect on what the child might be expecting from adults and then think flexibly about ways in which they can demonstrate to the child that they are reliable and trustworthy.

When assessing prospective caregivers it is important to help them to consider their capacity for physical and emotional availability as individuals, as a couple and as a family. This assessment must take into account the capacity to adapt to the different needs of individual children and the likelihood that children in care will find it difficult to trust.

## Issues for exploration in assessment

- The applicants' own experience of receiving/providing secure base availability, in childhood and adulthood, and the extent to which traumatic events and issues of loss and separation have been successfully resolved in the mind of the individual.
- The extent to which applicants can demonstrate capacities for openness, availability and trust within their existing close relationships.

### *Early stages/short term placements*

- The amount of physical time /emotional availability that the applicants have freely available to focus on the child's needs – this includes time to think and plan, time to respond to the child freely at key moments of the nurturing routine – mealtimes, bedtimes, before and after school etc. But also emotional space/energy to be an actively available and responsive caregiver.
- The balance of this against time/emotional commitments to other family members, work, partnerships, interests etc.
- Financial implications of this degree of availability and implications for financial support.

### *Additional issues for long-term fostering and adoption*

- The potential time/emotional needs of other family members, including the carer's own parents, 5, 10, 15 years in the future.
- The carer's own career and life hopes and plans.
- The understanding of the long term impact of early harm, the lengthy timescales involved in recovery and the likelihood of setbacks at crucial developmental stages (e.g. move to High School, exams, leaving school, moving towards independence etc).

## Sensitivity

The capacity to tune in to the child, to be interested in what is in the child's mind and to *see the world from the child's point of view* is key to helping children to manage difficult feelings and behaviour. Caregivers must try to understand and make sense of what the child is thinking and feeling. They need to be able to form flexible theories about this, so that they can respond sensitively and use a variety of techniques to help the child to 'make sense of himself'. Caregivers must also support the child in experiencing and expressing the full range of emotions, but help him to manage and regulate them so they do not become overwhelming.

Additionally, caring for a troubled child can elicit a range of strong and often mixed feelings in the caregiver and it is important that these are acknowledged and discussed. Strong feelings in the caregiver may link to past or current relationships, but if feelings are overwhelming they can disable the caregiver just as they may disable the child.

## Issues for exploration in assessment

- The capacity to stand in the shoes of others/to think about what others might be thinking and feeling and be interested in the meanings behind behaviour.
- The capacity to think about and discuss a range of feelings.
- The capacity to manage own feelings and behaviours - and to see the connections.
- The capacity of all family members to show feelings appropriately and manage them in the best interests of the group.

### *Early stages/short term placements*

- The capacity to think about and reflect on the range and mixture of feelings that a child might experience in the early stages of a placement. These might include loss, dislocation, shock, fear, relief, excitement, disappointment, pleasure and so on.
- The capacity to think about and reflect on the reasons for certain feelings emerging and the links between feelings and behaviour in the child.

### *Additional issues for long-term fostering and adoption*

- The capacity to connect with own feelings and behaviour at different life stages, especially adolescence.
- The capacity to tune in/stand in the shoes of young people who have experienced separations, loss and maltreatment in their early lives and to accept that the implications of difficult early experiences may be lifelong.

## Acceptance

In order to restore or develop their self-esteem, children need caregivers who can accept them for who they are, for both their *strengths and their difficulties* and regardless of their differences or personalities. This level of acceptance will enable caregivers to identify and support their child's talents and interests, helping the child to fulfil potential and feel good about himself.

If caregivers are to build self-esteem in this way, they must first be able to accept themselves, to feel comfortable with the people they are and to reflect this model of self-acceptance back to the child.

Families who have an ethos that 'nobody is good at everything but everybody is good at something' are well placed to identify and promote even the most deeply buried or unexpected abilities of their fostered or adopted children. At the same time, they can model that it is 'OK' not to win/ or be successful at everything.

## Issues for exploration in assessment

- Indicators of positive self-esteem (acknowledgment of strengths and difficulties) in the applicants.
- The capacity to reflect on times of low self-esteem, recall feelings and behaviour, what helped or hindered recovery.
- Acceptance, enjoyment and capacity to embrace differences in culture, class, religion, ethnicity.
- The capacity to identify and the commitment to support talents and interests.

### *Early stages/short term placements*

- The capacity to understand that low self-esteem might be 'masked' by boasting, unwillingness to take part in things, grandiosity etc.
- The capacity to actively work on demonstrating acceptance/building self esteem

### *Additional issues for long-term fostering and adoption*

- Capacity to convey messages of acceptance that are comfortable and acceptable to children of different ages and with different needs.
- The capacity to connect with the issues that affect self-esteem in teenagers – identity, genetics, future pathways, peer pressure etc.
- The capacity to be creative in providing opportunities for self-esteem building that are comfortable and acceptable to a range of different young people.
- The capacity to sustain own self-esteem when under stress, and sustain/adapt own interests and activities over time.

## Co-operation

In order to help children to feel effective and competent, caregivers must think in terms of working together and forming a co-operative alliance. Children and young people may present as too powerful and controlling or they may feel powerless, and unable to assert themselves.

In all cases, caregiving will involve setting firm boundaries but being prepared to negotiate within them and actively creating situations in which children and young people can make positive choices and decisions and be appropriately assertive.

Caregivers, therefore, must be able to enjoy co-operation and have at their disposal a range of approaches to achieve compromise. This will lead them to structure the child's environment so that there are plenty of safe opportunities for choice and autonomy.

To achieve a co-operative approach, caregiver will need a good understanding of themselves and the extent to which they need to be in control or find it hard to be in control. The capacity for self-reflection is, therefore, also important in this area.

## Issues for exploration in assessment

- The applicant's own early experiences of feeling effective and competent (and ability to provide convincing examples).
- The applicant's own experience of how control and co-operation were negotiated in their family of origin.
- Evidence of co-operative relationships or working towards compromise in the applicant's current life – within partnerships, wider family, or community.
- The applicant's capacity to be collaborative and co-operative within the assessment process itself.

### *Early stages/short term placements*

- The capacity to recognise the child's need to feel effective and competent – and to work towards promoting this, even in very small ways.

### *Additional issues for long-term fostering and adoption*

- The capacity to accept that a young person might need to experience age appropriate independence while at the same time, having their younger child's needs met.
- The capacity to provide additional support to help young people to be appropriately assertive in relationships and situations outside the home.
- The capacity to accept developing autonomy and that young people may make inadvisable choices.
- At times of conflict, the capacity to provide clear and honest feedback to the young person, both about the consequences of their actions and the position of the carers.
- The capacity to stay with a young person who appears rejecting and hostile and to hold in mind the longer term significance of themselves as a secure base for that young person in the future. Providing messages of hope, concern and interest at these times requires carers with particular resilience and 'stickability'.
- The capacity to think about the potential impact on all family members if issues of co-operation become difficult later on.

# Family membership

A sense of family membership begins from birth and is important for healthy development. Adopted children and those in long-term foster care are members of more than one family and will need to achieve a dual family membership which both allows them to benefit from the practical and emotional support of their adoptive or foster family but also allows a comfortable and realistic sense of both the strengths and the limitations of their birth family network.

In all cases, caregiving families must have the capacity both to absorb new members, often children whose backgrounds and experiences are very different from their own and to be thoughtful, reflective and open towards the child and the birth family.

## Issues for exploration in assessment

- The capacity of the applicants' family to admit new members, but also to be flexible enough to allow those members to pass to and fro (physically and emotionally) across the family boundary as needed. Examples may be found of including non-family or extended family members in the past.
- The extent to which the family system communicates openly with other systems – schools, community groups, special interest groups, friends and neighbours.
- The attitudes of the family to the world outside the family boundary – is it regarded as safe and trustworthy or threatening and hostile?
- Tolerance of difference in beliefs, values, expectations. The extent to which family membership is dependent on shared values.

### *Early stages/short term placements*

- The readiness of all family members to shift their positions in order to accommodate children coming into the family.
- The capacity to accept that the child may not be ready or able to commit themselves emotionally to a new family when this family is unknown to them and their birth family membership is all they know.
- The capacity to offer sensitive messages of foster family membership while at the same time, understanding and respecting the child's sense of birth family membership.

### *Additional issues for long-term fostering and adoption*

- The capacity to continue to offer unconditional foster / adoptive family membership to children and young people who may or may not have similar interests, personalities and abilities.
- The capacity to accept that the question 'which family do I really belong to?' can emerge and re-emerge over time and to accept that many fostered and adopted young people have intense and complex feelings of responsibility, anger, idealism, longing or guilt regarding their birth families.
- The capacity to support a young person to actively explore birth family relationships, as a part of the process of making sense of the past.
- The capacity to stay connected and offer messages of interest and support, even if relationships are hostile or at risk of breaking down.