

Therapeutic care for foster families
with unaccompanied minors

Practical Guide for foster care workers A 10-point programme



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A 10-point programme

for the EU-Project
*Therapeutic foster care for
unaccompanied minors and
their foster families (FORM)*

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U N I K A S S E L
V E R S I T ' A ' T



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This Practical Guide for foster care workers is based on the Conceptual Model of the EU-Project “Therapeutic foster care for unaccompanied minors and their foster families (FORM)”. The conceptual model provides the theoretical framework for a psychodynamic and mentalized-based, trauma-informed and culture-sensitive approach on treatment foster care for unaccompanied children and adolescents with a background of exile. Both documents have been developed well within the timeline of the project (February 2022 – January 2025), in collaboration with the colleagues from the project partners: Salesiani per il Sociale (Centro Nazionale Opere Salesiane) in Rome, ENSA (the European Network for Social Authorities in the Region of the Veneto; Italy), Foster care East Flanders in Ghent (Belgium), Hope for Children (from the Policy Center, Nicosia; Cyprus), Odisee University College (Brussels) and University of Kassel (Germany).

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Patrick Meurs & Corinna Poholski

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Introducing the Practical Guide

This practical guide is a practical addition to the *Conceptual Model* of the project *Therapeutic care for foster families with unaccompanied minors and their foster families* (FORM) and is intended to be used as an orientation point for working with foster families with unaccompanied minor refugees in the context of treatment or therapeutic foster care. In the context of our European FORM-project, our approach is to guide foster care workers to empower foster families caring for unaccompanied children and youngsters with a refugee background. In view of the long-term consequences of unmourned loss, the lingering effects of a traumatic breakdown of humanity, ultimately complicated by elements such as survivor's guilt, identity confusion and other difficulties not seldom experienced by unaccompanied minors, our practical guide will focus on the psychodynamics within foster families as well as on the possibilities of guidance for foster care workers working with foster families.

In the introduction to this practical guide, we will:

- firstly, define the target group of the practical guide (the foster care workers);
- secondly, mention obligatory preconditions that need to be considered at institutional level in order to create a working environment that recognises the specific challenges of foster care work in the context of exile and trauma;
- thirdly, show how to build a network of colleagues, organisations and services around the actual fostering work that is done within a specific foster family;
- fourthly, give an overview of how the practical guide can be used in the actual work of fostering families with unaccompanied minors.

After these introductory premises have been clarified, the 10-point programme will be divided into:

- a) a brief summary of the theoretical background (including psychodynamic concepts) based on the conceptual model,
- b) an illustration of the theoretical knowledge with case examples from practice, and,
- c) a collection of practice-oriented questions for the different but interrelated levels of fostering interventions in which the foster care worker guides the parents that are seeking for a mediation or an intervention in their relationship with their children (a mediation or intervention that reconnects and leads to a continuation of the foster placement). Specific practical elements such as knowledge-based tools, inspirational lists, self-reflection exercises and case studies will be linked and made available at the end of this guide.

The target group

The ten core elements presented in this document (as well as in the conceptual model – the larger document with its extended theoretical background) can be seen as practical modules that address the perspective of foster care workers who are part of a support-network around families and who provide foster care to vulnerable children and young people with a background of exile-related loss and trauma. We need to emphasise the foster care worker's position in a network of relationships that are to some extent intertwined: As part of the fostering team, the foster care worker is part of his or her organisation and the support system around the foster families with whom he or she has a working relationship. As such, the foster carer is part of the caring environment, in direct contact with foster parents and other care givers, and in (usually indirect) relationship with the fostered children and young people for whom guidance is sought. The foster care worker is in a linking position – in a position of understanding the needs of the children and youngsters and their foster parents. In this linking position, the foster care worker's function can be described as the so-called 'third function' or 'third position' (Gerspach 2007, p. 97). By participating in the foster care service and by reflecting on the psychodynamics, for example with the supervision group, the foster care worker brings another alternative perspective into the actual encounter of the family intervention.

In this way, the necessary process of triangulation (Mertens 2022, p. 697) can open a space – the intermediate area (Winnicott 1997 [1971], p. 21) – where thinking and reflecting becomes possible and help the client to open up to alternative perspectives and to mentalise. At the same time, they provide guidance to foster families by referring to their organisational network and teams. The following practical guide provided by the FORM-project recognises the key role of foster care workers and has been developed primarily to support them in supporting foster families and foster children. As part of the caring and containing environment around the foster families, foster care workers engage in understanding ongoing dynamics within families or in relation to other care givers of the foster child (e.g. teachers). In doing so, they help foster parents to navigate challenging situations and increase their level of reflective functioning in moments of conflict and pressure caused by traumatic experiences. As a side effect, foster care workers that are involved within a foster family, will also experience the impact of traumatic experiences on human relationships in general and on attachment relationships within the foster family in particular, for example in situations of ambivalent behaviour, mistrust or anger. These complex dynamics within foster families can lead to moments of incomprehension and of being overwhelmed. Working in an environment – dominated by specific ambivalences about foster care and deeply influenced by the realities

of foster children (i.e. experiences of loss and trauma) requires from foster care workers to occasionally slow down and reflect on their own role and attitudes within the relationship dynamics between foster care workers, foster parents and foster child.

Preconditions

Although the foster care workers involved in supporting foster families with unaccompanied minors are in a position between the families and their organisation, this practical guide focuses on the foster care workers and their professional role. In this position, they are providing structure, support (in difficult situations) and a space of recognition for the parents and children, so that by the very fact of the mere presence of the foster care worker they experience recognition about the external reality and their internal problems. In addition to their role and function, it is also the professional attitude that is crucial for a supportive form of care: The professional attitude sets the frame within which the caring relationship for the foster family can develop. The foster care worker approaches the relationship with empathy. It is a matter of oscillating between closeness and distance (Rössel-Čunović 2018, p. 56 seqq.), of getting involved in the dynamics and allowing oneself to be useful for the client's problems, but also of finding the appropriate distance again. Only with a certain distance it is possible to reflect on the dynamics, to approach the (unconscious) issues of the families and to help the parents and children, through mentalization, to give meaning to things for which there are no words. The aim is to understand the dynamics of the foster family and the children's culture of origin. This is important when working with refugee children because culture plays a role from the first moment of the encounter. It is not always explicit and visible, but it is always present. The concept of culture is about what is the reality of a child's or family's life. It is not just about what is different or foreign, but about the particular things that a person brings with them. In a sense, everything that relates to a child's background is his or her uniqueness, which is perceived through what is familiar to him or her.

Working within the context of foster care requires individual flexibility as well as personal resilience from the care workers and is characterised by high expectations about delivering *good* care. Since the foster care workers are helping foster families to maintain a mentalising stance as well as a holding parental attitude in the face of trauma-driven behavioural and emotional symptoms of the foster child, they indispensably need an institutionalised mentalising and holding environment for themselves as professionals. Consequently, the working environment of the foster care workers needs to be equipped with scheduled time for study work, knowledge transfer, for reflection and for self-care (as part of the worker's weekly working hours). Therefore, regular *team-meetings, intervision and supervision should be*

institutionalised by authorities of the (foster) care organizations. Those settings of `care for the foster care workers' provide the opportunity for exchanging on cases, for processing difficult situations, for focusing on mentalization (through finding a narrative around complex guidance situations; Fonagy et al. 2004; see point 4, p. 26); these moments of `care for foster care workers' serve as *safe spaces for professionals* and as safe places to acknowledge and share emotions (e.g. the feeling powerless in a situation or overwhelmed by not knowing how to help). Implementing those preventive spaces and moments for professional exchange with colleagues of the same or even of a different institution will lead to the benefit that foster care workers learn to consider this as an essential part of their working schedule and of their professional attitude. By these settings they are being helped to feel contained and self-regulated within their work of intense and complex cases in foster care. It also helps the care workers to stay reachable on an emotional level within the professional relation with the foster parents and children. In other words: it helps foster care workers to *remain more in the here-and-now of the affective relational dynamics* between themselves and the foster families.

Setting up a network

Ideally, foster care organisations provide a variety of regular settings and opportunities for professional training, team meetings, intervision and supervision for their foster care staff. Foster care workers can benefit from these opportunities in terms of professionalism and personal well-being in their profession; these opportunities help them navigate this complex professional field. Not only will the foster care teams and each individual worker benefit from the 'pause' that these settings can provide; these moments of team-based reflection will consequently frame the dynamics of the encounters and relationships within foster care work. These reflective settings are an indispensable part of the work, to be understood as a containing frame around the actual challenges in the field (Barthel-Rösing & Haubl 2017). The foster care workers are in a linking position, a mediating position in between: between the foster care institution and the foster families, and between the foster parents and their foster children and youngsters. Furthermore, their work can be described as pre-therapeutic care work in between the needs of the children and youngsters and a trauma-oriented therapeutic approach (Meurs et al. 2022, p. 50).

The position of the foster care worker

In the conceptual model of the FORM-project we have placed the foster care worker at the centre of this form of treatment foster care. The role of the foster care worker is to mediate in the foster families, to keep in touch, to re-connect and to provide outreach and presence when needed (as this makes continuity of fostering more likely and the breakdown of foster placement less likely). It is not intended that the foster care worker will take over the therapeutic role of the specialist psychotherapist who may have been included into the foster care team in earlier models of treatment foster care. In FORM, the foster care worker becomes more familiar with the therapeutic principles involved in this model of therapeutic foster care (hence the extended conceptual model). This practical guide reflects on how the foster care worker can integrate these principles of the conceptual model into her/his attitude or in her/his actions from the mediating and coordinating position. In concrete terms, this means that the foster care worker becomes co-specialised or well-informed in trauma-sensitive, culturally sensitive, adolescent-specific and (kinship-)family-specific dynamics, without feeling or being obliged to take on the role of a therapist. The foster care worker remains the mediator in families and the one who coordinates the network of services and professionals around a family. Compared to earlier models of therapeutic foster care, in the FORM-project the foster care worker receives an enhanced theoretical and methodological background and is trained and supported by peer review (interview) and supervision. If there is a real need for an additional specialist in psychotherapy or family therapy, this can still be included in the care-plan for a particular family, as in the earlier treatment fostering models. Beyond this, the foster care worker continues to provide a link and bridge between the foster family, the foster services and the many professionals that can be involved in foster families.

The knowledge and capacities gained by the foster carer in this FORM-model (for example, about exile-related trauma) may and should not lead the foster care worker to work on the trauma. However, the foster care worker can and will ensure from a more informed and trained position that the foster family, who is facing complex challenges and sometimes gets into trouble, feels framed, contained, held, understood and re-connected. Trauma work can be done by other additional specialized psychotherapists. However, culturally sensitive work can be done by the foster care workers if they show that they understand that the questions and struggles of the foster family have to do with cultural change, exile-related wounds, loyalty and longing for connection with the biological parents, or with other cultural significances (which the worker does not need to know but can be open to): an attitude of cultural humility and openness for otherness.

The following 10-point programme will – hopefully – help foster care workers to navigate confidently through the complexities of fostering processes. Within these processes they are – sometimes more, sometimes less – confronted with issues and dynamics that are overwhelming, confusing or overshadowed by feelings of hopelessness in the foster family. These feelings can also be transferred to the foster care worker and create a sense of helplessness: the feeling that as a foster care worker you are at a loss as to what to do. Supporting foster care workers will hopefully strengthen their professional attitude. Before we look at the content of this 10-point programme for foster care workers, it is important to exemplify how the different points of this programme can be used.

Introducing the 10-point programme

This practical guide can be perceived as a common base to which any foster care partner organisation and foster care worker can refer for a general overview of the psychodynamics of this context of work, as well as in moments of incomprehension or when she/her need guidance and inspiration.

This practical guide for foster care workers with its 10-point programme can help to maintain a guiding attitude in intervention processes, to approach new perspectives and thus to find alternative ways of intervening in complex foster care situations – whether the foster care worker's work is acting in the context of direct interventions (e.g. regular family visits, parental counselling) or of indirect intervention (where the foster care worker is a link between different helpers). It is about nurturing professional resources through networking and knowledge transfer within (self-)reflective spaces. Besides the different but intertwined levels of foster care the addressees of the conceptual model and the practical guide might be faced with, they also might experience the complexity, but also the dynamics of the family context and psychodynamics of youngsters that were wounded during the flight may contribute to the complexity that foster care workers have to deal with in their daily work. Acknowledging this complexity, the practical guide can help to unfold the different and yet interrelated aspects that are mentioned in the 10-point programme.

Before presenting these ten points, we will explain in detail how to use this programme, which is divided into two main parts:

1) The 10-point programme

... delivers (with each point):

- a summary of the knowledge-based theory of the conceptual model, including definitions of basic (psychodynamic) concepts (presented in orange boxes);
- a case example that may give some illustration of what is discussed regarding background knowledge, including a summary of the aspects of the professional attitude;
- guiding or reflective questions and examples, that may help to approach on the process of understanding

... approaches on four (intertwined) levels:

- *Acknowledging the context:* Point 1 can be understood as a starting point to the work with foster families, to acknowledge the background of the children and the foster families as well as the specificities of complex trauma and its psychodynamics within foster families. It is about concepts and models, that refer to the actual encounter. Therefore, you will find reflective questions (that address the three levels of the foster care worker, the foster parents and the children and youngsters).
- *Approaching on supporting capacities:* Point 2 – 5 are all about approaching on self- and affect regulation (2), helping to understand the dynamics of (new) attachment relations within the foster families (3), about finding a mentalising state of mind and self-reflection (4), and on facing the importance of symbolising and finding a narrative (5). Also, here you will find guiding questions that address the three levels.
- *(Leaning into) the understanding process:* Point 6 – 9 concretizes the psychodynamics within foster families and the intervention process and help to maintain on a specific stance, that may develop from the supportive approach (points 2 – 5). Here we will focus on delivering reflective questions that help to understand and work with ongoing dynamics and the underlying needs of the foster parents and their children.
- *Network approach:* Point 10 highlights the *work within a network as a basic element*, where a reflective stance and the acknowledgment of (difficult) emotions will continue to build capacities for the work in this specific field. This final point provides a basis which intends to help the foster care workers to navigate through challenging moments and the work with each individual case (regarding point 1 – 9).

2) A practical part...

... where you will find:

- so called *framing elements* that highlight obligatory aspects of the work, explain them more in detail and help to give orientation regarding the aspect of cultural sensitivity, the professional attitude of foster care workers, a detailed overview of varying settings in which they can be used and on how to make use of them with regards to the work of foster care;
- *practical elements* that deepen necessary capacities in an “how-to”-format regarding regulation, (new) attachment, mentalizing and symbolizing, as well as a summary of guiding questions that may be helpful in certain situations in intervention processes;
- a collection of *practical tools* that can be used within the actual work and can help the foster care workers to overcome, within their work with foster parents, moments of hopelessness, powerlessness or of being overwhelmed by some behaviour of the foster children.

The guiding and reflective questions

In each point of the practical guide, you will find a set of reflective questions that are intended to guide foster care workers and can be used in particular to reflect on fostering work with an ongoing case intervention. Before presenting them as an inspirational element, we need to frame these questions and the intention to exemplify several lists of questions in the following ten points of the practical guide, as they need to be considered with great care and sensitivity. It is therefore important to note that these questions should not be perceived as a catalogue to be used in conversations with foster parents or fostered children. They are neither complete nor applicable to every individual case or dynamic. Moreover, raising them in direct conversation could be perceived as intrusive and lead to insecurity or to topics for which there are no words (because the psyche's protective mechanism suppresses memories that are too painful). It is important not to underestimate the challenges foster care workers would face in facilitating emotional conversations with foster carers or children.

The guiding and reflective questions are mainly intended as a guide for foster care workers to reflect on their interventions with foster families and may help to sharpen perceptions in the later process of discussing a case in a professionally guided reflective space (such as an intervention). Therefore, the use of the questions and the reflection work should be carried out in a team or in tandem, with the professional support of a supervisor. The questions can offer

a new orientation for approaching the process of understanding the psychodynamics of foster care cases, for gaining new perspectives and possibilities for further support, and for enabling alternative relationship experiences within the family and between the family and the foster care service. The basis is always the question: *How can a supportive and reliable relationship develop?* Emphatic involvement, spontaneous and intuitive participation and equal attention (Freud 1912, p. 171) are therefore at the core of the work, as this is where the relationship with the family (the foster parents and their children) can develop.

In addition to the external framework (time, place, people involved in meetings, activities, etc.), it is the professional attitude of the foster care workers who are accompanying the foster families that is important. Most importantly, we need to recognise that there cannot be and will not be definitive answers; there is always more to a complex reality than only one story, one point of view or one narrative. After all, it is a matter of recognising and enhancing the aspect of modesty and not-knowing. This recognition enables to 'see' and understand *the other* and from where new thoughts and alternative perspectives can develop.

10-Point programme for foster care workers

1. Specificities of complex trauma and its psychodynamics within foster families

A first point in this practical guide is about understanding the key challenges faced by unaccompanied children and youngsters with a background of exile and trauma. A better understanding of the key challenges will help to identify the specific support that these young people and their parents need. In many cases, foster parents are confronted with dynamics that are infected by the consequences of very painful and traumatic experiences that the unaccompanied minors have had to go through.

Exposure to war, violence (physical, sexual, verbal, emotional, institutional), persecution or poverty in the home country, as well as the reality of flight, painful loss of home and family and, in the case of unaccompanied minors, the interruption of primary relationships (relationships that are distant, to which one remains very loyal and towards which one may also feel very guilty), accumulate and can – and often do – manifest as a cumulative and multilayered trauma. The causes and sources of trauma can be diverse, very complex and not always the result of a single event (Grinberg and Grinberg 1989, p. 10; 12). However, it is clear that a traumatic experience can affect children and young people to their very core (van der Kolk 2014, p. 21). Many of these unaccompanied adolescents suffer from complex relational trauma (type III trauma; Solomon and Heide 1999) and have to cope with the lack of any form of basic trust because they have had to leave behind the parent-child-attachment relationship by fleeing. What they had built up as attachments in the relationship with their biological parents is sometimes completely destroyed during flight, through very inhuman and degrading experiences. » [see conceptual model, p. 36; 64 seqq.](#)

This starting point of the foster care work is about acknowledging the context: the background of the children as well as the specificities of complex trauma and its psychodynamics within foster families. First and foremost, there is no need to understand, but to acknowledge the specific situation of a foster family.

Complex relational trauma

is a specific type of trauma that one can find especially in fostered or adopted children, but also in refugee children, predominantly in unaccompanied minor refugees. In the aftermath of their traumata one can almost always find a breakdown in attachment relationships or in basic trust. The traumata of type-III (complex relational trauma) go beyond traumatic experiences of type-I (traumatic event) and type-II (man-made traumata), in the sense that they lead to a breakdown in parent-child relationships and in *epistemic trust* more in general (based on: Herman, 1992; Solomon & Heide, 1999).

Especially trauma- and cumulative loss-related difficulties and intense affects mostly remain hidden until new attachment relationships or new developmental steps need to be made, but still effect the child on a profound bodily level, for example at the level of stress regulation (van der Kolk, 2014, p. 94 seq.). Also, emotional overload and affective ambivalences are very often part of the life of those children and youngsters (Meurs et al. 2019, p. 54 seq.); these difficulties affect the actual relation to their foster parents and other care givers (like teachers, psychotherapists and foster care workers). Moreover, these relational dynamics can cause feelings of desperation and guilt on the side of the care givers (both, the foster parents as well as the foster care workers) for not being able to provide an environment, where the child feels safe and understood. It can even lead to *compassion fatigue* (Figley 2002) and to indirect traumatisations of the care givers (Meurs et al., 2022, p. 221 et seq.). » [see conceptual model, p. 59](#)

The task of the foster care worker here is to assess in (re-)building a family relation. The professional, recognising attitude of the foster care worker plays an important role for creating a safe environment, for which reliability, regularity and transparency are fundamental.

It is about (equal) attention, about perceiving, recognising, empathetic attention, listening, authenticating – not (only) about words.

Indirect traumatization

describes the phenomenon that parents and other people around the child can get 'infected' by the stress their child is experiencing or by the emotional retreat the child who experienced trauma is showing. In this sense, care givers, foster parents, and other children in the family risk the occasional 'toxic shower' and can get drawn into situations or behaviour caused by traumatic experiences of the foster child. Eventually they will experience the same or similar symptoms and affects of the traumatic experience the traumatized child is confronted with (Meurs et al., 2022, p. 219 et seq.).

In foster care for unaccompanied minors, one is also confronted with the consequences of uncertainty about the primary care givers – even if the children's actual environment provides security in the new relationship with their caring and loving foster parents. Guidance for foster families with youngsters who have experienced flight and insecurity means being aware of the psychodynamics that will eventually become part of the family dynamic. While the focus of counselling for foster families is on the current reality of the unaccompanied minor refugees, it cannot be overlooked that the experience of threat and persecution, but also of loss and

disruption in the family of origin has an impact on the inner world and the experience of the unaccompanied children and youngsters. It is therefore important to consider past and/or ongoing relationships with the family of origin and to recognise their significance for the children's inner world, more specifically, for their ability to re-attach within the foster family.

Epistemic trust

is the psychoanalytic concept that refers to the ability to perceive another human being as a trustworthy source of information and of social cognitions that can be beneficial for the subject. It develops during the early childhood through the relation to the primary care giver (foremost the mother) and serves as the basis for trust in human relations (Fonagy & Allison 2014; Fonagy et al. 2004; Duschinsky & Foster 2021).

Being able to trust that other adults mean well and want the best for you, and therefore will give you the information you need to move forward in life, is an important psychological capability that can be destroyed in inhumanely treated refugees. It is then replaced by epistemic mistrust, the feeling that it is better not to trust people and therefore to keep those people at a distance. Needless to say, these mechanisms of deep damage to epistemic trust can cause difficulties in foster families. Foster parents want to advise and support their foster child, but in the foster child's case epistemic trust is destroyed, much to the despair and frustration of foster parents who cannot imagine this dynamic of damaging an essentially human possibility.

Specificities of kinship and non-kinship fostering:

Kinship fostering poses the challenge for the foster parents of being possibly re-traumatised by reliving their own hurtful experiences as being exiled, right in the moment the child starts to show something from its own hurtful or traumatic experiences. Fostering a child or young person who is a sibling or relative and who shares the experience of loss of parents or family members, of the cultural environment and of a basic level of security, can not only lead to difficulties in maintaining a holding attitude, in attempting to regulate, or in being triggered by trauma dynamics. Moreover, the unclear asylum status (due to the lack of permanent residence documents) can leave a person in a kind of *limbo* (Groeninck et al. 2020, p. 359); the lack of a network in the host society can lead to feelings of not belonging, of strangeness and thus to insecurities on an existential level. On the other hand, being a family member can have positive aspects, such as a more trusting basis for the relationship or profound belief in the goodness of humanity and mankind. These positive effects, which may be linked to the idea of sharing a familiar history and, above all, a similar cultural history. This shared background – in terms of both familial and cultural similarities – can therefore serve as a common ground for feeling understood.

Growing up in a non-kinship family also has its specific impact on the reality of the unaccompanied minor, who may sometimes feel like a stranger in the host family. The child not only brings into his or her new family a different language and culture (e.g. another religion), experiences of cultural change and exile, but also an emotional backpack regarding traumatic events and wounds from relational breakdowns in the past. Feeling emotionally misunderstood can be followed by feelings of loneliness, strangeness, or mistrust. On the opposite, leaving behind the traumatic and hurtful past and the emotional elements that are attached to this past, can feed the idea of an idealized new life within the non-kinship foster family, with new opportunities for identification. Yet, these new opportunities and future perspectives can come along with difficulties on integrating the external reality that need to be acknowledged by the parents and will probably be part of the family interventions as part of the foster care. Unavoidably this specificity needs to be considered by foster care workers as a part of the reflection process on the relational dynamics within foster families.

This case example may give illustration of what is discussed regarding background knowledge of the fostered child.

Following case example underlines the importance of the professional encounter and the holding (framing and supportive) environment the foster care worker provides in the foster family:

A CASE EXAMPLE:

In the context of foster care work a certain foster care worker is confronted with an unaccompanied minor¹ that refuses to go to school. After a few meetings the child opened up about the traumatic event of losing two friends when the school in his hometown was being bombed. After some time, and after a trustworthy relationship has been build up, the foster care worker was able to convince the child to go to a psychologist.

This case summary underlines the importance of the role of the foster care workers who are accompanying foster families with unaccompanied minors. Implicitly, we can see a development during the intervention. What is not described in this short passage is the process of turning a mere encounter into a healing relationship: Stepping into the life of a foster family seems to

¹ This case example, as well as all other mentioned cases of this practical guide, have been anonymized according to scientific standards.

be an obvious procedure, but it is precisely this seemingly natural step that creates the basis for building a trustworthy relationship with a person one can rely on. It must have been the foster care worker's requirement to be there repeatedly at a specific time during the week, in a safe environment, that was a fundament for building moments of trust. With something as seemingly simple as a scheduled appointment, foster carers patiently create a safe frame for the encounter that can slowly develop into a relationship.

It is important to recognise that building a trusting relationship takes time. Therefore, after a few meetings, a certain level of trust has developed, which has allowed the child to experience a safe space and to feel understood enough, in order to talk about the traumatic experiences. By witnessing and by bringing testimony about the child's experiences, by listening and being present, the foster care worker symbolised a trustworthy person. After some time, the child was able to feel understood and acknowledged with his emotional baggage, which he no longer had to carry on his own shoulders alone. In this sense, the role of the foster care worker was pre-therapeutic. She remained present for the child, was a reliable person who showed kindness and gave hope for a better future. By doing this, she freed going to school from the grim memory of the bombed-out school in the country from which the young person fled. Moreover, the foster care worker is also an example of being aware of the limits of her professional role as a care giver. Since she is not a specialized therapist, she took advantage of the helping environment and pathed the child's way to a psychological help system where the child was given the opportunity to overcome his traumatic memories; yet, she is sufficiently trained in a trauma-sensitive approach and about exile-related trauma, in order to call in a specialised therapist at the right time, and she has sufficient capabilities to be able to continue monitoring the dynamics in the foster family herself and to act in such a way that in that family the parents and their foster child can reconnect.

From this short case reflection, we can already deduce some of the aspects that the professional attitude will require in order to provide the moment of re-connection:

Aspects of the professional attitude:

- staying calm in difficult situations
- creating a safe environment
- planning regular appointments and a reliable structure
- being transparent about the help and the intervention process
- listening and appearing or being present
- elevating an encounter to a healing relationship by trustworthiness
- being aware of the pre-therapeutic and mediating quality of the intervention
- being aware of the limits of the professional role and communicate them to the foster family
- making use of a network (like team meetings, intervision, supervision)
- making use of the network of helping organisations (like supervisors and psychologists, psychotherapy centres, knowledge centres, etc.)
- strengthen the capacity to self-regulate

» A larger version of this List can be found in the toolkit-section, p. 68

The following questions may provide some inspiration on how to begin to recognise the specificities of complex trauma as well as the psychodynamics within foster families at three levels:

These questions are neither complete nor applicable to every individual case or to every dynamic; but may provide orientation for reaching the levels of reflection.

GUIDING QUESTIONS:

For foster care workers

- *What does it need to provide a safe space for the intervention?*
 - *Which surrounding or which context is necessary?*
 - *Which aspects of the professional attitude/role are important?*
- *How can you take care of your boundaries and communicate those?*
- *What is being asked from you?*
- *How do you perceive the intervention regarding the family context?*
- *What is the goal of the intervention? Which steps can be made?*
- *Which irritations/contradictions within the dynamic do you observe and perceive?*

For foster parents

- *What do we know about...*
 - *the relationship between the foster parents and their child?*
 - *the child?*
 - *her/his background?*
 - *the separation from her/his biological parents?*
 - *the contact of the child with her/his biological parents?*
 - *a potential mandate or agency?*
 - *the current context of their child?*
- *communications/ interactions within the foster family?*
- *What are main questions regarding parenthood?*
- *Which questions/ insecurities/ wishes do the foster parents have regarding their child?*
- *What is being said and what is being silenced in that family (from both sides)?*

For fostered unaccompanied minor refugee:

- *What is important to the child/youngster?*
- *How does she/he describe her-/himself?*
- *How does the child describe friendships, the school environment, teachers, care figures?*

Please note: Before asking questions about emotions, about desires and losses, about the past, recommend and/or try to use techniques with a symbolic character (see toolkit-section, p. 86).

The focus is first of all on reaching and staying in touch with the foster parents and the foster child; only in a second step, deeper meanings and painful experiences can be explored.

2. Self- and affect regulation

Regulation

means regaining a minimum level of calm in order to begin to work on relationship issues (by reconnecting). A hyper-vigilant or hyper-aroused child needs above all an adult who can help him to calm down or to downregulate.

This co-regulation requires a care giver who, in a moment of complete dysregulation of the child, manages to remain 'older, wiser and more sensitive'; a person who perceptibly and persistently continues to help the child to calm down. Regulation can be possible by remaining present and acknowledging the child's inner turmoil, by naming the present affect, and by remaining calm in overwhelming moments (Fonagy et al. 2004; see also conceptual model, p. 67 seq.).

With point 2 – 5 we are now on the level of approaching to maintain the capacities of foster care workers who work with foster parents with children with a background of flight. For the foster care worker, it is – first and foremost – about establishing a professional relationship with the foster parent(s).

Unaccompanied minors who have experienced complex trauma often struggle with regulation for a long and intense period of time; even mild stress in later life can cause severe reactivity and dysfunction. They often do not know what to do with their emotions and feel at the mercy of intense emotional swings. A child's sense of self develops through the understanding and mirroring responses of their parents or other care givers. This *social biofeedback* (Fonagy et al 2004) helps the child to understand what is going on inside and gives words or other expressions to the child's inner world. In this way, children develop resilience to stress and uncertainty, learn to recognise and experience their own feelings and sensations, learn to regulate them and learn to distinguish their own feelings (e.g. anxiety) from what is going on in the external world. In this sense, they learn to distinguish between their own fears and beliefs on the one hand and reality on the other hand (ibid., p. 169).

Moments of dysregulation and unpredictability can lead foster parents and foster care workers to ask questions such as: How can we remain useful to the unaccompanied minor in moments of dysregulation? How can we show that we are someone who can be relied upon? How can we remain present in moments when everything seems senseless? The child's anxiety and stress inevitably risk "infecting" his or her environment, or even the foster parent's parenting capabilities and the foster care worker's guiding stance.

In point 2, it is about (re-)establishing calmness and safety. Here, the foster care workers are there for the parents to help them to endure difficult situations, through their presence. Through presence and acknowledgement, the foster care workers are a source of security for parents so that they can convey safety to their children and show them, that they are there to stay.

» see conceptual model, p. 45 seqq.; 67 seq.

The following case highlights moments of tension and conflicted behaviour in a fostered child, which may give us some pointers on how to help regulate them:

A CASE EXAMPLE:

A young teenage boy has lived with his foster parents, his aunt and uncle, since he was a baby. For a long time, the boy didn't know he was a foster child. It was only a few months ago that the parents finally told him, in a way that seemed appropriate to a child during reading a novel. Since then, the child's behaviour has changed, and he has conflicts with his peers at school. In meetings with the foster care workers, the parents try to protect the child and explain that it's always the others who pick on the boy. For a long time, there were no consequences for him. Until the foster parents decided to sign the child up with a psychologist, where the boy explained that he isolated himself from his friends. He only wants to spend time with his parents.

With this case example we see a lot of layers about 'silencing' and about 'hiding and lying'. The past of the child is kept as a secret and as something that is too difficult to speak about, whereas the parents' motivation was to protect the child and to secure him from the hurtful reality. However, the child grew up feeling that there must be something strange, something he does not know about himself. Getting to know the truth after many years of not-knowing is difficult to accept.

There is also ambivalence among the foster parents: On the one hand, they finally sought help because they knew there was something that needed attention or even to be talked about. But on the other hand, they are unable to do so. They shut down, while the social worker in his position as foster care worker feels that there is something that is bothering the parents and the child. With this knowledge in mind, the intervision group raises the question of how to work with the parents about the dreams and wishes of the foster child. And how to build a safe and trusting relationship with strong and reliable attachments. It is necessary to introduce aspects of psychoeducation into the family counselling and to talk about what an early

adolescent needs and how to be there for him. And so, the questions for the foster care workers were: How can we guide the foster parents? How can we help to connect to these foster parents and how can we allow the bonds to be formed between the foster parents and their child, thereby strengthening the commitment of the parents? In seeking a solution to the child's behaviour, it is important to emotionally regulate what the child may be feeling inside (not knowing, insecurity, mistrust or even fear and anger). The boy may feel being left alone with what he is feeling. Perhaps he felt lost in this mental state, without words to express what he is feeling. Regulating means finding a way to calm down for the moment, to reach a state of safety. The foster parents will eventually need a reliable person to trust themselves to. In this sense, the foster care worker needs to be there to listen and understand that the relationship between the foster parents and their child is affected. There needs to be a safe ground on which to re-build a trusting relationship. Once a state of calm and safety has been restored, it will be possible for the foster care worker to help the foster parents to understand what their child might be feeling and needing and to imagine what the child possibly could need to trust his parents again.

It is important that foster care workers are able to recognise and name their child's emotional rollercoaster – even if they do not fully understand it. By acknowledging the emotional turmoil, it will later be possible to find ways to help the child to recognise, experience, tolerate and regulate (and eventually find meaning in) stress signals and emotions. Affect regulation is the basis for building (new) attachment relationships. Meanwhile, there is a golden rule that we learn from neuropsychological research: first regulate (stabilise), then relate (make contact, establish a connection) and then reason (deepen contact, find ways to reflect and work through) (Perry, 2006). Children who have experienced complex trauma require exceptional care givers who are not only able to remain calm and find space for reflection, but who are also willing to tolerate the stress and anxiety that is inevitably 'done' to them. » [see conceptual model p. 40 seq.; 46 seq.; 58](#)

The above case again illustrates aspects of the professional attitude required of foster care workers in moments of dysregulation and/or insecurity during family intervention:

Aspects of the professional attitude:

- function as a reliable person for the foster parents, in order to rely on the foster care worker
- pay attention to signs of the search for connection
- mentalise and mirror the parent's engagement
- build a safe and trustworthy relationship
- "be there" (with presence, with an open ear)
- acknowledge the different layers of the psychodynamic
- acknowledge that there is something that is bothering the child, without the pressure of solving it immediately
- help to regulate by finding a way to calm down for the moment and coming back to a state of calmness and safety
- help the foster parents to mentalise
- help to find meaning for what their child might feel and need
- implement aspects of psychoeducation

» A larger version of this list can be found in the toolkit-section, p. 68

Following list can be used during moments of tension on three different levels, to find back to a stable and calm state, from where on mentalizing (Point 4), symbolizing (Point 5), and later understanding, might be possible:

Please note that these questions may give orientation for the foster care workers in a later process of reflecting on the case dynamic.

GUIDING QUESTIONS:

For foster care workers

- a) *How do you perceive the dynamic of dysregulation?*
- b) *How do the parents describe the dynamic of dysregulation?*
- c) *How do they observe moments of anger/ frustrations/ fear?*
- d) *What are the triggers for difficult moments and dysregulation?*
- e) *How do you perceive communications within the family?*
- f) *What does it need to provide a safe ground for the intervention?*
- g) *How can you as a foster care worker find back to calmness, if needed?*
- h) *What is helping you as a foster care worker to calm down and/or pause, if needed?*

For foster parents

- *How do you as a foster parent perceive the dynamic of dysregulation of your child?*
- *How would you describe the dynamic of dysregulation/ moments of tension of your child?*
- *How would you describe moments of anger/ frustrations/ fear of your child?*
- *What are the triggers for difficult moments and dysregulation?*
- *How do you as a foster parent perceive difficult dynamics?*
- *What does it need to provide a safe ground for the child/ youngster?*
- *How can you find back to calmness in relation with your child?*
- *What is helping you as a foster parent to calm down and/or pause?*
- *What is being said and what is being silenced in the family (from both sides)?*

For fostered unaccompanied minor refugee:

- *What would help you to calm down and/or pause?*
- *How can you find back to calmness?*

What do you wish for from your foster parents/ care figures after pausing and finding back moments of calmness?

Please note: Before asking question about emotions, about desires and losses, about the past, recommend and/or try to use techniques with a symbolic character (see toolkit-section, p. 86). The focus is first of all on reaching and staying in touch with the foster parents and the foster child; only in a second step, deeper meanings and painful experiences can be explored.

3. (New) attachment relations

Stress and affect regulation, as well as a sense of (relational) belonging and therefore the ability to form attachment relationships, can be damaged by the dehumanising experiences during and after flight. Separations, consecutive losses and traumas associated with exile can cause the child to feel abandoned or even destroyed (Varvin 2016, p. 841).

» see conceptual model, p. 11 seqq.; 66 seq.; 68 seqq.

Here we continue elaborating the highlighted aspect from point 2. For the foster care worker, a family intervention is about supporting parents in being there for their fostered child so that the parent-child-relationship can be (re-)established.

It is about being there, being reliable, conveying to the child that the parents' relationship is and remains consistent (even if it may not always be easy).

In order not to feel the fear of being annihilated (destroyed), the foster child may develop various strategies in which the new attachment figure (the foster parent) is controlled, totally claimed, aggressively attacked or actively kept at a distance or devalued. This kind of behaviour (which is mostly unintentional but unconsciously driven) serves the purpose of not having to feel one's own fear of another abandonment and the repetition of the feeling of not belonging. The existential fear of being abandoned and completely destroyed, as well as loyalty to the family of origin, often limit the child's ability to invest in new relationships with foster families. Foster care workers find themselves in the role of trying to help the foster parents and children cope with a difficult reality and, at the same time, cope with disillusioned ideals. In most cases, they experience of the ambivalence of continuing idealisation (for example, of the biological parents) and the disillusioning aspects of the reality of an asylum procedure (Varvin 2016, p. 833) or of the foster parents. From a psychoanalytic perspective, there is a need for tolerance of ambivalence in human relationships because ambivalence is a general and unavoidable part of human life and relationships (Meurs et al. 2019, p. 55 seq.). Accepting the complexity of the simultaneous positive and negative affects of human relationships, as opposed to being drawn to one extreme or the other, leads to a more regulated state and a sense of well-being. While understanding these dynamics may be crucial, we must also accept that not-understanding or not-knowing is an essential part of human relationships, also in the context of counselling relationships. It is also about recognising that bonding is not instantaneous nor perfect but takes time and is not a linear process. It is about recognising ambivalence and accepting that there will always be a fluctuation between survival-driven retreat (avoiding the relation to the foster parents) and the establishment of a bond with the foster parents that can gradually develop and strengthen. The following case illustrates the difficulties of (new) attachment relationships:

A CASE EXAMPLE:

In our work we meet a young boy who lives with his mother's cousin and who wants to leave his foster family because of mistrust. He does not go to school, stays at home, plays with his mobile phone and seems to be unreachable, as the foster parents describe him. Sharing this case leads us to ask how we can help the child to feel safe, to express himself, to trust (again) and how we can help him to build a relationship with his foster parents and with us as foster care workers.

Finding a way to help the boy seems to be the first step for the helpers, who approach the boy's situation on different levels: on the level of acknowledging his inner state and his need for a feeling of safety and on the level of finding ways to help him express himself (what he needs, wants and who he is), as well as on the relational level of trust and finding a (new) bond with his care givers/foster parents. While at first glance his impulse to leave his foster parents may appear to be typical adolescent behaviour in search of autonomy, his unreachability suggests that something very fundamental is at stake: basic trust. We need to recognise from the outset that trust is needed to build a relationship. So, we need to ask ourselves: How does trust develop? First and foremost, it is about emotional availability, about being there – no matter how complicated, confusing or conflicted a situation may be, it is about communicating participation within the family. Parents and carers should signal to the boy that they are there and available and that he is not alone in his situation with his concerns. Even if there are no words and no explanation for his difficult behaviour at the moment, it is important to convey that there is the possibility of recourse to trustworthy care givers. Furthermore, the boy's wish (to leave the family) is linked to a future perspective. But how can we imagine the boy's future? We need to find out what perspective the boy has on his future, what he imagines. From his way of thinking and aspirations we can learn about his motivations, dreams and needs, and together we can consider what the boy needs to understand about his relation to the foster parents. Only then can we discuss with him what role his school career can play in his vision of the future.

This case illustrates how difficult it can be for foster parents to (re-)establish a relationship with their foster child. All the insecurities that this brings for the parents are also a burden for the foster care workers. The discussion about the boy's unreachability shows how complex it is to try to find a solution. But what we learn from our discussion is that there are several steps that need to be taken before an answer can be found. The following list summarises the key aspects of the foster care worker's holding attitude:

Aspects of the professional attitude:

- functioning as a reliable person for the foster parents
- for the moment, there is no need for words and no explanation, just be present in the family, keep in touch
- acknowledging the inner state of the child
- being aware of signs that show us something that cannot yet be said in words (e.g. the boy's emotional retreat and unavailability)
- recognising at the very beginning that trust is needed to build a relationship
- keeping in mind the guiding question of "How does trust develop?"
 - by being there and conveying participation in and concern for the family and the foster child,
 - by helping the parents to signal or show their child/youngster that they are available, and that the child/youngster is not left alone with her/his situation
- helping to (re-)establish a bond between the care figures/foster parents and their foster child/ youngster
- help the foster parents to convey their child that there is the possibility to fall back on reliable care givers
- considering together that the child/youngster needs to feel understood
- learn something about the child's aspirations, dreams and needs
- finding ways to help the child to express her-/himself
- help the parents to guide their child to a perspective of the future

» A larger version of this list can be found in the toolkit-section, p. 68

For a better understanding of the dynamic of the family intervention, we collected following guiding questions as a kind of orientation:

Please note that these questions may help the foster care workers – while keeping them in the back of their minds – to make sense of the case.

GUIDING QUESTIONS:

For foster care workers

- *How would you as a foster care worker describe the family dynamic? How would you describe the atmosphere in the family?*
- *How do you observe the family system? How do you describe the relationships, the roles?*
- *What is your role as a foster care worker? With which questions are you being addressed? By whom?*
- *What do you know about the child's/ youngster's background of relationships, before, during and after flight?*
- *What do you know about the child's/ youngster's behaviour with other care figures (teachers, trainers, family members, biological family) and peers?*

For foster parents

- *How would you describe the family dynamic and the atmosphere in the family?*
- *How would you describe the relationships, the roles in the family?*
- *What is your role? With which questions are you being addressed by the child?*
- *What do you know about the child's/ youngster's background of relations?*
- *What do you know about the child's/ youngster's behaviour with other care figures (teachers, trainers, biological family) and peers?*
- *How does your (foster) child show attachment/love and/or mistrust/anger/fear?*

For fostered unaccompanied minor refugee:

- *How would you describe the family atmosphere?*
- *How would you describe the relationships, the roles?*
- *What is your role?*

Please note: Before asking question about emotions, about desires and losses, about the past, recommend and/or try to use techniques with a symbolic character (see tool-section, p. 86).

The focus is first of all, on reaching and staying in touch with the foster parents and the foster child; only in a second step, deeper meanings and painful experiences can be explored

Dynamics can be challenging – not only when, for example, the parents retell a situation or the child expresses something, but also due to being involved in an interaction as a foster care worker.

So, it is not only about continuity and reliability towards the family; but for the foster care workers to experience reliability within their organization and in their team and having a space to share challenging dynamics.

4. Mentalizing state of mind and self-reflection

Mentalization

describes the ability to process from affects to emotions and connect thoughts with meaning. This ability has its root in the early stage of development. Normally, within child development, children learn how they can understand themselves in the context of communication and in reaction of their parents, who function as an affective mirror.

If children do not experience this affective mirror early in their life, this lack will interfere with the development of attachment, with the development of a mentalising and regulatory stance and with the development of a coherent sense of self (as a basis for identity).

Mentalization is the ability to understand the mental state – of oneself or others – that underlies overt behaviour. Mentalization can be seen as a form of imaginative mental activity that allows us to perceive and interpret human behaviour in terms of intentional mental states (Fonagy et al., 2004).

Children who haven't experienced their inner life being named and explained by a care giver will remain at a constantly high level of stress in their inner psychic life and in their body and may lose their curiosity about psychic inner experiences as such. Often, unaccompanied minor refugees have had to hyper-mentalise – the tendency to overattribute mental states to others – in order to survive the experience of flight. In the aftermath, they are no longer able to mentalise because this ability to mentalise was compromised and in a certain sense abused on the way to Europe. They live with completely unprocessed, anxiety-ridden experiences that are far beyond their capacity to mentalise: often they are unable to process the pain of exile as well as the actual hurtful experiences in exile (e.g. due to racism, discrimination, acculturation difficulties or simply the fact that the foster parents also have unresolved wounds due to their own unspoken exile experience).

Without specialised help, some of these young people will never regain the mentalisation and regulatory stance they had before. There are no words, no symbols that the child can use to get back into conversation with those around him. The only expression of what is still felt in the body, or what has remained completely repressed and unconscious, is found in irrational, ambivalent behaviour, or in signs and symptoms of dysregulation and dysfunction at a relational or physical level. It is the foster parents who will experience the effects of what the child must be feeling inside. The foster parents therefore need foster care workers as stable figures who are willing to support foster parents through difficult moments in their relationship with their foster child, so that they themselves as foster parents can act as a stable and secure source for their fostered unaccompanied minor.

Mentalization is another aspect that is important for the work of foster care worker. It is about perceiving and empathising with the emotional situation of the children and of the parents (who may be infected by a dynamic). It is neither about answers nor solutions. It is about acknowledgment and eventually – and only if the situations allow it – about helping to name the affects and emotions, for example, it can be healing to hear a simple 'I hear you'.

The following impression from the backyard of a children's home illustrates how visual, affective and emotional moments of the fostered children and youngsters can be understood by the foster care workers:

A CASE EXAMPLE:

As a few boys chat in the cosy sitting area of the community space in a children's home, the atmosphere is calm and playful. The sunny, warm day, the laughter of the boys and the warm atmosphere convey harmony. Only the broken glass of the large window, separated by a wide lattice frame, interrupts this harmony.

The broken glass seems to be a reminder of moments of aggression, anger, rage and imperfection; moments that can be difficult and lead children to express their frustration. To replace it would mean to erase the emotions that are also present in these adolescents. In the broken glass a reality is visible, and no illusion is necessary. Moreover, it makes us think that it is a pre-symbolic sign of the feeling of being stuck inside – a feeling that could be potentially dominant during a phase of growing up without roots in the family of origin. On the one hand, the broken glass is a direct expression of the emotional state that is part of the reality of the children's lives. It is a symbol of the world of emotions, anger and aggression. At the same time, the broken glass is temporary and must be replaced for safety reasons. Although the broken glass is at a height that cannot be reached directly, it is a symbol of destruction. A broken aspect that can be put back together again. If replacing the glass would make the broken elements in the life of these children invisible, it can also convey healing and reparation. It is about acknowledging the emotions that are there, but at the same time making it clear that the window can be repaired – just as strong emotions can pass, and the broken inside can be put back together with time and care.

A look at the symbolic content shows two things: destruction and (the possibility of) reparation or healing through togetherness. Rather than leaving feelings of aggression in the actual expression, the next step is to find a more healing way of expressing them. This can be done by a creative way

of expressing, a way that without being threatening or frightening, increases the intensity of feelings that are felt in various ways. This creative expression is possible through dance, drama, painting or clay sessions, where the children and young people are accompanied by a caring figure or therapist who remains available and helps to make sense of expressed feelings that may come up and could be overwhelming or confusing.

In order to be able to guide foster children in such activities and creative expressions, the care giver needs the following aspects of a professional attitude:

Aspects of the professional attitude:

- being there and in contact with the foster parents and helping the foster parent to stay available nearby the foster child
- acknowledging (direct and indirect, obvious and underlying) expressions of emotional states that represent different parts of the inner reality and the life-experience of the child
- accepting the emotional states within the foster family – even if they are not always clear, or even if they are confusing, ambivalent and/or overwhelming
- adopting an approach that is focused on healing and on reparation through togetherness or connectedness, thereby:
 - Reflecting with the team and making use of supervision, about how to work towards continuity and re-connecting within the foster family
 - Emphasising the value of remaining present and staying emotionally available for the family and for the fostered children and youngsters
- signalling that strong feelings pass, that there can be a flow from negative affect towards more positive affect and that healing is possible with time and with an approach of carefulness
- finding a healthy and constructive way for expressing feelings
- helping to find meaning for the feelings that are expressed: feelings are a way to communicate, no matter how difficult the feeling may be

» A larger version of this list can be found in the toolkit-section, p. 68

These questions may be perceived as an orientation point. During the intervention it is about the relationship, processing on finding meaning to what was perceived will come after – within reflective spaces of the foster care team

The following list of questions might help to guide the intervention according to the three different perspectives on the case the foster care worker is working with, by approaching the situation from a mentalising stance (to help make sense of affective and emotional states):

GUIDING QUESTIONS:

For foster care workers

- *As a foster carer, how do you perceive the family dynamic?*
- *What questions are you asked? By whom?*
- *What are you observing/learning about feelings and emotions within the family?*
- *What emotional space do the foster parents provide for the child?*
- *How do you observe/get to know about emotions, needs, thoughts, reasons, fantasies within the family?
How do you observe/get to know about conflictual behaviour/aggression?*
- *What do you know about the space for the child to express his/her feelings?*
- *What activities do the parents see as beneficial for the child (in terms of activities for the child and/or the child's activities with the foster carer)?*

For foster parents

- *As a foster parent, how do you perceive the dynamics with your child?*
- *What affects and emotions do you observe in your relationship with your child?*
- *What emotional space do you provide for your child?*
- *How do you perceive your child's emotions, needs, thoughts, reasons, fantasies? How do you observe conflictual behaviour/aggression?*
- *What spaces do you provide for your child to express his/her feelings?*
- *What activities are part of your family routine regarding activities for or with your child?*
- *How do you imagine your foster child's questions and concerns? How do you internally think about your foster child? About what he is struggling with?*

For fostered unaccompanied minor refugee:

- *What do you want to tell us about what's on your mind? Will you tell us something?*
- *Can you tell us in words, or can you show us in some other way what is on your mind, what motivates you, where you want to go, what you are afraid of? Maybe in a drawing or a song lyric or something else?*
- *Can we (your foster carers and/or us from the fostering service) show our interest in what you are thinking or doing?*
- *Who would you like to talk to about these things? Are there other people who care about you that you think of, for speaking about these questions?*

Please note: Before asking question about emotions, about desires and losses, about the past, recommend and/or try to use techniques with a symbolic character (see p. 86 seqq.).

5. Symbolizing and finding a narrative

In this fifth module of the training, we focus on the aspect of trauma-specific counselling with foster children and foster parents; a kind of trauma-specific guidance that foster care workers can use in their practice. One of the first steps is to create an environment that is safe enough to protect the fostered minor from a new breakdown of attachment

Symbolization comes after mentalization (point 3). Once affects have been articulated, a more in-depth approach to the process of understanding can be found later on.

relationships. This is only possible by offering help to regulate high levels of stress associated with some renewed efforts and steps to re-connect and restore the new attachment relationships within the foster family. Through ‘moments of meeting’ (Stern 2005), reflecting and mentalising will then become possible for the child, at a later stage of the fostering process. In the meantime, the foster care workers will help the children (and the foster parents) to regulate stress and tension, as the traumatic experiences of loss and dehumanisation are far beyond the capacity of mental processing. For a period of time, the child is unable to find words and narratives for these overwhelming and stressful experiences. In these moments, trauma-specific care is needed – care that is situated in a multi-professional context (e.g. mental health services, psychosocial and psychotherapeutic trauma experts, the school) and that addresses the specific loss, unresolved grief, dehumanisation and loss of trust and hope caused by the experiences before, during and probably also after the flight. » [see conceptual model, p. 20; 70](#)

A CASE EXAMPLE:

We often hear from families that their children are suffering from physical ailments such as stomach aches or headaches. In discussions with foster parents, we try to find ways to convey the idea on a culture-sensitive way that bodily symptoms can also be an expression of psychological attitudes or trauma.

Internal discomfort and psychological pain express themselves in different ways and require a caring and protective environment. From the perspective of a mentalization-based approach, we would ask what has happened to the child that he/she is experiencing such pain. It's about being cared for, about security and protection, which has been lost for many of the foster children we meet in our work. The unpredictable experiences of violence, war, loss and enormous fear can create a deep vulnerability and lack of protection that can overwhelm children. It's

about acknowledging the awful truth of having had to abandon the country of origin and of having experienced extreme levels of insecurity and pain. The foster care workers task – as well as the task of the foster parents – is about being there, listening, acknowledging the difficulties the child is experiencing. It is also about belief in the possibilities of the child for finding ways to express his concerns in a way that makes a transition from a symptomatic expression to a more symbolic one (a movement, a drawing, a song text, a word, a narrative, etc.).

From this discussion of a common practical experience of helping foster parents to maintain an understanding attitude towards physical pain, we will again extract some helpful aspects of the professional attitude of foster care workers and foster parents:

Aspects of the professional attitude:

- functioning as a reliable person for the foster parents
 - helping the foster parents to maintain a caring and protective environment for the child
 - helping the foster parents to stay available for the child and to show that the child is being cared for
 - helping to nourish security and protection for the child within the foster family
- trying to find ways of how to culturally translate that symptoms can also be an expression of the psychological stance or trauma. This can be done in particular by making it clear that cultures have different and equivalent ways of expressing symptoms, and by helping to discuss how to understand somatic and verbal messages from the foster child.
- keeping in mind the question of what must have happened to the child that she/he experiences such pain: not so much what the symptom means, but primordially what the symptom tells us about what the child has been going through in the past and what the child is suffering about for the moment
- acknowledging the experienced truth and pain of the child
- acknowledge and believe the difficulties that the child is feeling inside

» A larger version of this list can be found in the toolkit-section, p. 68

After regulating, relating and mentalising, a next step would be to symbolise – to give meaning to certain behaviours, expressions and affects that may affect the child's wellbeing. The following questions can help to deepen understanding and find new ways to intervene:

Here, again, it is a matter of perceiving the emotional situation, but also of accompanying the parents and children who are expressing something (which may most often) have a deeper, underlying latent meaning. It is not about find the answer to it, but about acknowledging, that it is an expression of a feeling or of needs, for which there are no words or explanation (yet).

Before entering the level of reflection (within reflective spaces of the foster care work) it is about being there and being open to the signs and symbols of the case dynamic. These questions may, later on, help to find meaning to what has been encountered.

GUIDING QUESTIONS:

For foster care workers

- *What do you observe/learn about feelings and emotions within the family?*
- *What emotional spaces do the foster parents provide for the child?*
- *Do the parents provide room for communication about motivations, feelings, thoughts, aspirations of the foster child?*
- *What peculiarities of behaviour, coping strategies, symptoms, etc. can be observed in the family/child?*
- *What activities do the parents provide for the child?*
- *What activities does the foster child enjoy?*
- *Which activities are already helpful for the child to express him/herself (e.g. drawing, dancing, sports, ...)?*

For foster parents

- *As a foster parent, what do you observe/learn about your child's feelings and emotions?*
- *What emotional spaces do you have in your family and for the child? Is there a space where emotions can be communicated within the family? For certain emotions and not for other emotions?*
- *How do you communicate in your family? How do you talk about feelings, wishes and losses?*
- *What are your child's characteristics in terms of behaviour, coping strategies, symptoms, etc.?*
- *What activities do you offer or share with your child?*
- *What activities does your child enjoy? What are his/her preferences?*
- *Which activities are already helpful for the child to express him/herself (e.g. drawing, dancing, sports, ...)?*

For fostered unaccompanied minor refugee:

- *Which activities does you like? Which preferences do you have?*
- *Which activities help you to express yourself (e.g. painting, dancing, sports, ...)?*
- *What experiences have you already been able to express or talk about and what things have you not yet been able to?*

Please note: Before asking question about emotions, about desires and losses, about the past, recommend and/or try to use techniques with a symbolic character.

6. Getting in touch with hidden expressions of relational losses and dysregulation

It is not uncommon for minor refugees to live with a high level of stress sensitivity, as well as with fight, flight and freeze mechanisms. In the sixth part of the training, we recognise the hidden expressions that can appear in the form of signs or symptoms of trauma and deep anxiety in the minors in care (van der Kolk 2014, p. 378). Former experiences of the breakdown of relationships, human presence and trustworthiness can disrupt the actual foster relationship in sudden, overwhelming and uncontrollable ways. In these moments, the foster child is full of fear and mistrust. More often than not, this deep anxiety of ‘no longer being able to belong to a family’ will manifest itself in the form of anger, rejection or other behavioural problems. Fighting with others, seeking conflict, arguing, but also becoming unapproachable and showing emotional withdrawal are expressions of traumatic losses and at the same time ways of exploring one's individuality and beginning to feel who one is after a hurtful period. Deep insecurities about a fundamentally positive and coherent sense of self lead to clashes/conflicts that enable the child to test whether the new environment of the foster family is solid enough to *hold* (Winnicott 2002, [1974]) and *contain* (Bion 1990) the emotional turmoil. These behavioural symptoms are usually the expression of an indirect and often incomprehensible or fragmented communication of some aspects of the fostered child's experiences. These expressions and symptoms need to be understood and contained or held by attachment and care figures (ibid. p. 80) – such as the foster parents and/or a foster care worker – in order to give these signs a first meaning that can be shared with a trusted person. However, as foster parents can be drawn into the trauma dynamic in their relationship with their child, they also need a holding environment – to distance themselves from overwhelming experiences and to regain an attitude of being emotionally available to their foster children. In this task, the foster parents can be supported and helped by the foster care worker. » [see conceptual model, p36; 66; 71](#)

Getting familiar with the specificities of a childhood in exile and without family roots, maintaining a safe ground for the relational encounter (with the foster family), as well as the approaches on mentalising and symbolizing, can be useful for the foster care workers in points 6 – 9. Here we will attempt on understanding, that must always be understood as a (infinite) process.

Containment

describes how in human relationships (raw and non-verbal) affects are taken care of by the caregiving figure in the sense of a container. The care giver acknowledges an unbearable affect, tries to bear it and searches for a meaning for the affect in which the child can recognise himself or herself. Referring to the development of the early mother-child relationship, the mother contains the baby's existential needs by acknowledging and responding in a sense-giving way, so that the emerging need becomes more and more bearable for the baby and gets meaning; the need becomes also something what the child can recognise as belonging to his/her own self (Bion, 1990).

In the following case example, we will observe how a particular behaviour or habit of a foster child may be an expression of a deeper emotional state:

A CASE EXAMPLE:

A foster care worker was contacted by a Syrian foster parent who was concerned about his nephew, who seemed to do various tasks perfectly, but also had panic attacks, usually at the start of a task. Although the foster parent himself struggled with similar symptoms due to his own perfectionism, he tried to calm the child down in moments of stress and tension by reading the Koran together. Nevertheless, he asked the foster care worker for help in teaching the child – and in being taught himself – how to accept not being stuck in perfectionism.

During her intervention, the foster care worker realised that the foster parent needed more: She understood this perfectionistic behaviour as a hidden sign of the traumatic events that the foster child and the foster parent both had been confronted with in the past. It is important to note that the nature of a traumatic experience is an existential shock that leads to feelings of powerlessness. The feeling of powerlessness may lead a person to 'fill' this experienced lack by ambitiously controlling situations. Even more, the sense of alienation that can be caused by traumatic events can lead to an effort to fit in – in different environments, groups, and (at a certain level) in school. Perfectionism may then emerge as a mechanism for coping with disturbing feelings within the inner world and with insecurity caused by the trauma. While the child's panic attacks occurred mainly at the start of tasks, they could be related to the fear of uncertain outcomes that is a common part of any starting point. In her interventions with the family, the foster care worker mainly trained the foster parent to recognise his child's emotions and to acknowledge that they were rooted in traumatic events of the past – even though they were still showing their influence in the present moment. Through her intervention, the foster care worker had an impact on the perfectionist ideal of the foster family members, probably by providing a space for hurtful emotions that they were unable to feel and acknowledge on their own. In addition, by participating in a family intervention, the foster

care worker acted as a witness to what the child and the foster father were experiencing on an emotional level – just by being there and by thinking or mentalising together, by creating a meaningful context for these seemingly hindering perfectionistic behaviours, by being aware of something that the foster child and the foster father were experiencing, even if it was not fully understood or communicated. After some time of working with the foster family, the social worker/foster care worker was even able to prepare the foster father for a psychological assessment the father asked for.

We came up with these ideas in the context of a peer review group (an intervision group) with foster care workers. In that context we were able to gather our thoughts, and we could approach the process of understanding the child and its context by looking at the case empathically and reflexively. The approach in the group requires an attitude of openness for and acceptance of what is not yet understandable. We also needed to recognise that we cannot understand everything, but we must recognise at least that something is being communicated indirectly. We extract the following aspects for the professional attitude within foster care work:

Aspects of the professional attitude:

- Being there and being professionally involved and caring
- To listen and understand, even if not everything can be fully understood.
- Being aware of hidden signs and glimmers of hope
- Giving space to hurtful feelings
- Functioning as a witness
- Being aware of the limits of the professional role
- Making use of a supportive environment

» A larger version of this list can be found in the toolkit-section, p. 68

With these aspects of the professional attitude in mind, we will share some inspiring questions that can be used to reflect on hidden expressions of relationship loss and dysregulation:

We will focus on maintaining a reflective stance that helps to process on understanding ongoing dynamics and the needs of the foster parents and their children.

REFLECTIVE QUESTIONS FOR FOSTER CARE WORKERS:

Acknowledging the situation

- *What are your impressions? What can you observe about the child's appearance, behaviour, ways of talking and other expressive aspects, etc.?*
- *What do the parents tell you about the child's behaviour, speech, interests, questions?*
- *What behaviour, speech, topics, questions of the child do they worry about?
What are the child's (helpful/hindering) coping strategies?*

Approaching to understand the situation

- *What do we know about the child?*
 - *What is the child liking or disliking? What does the child want to achieve?*
 - *What difficulties do we know about (e.g. a particular task, friendships, etc.)?*
 - *What do we know about the child's past/present situation?*
- *What might be the underlying motivation for the child's behaviour, speech, topics, questions?*
 - *In which moments can a certain behaviour, way of speaking and behaving, certain topics and questions of the child be observed? (Perhaps also: how does it begin/end?)*
 - *What triggers for difficult behaviour can be identified?*
 - *How does the child's behaviour, speech, interests, topics, questions affect the parents?*
 - *How does the child's behaviour, speech, interests, topics, questions affect us as foster care workers?*

Possible ways to intervene:

- *Framing, containing, identifying and naming the behaviour (e.g. "I can see that you are trying your best to do the task perfectly")*
- *Finding different ways to show what needs to be understood or communicated*

7. Biopsychosocial loops

In the seventh part of the training, we take a closer look at the biopsychosocial cycles associated with complex relational trauma (van der Kolk 2014). In the context of therapeutic foster care, children can learn to recognise their inner turmoil and begin to explore new ways of behaving and relating as well as new ways of self-regulation. However, any progress towards developmental or attachment relationships will be severely tested or thwarted by the foster child's ever-present fear of being left alone again. These children can be caught in a 'biopsychosocial trap': the biologically anchored overwhelmed stress system and hypervigilance lead to psychological and social difficulties, which in turn lead to even more anxiety, stress and threat hypervigilance, etc. » [see conceptual model, p. 46; 71 seq.](#)

Biopsychosocial loops

describe an inner status, which most often is experienced by children that are traumatized in primary attachment relationships or by unaccompanied minors that are dehumanized underway, during the flight on their way into exile. A high level of stress as well as a heightened stress sensitivity can lead to a higher level of excitability and reactivity to inner and external stimuli. This in turn leads to psychic and social difficulties that heighten the anxiety and hyperarousal and can lead to a biopsychosocial trap (van der Kolk, 2014).

Finding a way out of the vicious circle of the biopsychosocial loop in which the child is trapped is not an easy task, but it is a crucial one. It has to be done on safe ground and therefore in a safe relationship with their foster parents and foster care workers. A reliable and trustworthy relationship is the basis for the developmental tasks of the foster child. We have already learned that a secure base consists of trustworthy care givers who have learned to regulate and contain intolerable emotions. Being part of an attachment relationship means being part of a relational dynamic that is inherently complex and not always understandable. But for an unaccompanied minor refugee, it is also about recognising hidden expressions and latent signs of loss, abandonment and trauma, some of which can be understood more fully only later in life.

In terms of the attempt of understanding, this point is about realising that the expression may be based on deeper, hidden themes that may be related to loss, neglect and trauma.

The following vignette illustrates how these cycles can be identified:

A CASE EXAMPLE:

After a long waiting procedure and a lot of bureaucratic premises Maria and her husband met their first child, their foster son of 15 years, for the first time. Instead of being happy to finally meet, she tells us: "I felt hatred just before I met him for the first time."

Feeling hatred or any negative reaction to a long-awaited child entering her and her husband's life seems contradictory at first. Moreover, this reaction of hatred can be accompanied by feelings of guilt and shame. The truth is that this was one of the first emotions the young mother experienced – an emotional reality that isn't surprising from a psychoanalytic perspective: it is about moments of affective ambivalence that are part of parenting. For a mother (or for parents), not only a newborn child growing in the mother's body, but also a teenager with a whole childhood already lived, symbolises a completely new and unknown person entering the family life. It represents an existential change to what has been lived before. A baby born into a family means change: the parents have to reorganise and make room for the child. The example of Maria, who spoke of the feeling of hatred when she met her foster child for the first time, teaches us to accept the ambiguity of human life, in which positive and negative affective states can appear simultaneously (Meurs et al. 2019). Even though the expression of hatred or aggression may seem contradictory, it is a way of expressing a woman's intense feelings about the existential change of becoming a (foster) mother. Listening and giving space to the emotions that are being felt gives a person the opportunity to feel, express and acknowledge their emotions in order to work through them. The professional attitude of the foster carer acts as a container and mirror for the intense emotions of the foster families and their children. In addition, the presence of a social worker can help to gain a meta-perspective of the family dynamic, which can be overshadowed by intense emotions. While being emotionally involved during the professional encounter, the foster care worker needs to be aware of his/her own role within a family system in order to help identify points or opportunities of regulation that can be mirrored back or communicated to the parents.

Engaging empathetically with the relationship and being there to support the foster parents even in moments that prove to be conflictual and challenging requires a professional attitude. We think of moments of ambivalence: wanting to open your family to a foster child and at the same time feeling that you don't want to, or wanting a foster child and at the same time having moments of anger about the exhaustion, the claims of a child and the struggles that a child traumatised by the flight has to go through, a child that is also very loyal to the biological parents (ambivalences). About the professional attitude, we summarise the following aspects:

Aspects of the professional attitude:

- listening and giving space to hurtful emotions and contradictory feelings
- functioning as a container and helping to find words for expressed or even underlying simultaneous contradictory feelings of strong intensity
- being aware of your own role within a family system; the foster care worker is the one who mediates by helping people to re-connect, by helping to understand ambivalences and very difficult moments in the foster process as normal processes in complex human relationships
- identifying regulation points to be handed back to the parents, for example moments that show how foster family members (parents) try to understand their difficult moments and those of others (among which the foster child)
- helping by identifying a supportive systems and interactions (like a parental exchange, peer-to-peer support for the child, moments of enjoying an activity in the midst of conflictual phase in the family cycle, etc.)

» A larger version of this list can be found in the toolkit-section, p. 68

For further reflection and the process of understanding, we would like to offer the following questions for inspiration, which we can summarise on three levels of understanding:

Some of these questions may be helpful for the foster care workers to find a new perspective while reflecting within a reflective space (e.g. supervision) and may give some inspiration.

REFLECTIVE QUESTIONS FOR FOSTER CARE WORKERS:

Acknowledging the situation:

- a) *What are your first impressions?*
- b) *What can we observe about the parent-child dynamic in the foster family?*
- c) *What do we learn about trusting and/or conflictive moments in the parent-child dynamic?*
- d) *How do parents describe moments of conflict (in terms of closeness and distance)?*

Approaching to understand the situation:

- *What could be the meaning of a certain behaviour, certain words, themes and topics that are raised by the child, questions of the child?*
- *How could the relationship between parents and child be described?*
 - *In which moments do you observe/do the parents tell you about distance, rejection, mistrust towards the child?*
 - *What are the triggers?*
 - *How does the rejection or the mistrust of the child affect the parents?*
 - *In what moments did it help to pause?*
 - *In which moments the relationship was restored? What contributed to the reparation of the relationship between foster parents and foster child, but also eventually between foster care worker and foster family?*

Possible ways to intervene:

- *Which tips for regulation can be given to the parents?*
- *What kind of space for parental exchange can be helpful?*
- *What kind of exchange, containment and reflection could help foster parents (to regain inner resources, to remain stable in their relationship with their child)?*
- *What can be a safe space for the child? What could help him/her to regulate and find orientation and trust in the relationship with his/her foster parents? How can the parents mirror the child's expressed feelings?*

8. Identity and autonomy

In the eighth part of this training, we need to acknowledge the specificities of children's development in order to understand their search for identity and autonomy, which will be even more challenging for some unaccompanied minor refugees who have experienced the interruption and the distancing from or the breakdown of relationships in the context of flight and exile. Complexly traumatised children are faced with the challenge of integrating experiences of rupture, unavailability and loss of attachment relationships (Vliegen et al. 2023). They also need to integrate inconsistencies, unclarity and unfinished processes into their own life histories. They are also confronted with many moments of unresolved grief over cumulative and often irreparable losses or separations for which they feel guilty. And on top of that, they have sometimes had experiences of being treated inhumanely. They are therefore very sensitive to the slightest signs of possibly new losses in emotional availability. At the same time, they are driven by a deep sense of not really belonging to or deserving the love, generosity and care of others (the foster parents, the teachers, the foster care worker, etc.) (ibid., p. 11 seqq.). In adolescence, these painful feelings are intensified, because during the developmental phase of adolescence existential changes are made through challenging developmental tasks that can be summarised as follows:

In terms of understanding, the focus of the foster care workers accompanying the parents is on acknowledging the search for identity, which may cumulate for the foster children and youngsters with the experiences of flight, loss and trauma.

- It's a phase in which the young person has to find his or her position within the intergenerational line in his family system and in relation to his or her parents through negotiation and/or conflict; finding one's own place in that transgenerational perspective requires also moments of struggle, conflict, aggression. Only when these moments are accepted and overcome, the youngster can find to a new sense of autonomy (Erikson 1973 [1959], p. 106 seqq.).
- It's a phase in which the sexually maturing body has to be integrated into the self-image of the adolescent; the self-image from early childhood has to be re-worked or re-constructed and includes also an element of sexuality and gender (a sexual and gendered identity).
- Following Erik H. Erikson, the main developmental task of adolescence is identity formation (ibid., p. 107); as we see, today's adolescents can have difficulties with the sexual or gender component of identity and/or with the bi- or multicultural identifications within the self.

It's a phase in which the young person has to deal with the emotional consequences of cognitive development by gaining a meta-perspective in order to better understand the course of his or her life so far. Children and youngsters who have experienced tremendous losses and breakdowns in their lives will eventually find that it is difficult, if not impossible, to control their suffering: in adolescence, they understand better and see more clearly what has happened in their lives, but emotionally, this greater knowledge of one's own life can cause difficulties. Because of the desynchronisation of emotional and cognitive development (they advance quickly on the cognitive level, but they are affectively still more immature), because past experiences are perceived differently with the passage of time, or because of greater awareness of the existential rupture that accompanies traumatic events, an adolescent who has experienced adversity may suffer from effects that they can't put into context or understand.

While accepting the developmental task of separation from the parents of early childhood (and of finding themselves back in a new way during adolescence) is a crucial part of normal child and youth development, it is seen in a different light in the context of exile and in the context of foster care for an unaccompanied minor refugee. Achieving greater autonomy within adolescence means that fostered young people will seek to separate themselves from their foster parents, even if these foster parents have been a stable and secure base for the child until now. Because of this tendency to fight for autonomy in the relationship with the foster carer, the relationship can become very conflictual or ambivalent. These conflicts over autonomy (e.g. when they say they want to leave the foster family and live on their own) are sometimes expressed by wounded and vulnerable foster children at the sharp end, to the point where the foster parents no longer know what they can do right for their foster child. » [see conceptual model, p. 72 seq.; 73 seqq.](#)

Following case example can help to understand the complexity of finding autonomy and identity as a youngster in a foster family. What is needed to help the child and his family members at that time?

A CASE EXAMPLE:

Nashma, 15, who lives in Europe with her uncle from Syria, stopped going to school after being bullied because of her hijab. After a while, she isolated herself in her room and did not want to do anything. As part of a foster care intervention, a foster care worker came to the family's home to talk to the parents about this issue, where she met Nashma for the first time. When the worker asked how she was, the girl said she was sad and talked about the bullying she had experienced at school. She then told the foster care worker that she was learning the new language through an app on her phone. The foster parent (who is also her uncle) became nervous and wanted to respond to this injustice of bullying by going to the girl's school to defend her from the bullies. The social worker, who understood the tension of the parents and the situation of the girl, insisted to accompany the parent during the intervention in the school (which is normally only a matter for the legal guardian of the girl). During their conversation, it became clear that the teacher seemed to misunderstand the girl's hijab as 'winter clothes'. At that moment, the foster care worker was also confronted with the teacher's own cultural insensitivity, in the sense of having no idea of possible other meanings the hijab could have for this girl. As the communication between the parent, the teacher and the foster care worker continued, new meanings for the hijab could emerge. Afterwards, the teacher also took a different attitude towards narrowing reactions from other students about this girl's hijab. This led to a greater recognition of an important part of her sense of self. After some time, the girl returned to school.

One of the first things we can see in this case is how important it is for an adolescent to keep or find back a symbol of cultural belonging (like the girl's hijab). By being bullied and misunderstood, the girl was confronted with the feeling of being different from the majority culture in the school. This

message was conveyed by members of the class and, more surprisingly, by the teacher, who mistook the hijab for a scarf that the girl might wear as part of her winter clothing. Unfortunately, what was misunderstood is the underlying message: the girl's expression of otherness. Through this, her vulnerable sense of self (typical for youngsters in mid-adolescence) was exacerbated, and this could have made her feel like a stranger – a feeling that is already part of a migration process and is being pointed out to her again. The confrontation with this exclusionary environment led to the point where the girl stopped attending school and isolated herself. In the encounter between the girl and the social worker of the foster service, who gently asked about her well-being, we can observe the importance of this very simple, yet fundamental question. It is important to value this moment of meeting (Stern 2005), which is the basis for a relational encounter in which the girl can experience 'being seen, heard and understood'. Moreover, this moment of recognition can provide the basis for a relationship and a sense of belonging. With calmness and knowledge of the specific structures of the foster care system, the foster care worker was able to find a way to participate in the school intervention – as a safety in the background (Mahler 1975) for the girl, as well as for her uncle, who seemed to have been triggered by the injustice, he himself having also experienced flight and forced migration to another environment. In addition to this emotional safety in the background of the social worker at that moment, she also managed to act as a cultural mediator between the foster family and the teacher, who seemed to have no access to the cultural background of her pupil. Cultural sensitivity on the part of the foster care worker here means first and foremost an attitude of 'let's find out what else the hijab might mean to this girl and her family', possibly very different meanings from those given by the teacher. It is therefore not a question of the foster care worker knowing all these possible meanings; the foster care worker should embody an attitude that she cannot say in advance what it means (= an attitude of not-knowing), that they are not sure that the teacher is right and that we should therefore listen to the meaning that the person concerned gives to it (= an attitude of cultural humility in the foster care worker).

In this case, we will highlight the aspects that we believe are fundamental to supporting foster parents in providing support and freedom for their children and youngsters:

Aspects of the professional attitude:

- asking and caring for the client's well-being
- acknowledging the moment of meeting
- creating the base for a relational encounter
- provide the base for connecting and for the feelings of belonging
- gaining knowledge of the specific structures of the foster care working system
- being a safety in the background
- if necessary and helpful, function as a cultural mediator between the foster family and other institutions

» A larger version of this list can be found in the toolkit-section, p. 68

Again, some of these questions may be helpful for the foster care workers to use in reflective spaces and be used as inspirations while approaching on gaining more perspective on a case dynamic.

The search for ways to support foster parents and their children is also a search for understanding, starting from an attitude of wondering and not-knowing. This will only become possible with a reflective and holding stance from foster care workers and foster parents. The following list of three levels of deeper understanding can be used as inspiration:

REFLECTIVE QUESTIONS FOR FOSTER CARE WORKERS:

Acknowledging the situation:

- *What are your first impressions? What can you observe from the child's appearance, behaviour, language, topics, questions, etc.?*
- *How can we understand what stage of development the child is going through? What current developmental tasks seems relevant? How are separations and strivings for belonging combined by an adolescent with a background of exile and possibly trauma?*
- *What do we know about the child's past?*
- *What is the child-parent-dynamic in the foster family?*
- *What ambivalences can we see? At what moments do conflicts arise?*

Approaches in order to better understand the situation:

- *What attempts or difficulties are there in regaining autonomy? How can we observe distancing and reassurance between family members?*
- *What do we know about the child's/youngster's attempts at autonomy?*
- *How do parents perceive attempts at separation? How do they provide a safe basis for the child/young person to explore autonomy?*
- *What do we know about the child's peers, friends, activities, hobbies?*
- *What does the child/young person want? What are their wishes/desires and their anxieties?*
- *What do we know about their fears or insecurities?*

Possible ways to intervene:

- *Exchanging on parenthood as such, but additionally on parenting at moments of the intense emotions and ambivalences the fostered youngster is experiencing*
- *Exchanging on exile- and trauma-related dynamics and its critical moments*
 - *How to acknowledge that autonomy can only be achieved in relationship to (foster) parents? And are the foster parents trusting the strivings for autonomy in the foster child?*
 - *How do you experience trust (issues) and parental responsibility?*
 - *How do you observe and eventually strengthen attempts of autonomy of the foster child? Which affects do occur?*
 - *How do you experience the fine line between closeness and distance?*
 - *How do you observe your (foster) child's growing identity? On which aspects do you see growth and where do you see difficulties?*
 - *How does a foster care worker as well a foster parent is able to help the foster child to (emotionally) cope with moments of identity crisis?*

9. Developmental psychology

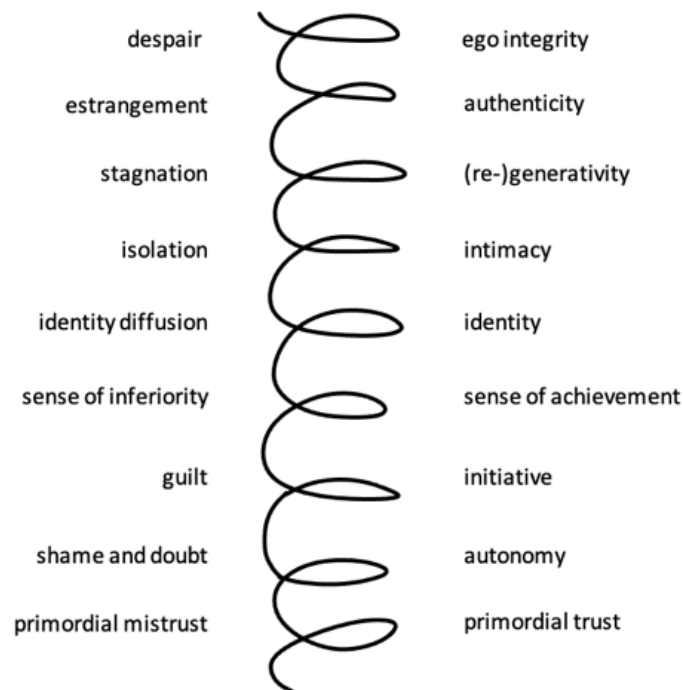


Figure 1 – ‘the course of life: developmental phases and tasks’
Clinical-psychological perspective on the Eriksonian life course theory (Meurs 2009)

In this ninth part of the practical guide, we want to talk about the challenges that arise when a child's developmental process is influenced by the experience of flight (with experiences of separation and loss) or even hindered by a traumatic event. The following illustration of the Clinical-psychological perspective on the Eriksonian life course theory (Meurs 2009) show in Figure 1 – ‘the course of life: developmental phases and tasks’ – normal developmental outcomes as well as problematic developmental outcomes. Thus, in the first year of life, the child normally acquires basic trust. When that does not happen sufficiently, as in cases of neglect and early childhood trauma, basic distrust develops instead (Erikson 1973 [1959], p. 62 seq.). In the second and third years of life, the child develops autonomy, a sense of standing

In this point the focus is more specifically on child development and adolescence and therefore on the link between the mechanisms of trauma and development.

on their own two feet, separate from but still connected to the care giver. If this is not sufficiently successful, shame arises (ibid., p.79). In the fourth, fifth and sixth years, it's all about initiative: being able and allowed to approach the world uninhibitedly, with curiosity, interest and the urge to know. In psychoanalysis, this is also linked to initial curiosity and questions about the body and sexuality. If something goes wrong, there is a feeling that one's curiosity and spontaneity are wrong, and self-censorship and excessive guilt arise (ibid., p. 97 seqq.). In primary school, from six to twelve, it is all about constructiveness: all sorts of capabilities that the child needs to learn well (learning abilities) and to be part of friendships (social abilities). If problems arise here, for example through learning difficulties or bullying and exclusion, a sense of inferiority develops in the schoolchild's self-image (ibid., p. 103).

In adolescence (12-20 years), the task is to rework the childlike self-image into a new sense of identity that will help on the road to adulthood (ibid., p. 106 seqq.). This adolescent search for identity includes identity crises, which are part of the normal variation. It becomes problematic when these crises do not pass and deepen into identity confusion. In this context, the question also arises as to what effect an injured childhood has on the search for identity in adolescence, what effect belonging to different cultural environments has on it, or what effect forced flight, and the associated traumas or experiences of loss have on the search for identity.

In young adulthood (20 to 25-30 years) one can begin to meet other people with one's identity as a more stable identity. Erikson describes this as intimacy, the ability to have deep human encounters and achieve emotional intimacy with others. This may include the ability to experience sexual intimacy as an expression of deep human encounter. Problems here create a sense of isolation: not really getting close to other adults as an adult, feeling isolated, not having close relationships or perhaps having them but feeling very lonely in them, without moments of deep connection (ibid., p. 114 seqq.). In adulthood (25 to 30 to 45 years) you ask yourself what you want to bring about generativity (ibid., p. 117 seq.): 'What do I want to create in my life, what do I want to bring into the world, what do I want with my lifestyle, my relationship with my partner, my family, my profession? Do I want to start an organisation, write books, make art, make discoveries in science and write books or articles, etc.?' These questions of generativity also include the question of re-generativity: 'Do I want to have children, bring another generation into the world?' The opposite of generativity is stagnation: adults who have no direction, many plans, but nothing really comes to fruition (ibid., p. 117 seqq.). In midlife, 'at the noon of life' and going into the 'afternoon of the life cycle', people are confronted more than before with the idea of growing older, the idea of finiteness. Some people then feel very strongly about whether the life they have led so far has been their own choice, and whether they would rather satisfy others with the choices they have made. This is

the authenticity topic. For some there is a deep crisis of alienation in mid-life: 'This is not the life I wanted to choose.' This leads some to very suddenly and impatiently let go of certain choices they have made (suddenly leaving one's chosen partner and choosing a new one; suddenly becoming very dissatisfied with one's career and then taking a completely different path).

In the later stages of life (after retirement, from 65 onwards), people look back on what life has been like so far: can I be satisfied when I look at everything all together, both the things that have been successful and the things that have been more difficult or have failed? If there remains a sense of satisfaction with life's journey, then there is ego-integrity. The opposite is the feeling that everything one has attempted in life has failed. This is the despair or hopelessness of feeling 'my life is wasted, failed, lost' (ibid., p. 118 seqq.).

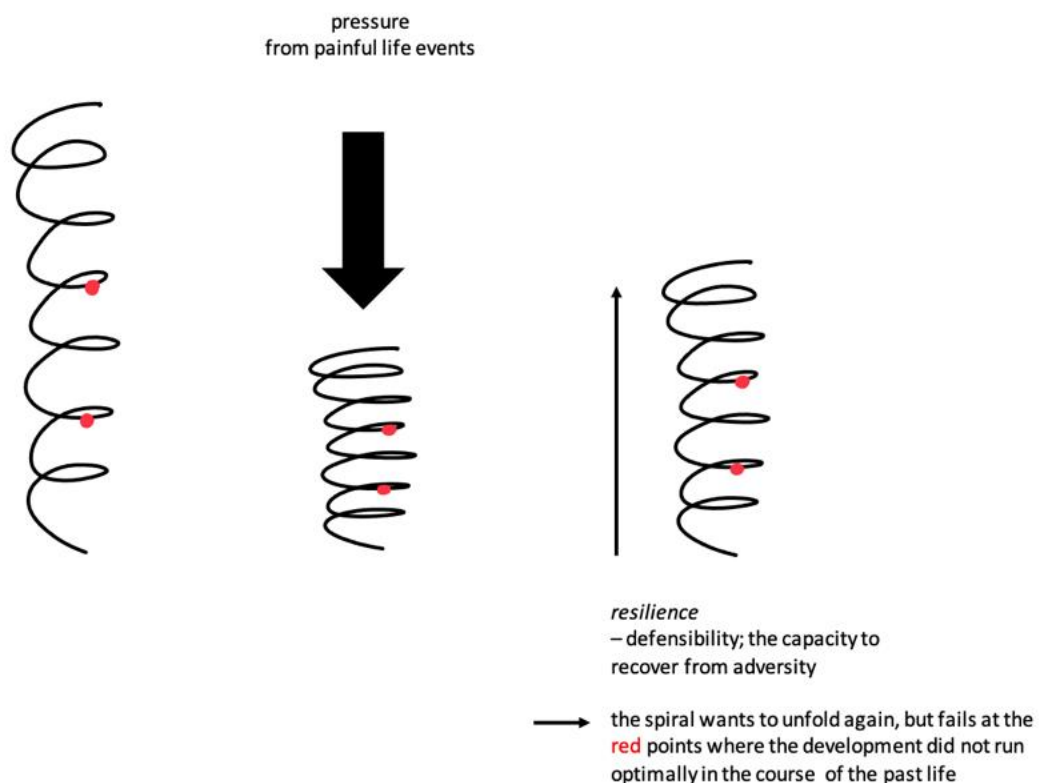


Figure 2 – Clinical-psychological perspective on the Eriksonian life course theory (Meurs 2009)

In Figure 2 we see what happens when pressure is applied to the person, to the spiral representing the life course or personality. This pressure occurs when there is a painful experience, such as the loss of a loved one, the death of a parent, the illness of a family member, a serious setback at work. We all experience such loss sooner or later. Then the spiral

is squeezed, made small, compressed. If the experience of loss is very deep, the person feels a weight on their shoulders and the spiral (the person) is compressed, sometimes even completely back to the ground. Temporarily, the person who has lost the loved one, for example because the partner broke off the relationship and one did not see it coming, will again be preoccupied with early childhood developmental tasks: 'Can I trust again, do I feel autonomous again, can I meet the world with an open mind again, do I still feel socially adept, what is my identity now that I am no longer the partner of the person who left my life, do I dare to let people in again emotionally and possibly physically (intimacy), etc.?'

There are also some reddish-brown spots in the spiral, rust spots in the spiral. Each of us has one or two of these: they are past stages of development that we did not go through optimally, stages that we did not go through as well as other phases. In itself, this is no big deal; we live with it without realising it, until the moment we have to deal with such a loss of love, and we feel that we are staying in it longer than usual. Perhaps the new loss has reopened old wounds from childhood separations. After the loss, and after a period of normal grieving, we struggle to get up, to re-engage in life with vigour and resilience. The good news is that with social support and sometimes therapy, the recent loss and old wounds (the rusted surfaces in the spiral) can be healed. Some children, however, have more than one or two rust spots; think of some foster or adopted children who have experienced frequent hurts and losses at different (nearly all) stages of development.

As the spiral (the person) bounces back after adversity and misfortune and gets up again, its (the spiral's) or his (the person's) strength, resistance and resilience become apparent.

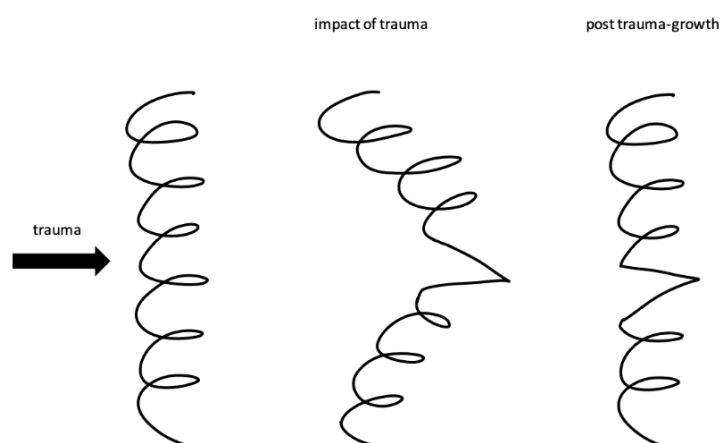


Figure 3 – Clinical-psychological perspective on the Eriksonian life course theory (Meurs 2009)

In Figure 3 we see the difference between the effect of loss experiences (the compressing of the spiral) and trauma (it causes a snap, a break or a crack in the spiral). Trauma hits people unexpectedly, unprepared; they are unprotected, and the trauma hits them head on. After the trauma impact, traumatised people also want to get back up and be resilient:

this is post-traumatic resilience or growth. If you look at the spiral in which post-traumatic growth has occurred, you will see a seemingly normal and strong spiral, but on closer inspection you will see that the break or snap that the person has suffered, is still there.

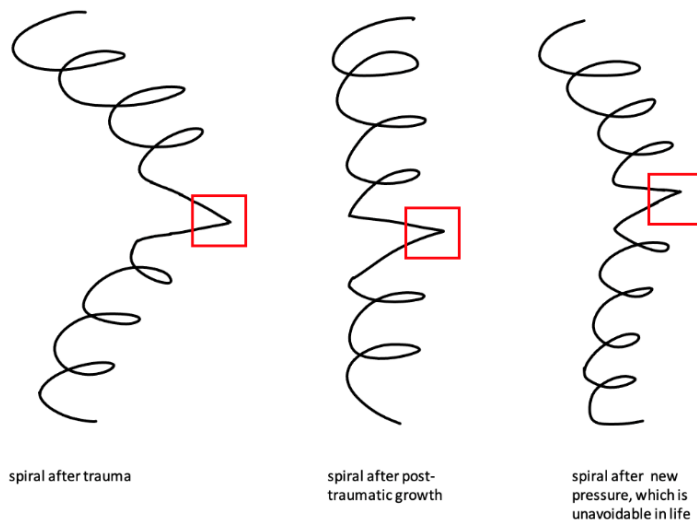


Figure 4 – Clinical-psychological perspective on the Eriksonian life course theory (Meurs 2009)

In Figure 4 we see what happens when the person who has been broken and has been made vulnerable by the trauma and/or experiences a new loss. This loss will put pressure on the broken and less tense spiral that has less carrying capacity. As a result, the spiral snaps or breaks again, even though no new trauma has occurred. People can be

very strong and resilient after an initial severe trauma, but we need to take into account that the person has less carrying capacity. A new adversity can have a trauma-effect, even if the new adversity is by no means a trauma. This is so because the spiral (the person) is weakened by the first traumatic experience. One might wonder whether certain painful experiences and the fear of a new loss experience (the possible breakdown of a foster care relationship) in young people who have been traumatised before and during the flight might not have a traumatic effect again.

Some fostered unaccompanied minors panic from this, others can move on with it, still others then break off foster care themselves. The latter attitude sometimes serves to remove the tension itself about whether they will be abandoned again by new care figures (the foster parents) and therefore experience another traumatic effect. » see conceptual model, p. 73 seqq.

A CASE EXAMPLE:

This case concerns a young teenage boy from North Africa who lives in Italy with his foster parents. He is struggling with his sexual identity, which puts him under a lot of pressure and makes him suffer from low self-esteem and being different from the norm.

When we discussed this case in the intervision group, the pressure (to find help and to find a way for the boy to get along) also became clear in the group. The mentalization-based work (i.e. empathising with and naming the unsustainable affects) ties in with the feeling of pressure. Instead of solving it directly, we took an understanding approach and asked ourselves what might be going on in the boy. How does he feel under pressure to find his sexual orientation quickly, to develop a sense of self and to develop his sexuality? These guiding questions also led us to consider what the boy might experience as he grows up. And what does it mean to develop a male identity, also in the context of what it might mean in his country of origin. It is not primarily about the answers to these questions, but rather about the understanding attitude of those who accompany and care for this boy. It is about listening to the boy's story, his wishes and his needs. It's about taking the pressure off and giving him the space he needs to orientate himself and develop a picture of who he is and who he can become. Low self-esteem is then linked to feelings of shame. Shame about who the boy is and what he wants. It's about giving space to longing and taking the time for finding words. Instead of hiding behind the shame (even as a foster parent, the person who accompanies the boy), it is about being there in the background as he tries to find his identity and it is about providing a reliable space, understanding, overcoming insecurities and strengthening hope for the future of the boy's own self-image.

The case described illustrates the difficulties young people have in finding their (sexual) orientation and how challenging and sometimes shameful it can be for the boy (and also for the foster parents and foster care workers). Adolescents can struggle a lot with integrating the sexual body into their self-image and identity (Erikson 1973 [1959], p. 106 seq.). We have

learnt that counselling in this case requires a cautious approach. We have derived the following aspects for the professional attitude of foster care workers:

Aspects of the professional attitude:

- take the pressure off
- be there in the background
- empathise with and name the unsustainable affects
- stick to an orientation towards an understanding approach or attitude
- it is not primarily about the answers to these questions, but about staying in contact with these young people and their foster parents.
- give space and listen to the young person's story
- provide a reliable and predictable space for the experience of being understood, for the development of self-image and for the strengthening of hope for the future.

» A larger version of this list can be found in the toolkit-section, p. 68

Once again, the view of the accompanying person is required, recognising and understanding that children and youngsters can be affected by traumatic experiences on their path of development. Recognising this can make it easier to find ways to support the parents to stay available for their foster children.

Guidance for foster parents who are confronted with the uncertainties of their adolescents, who are in a transitional period of development, on the way to finding their own identity and at the same time integrating their past (characterised by upheavals and losses), requires special aspects. The following list may help to orientate the approach towards an understanding of each individual case and to find new ways for intervening:

While raising these questions (or some of them) within the professionally framed reflective space of the foster care teams, there are not necessarily always answers needed – it is also about acknowledging, that there are (always) aspects an/or dynamics we will not understand.

Especially for this point, these inspirational questions need to be perceived with sensitivity.

REFLECTIVE QUESTIONS FOR FOSTER CARE WORKERS:

Acknowledging the situation:

- *What is the age of the child or young person? How can we understand what stage of development the child is going through? What are the current developmental tasks?*
- *What do we know about previous developmental stages the child has gone through? What were the achievements/difficulties? What do we know about the child's past?*
- *How do the parents understand the psychosocial development of the child?*

Approaches in order to better understand the situation:

- *Depending on the age of the child/ youngster:*
 - *Early childhood:*
 - *What aspects of trust/mistrust can be observed? (1 y.)*
 - *What aspects of autonomy/doubts and shame can be observed? (2 – 3 y.)*
 - *Childhood:*
 - *What aspects of initiatives/guilt can be observed? (4 – 6 y.)*
 - *What aspects of sense of achievement and constructivity/sense of inferiority can be observed? 6y. – Puberty)*
- *Adolescence:*
 - *Which aspects of identity/identity diffusion can be observed?*
 - *What life events occurred during the abovementioned developmental stages of the child?*

Possible ways to intervene:

- *What could be offered to the child according to his/her stage of development?*
- *How can the child be provided with a safe developmental environment in which to explore the new social environment?*

10. How do you work with your network of foster care organizations

This final point highlights the network as a basic element for the foster care workers to rely on within their work. Here we will speak about the emotional involvement due to empathy and pay attention to safe spaces, which support the foster care workers in navigating through confusing, challenging or even overwhelming moments of their work, so that their reflective stance may unfold to approach on the process of understanding a case and its dynamic.

In the tenth part of the practical guide, as the last module, we will refer to one of the basic prerequisites (mentioned on p. 7) and will concretise how foster care workers can benefit from being trained in the context of team meetings, intervision and supervision, but also through training opportunities and/or workshops. These networks can all be beneficial to foster care workers and their actual work in practice. These settings for these trainings and supervisions vary in their approach and function.

Sometimes foster care workers are not able to make time for reflective team moments, network meetings with colleagues, in-service training or supervision. In an overburdened workload, this is sometimes seen as a further waste of time. Nothing could be further from the truth. In the sense that it is sometimes necessary to 'lose time to gain space', to spend time for supervision and training in order to come back to your workplace in another (better equipped) way. The foster care worker then feels more 'grounded' in his work. This provides an opportunity to return to a calm and reflective stance and to explore new ways of supporting foster families with exiled children and young people, instead of just rushing after the facts and suggesting quick fix solutions that don't really appeal to the people involved.

Containing the containing and helpful foster care worker

describes what a professional setting such as training, intervision or supervision can offer to participants. It is about 'helping the helpers'. A foster care worker who contains the affects and dynamics within the encounter with his or her client (foster family) can, in turn, experience containment within the supervision by sharing experiences with his colleagues, by feeling emotionally understood and receiving responses. Therefore, a supervision can act as a container for the unprocessed (Barthel-Rösing & Haubl 2017) elements that may occur in the foster care worker in the course of a foster care intervention.

Speaking of working in a network, of being cared for in a network of colleagues (containment for foster carers), we need to distinguish between an internal and an external network, which foster carers can rely on for support or for cooperative and/or reflective reasons:

The external network

- is to be understood as an extension of the actual work and makes collaboration possible
- serves as a multi-perspective environment with different professionals and experts.

- is usually called upon when one's own professional knowledge or capacities and the resources of one's own institution/organisation have reached their limits
- plays an important role when cooperation, interaction or specific approaches or knowledge are required (workshops or conferences)
- allows to get in touch with colleagues from other institutions, to gain knowledge and to share experiences
- can help to find new ways of intervening within a foster family
- can also be important in linking families, parents or children to different services
- serves the feeling of not being isolated as a foster care worker or foster care service

The internal network

- makes it possible to know when to turn to whom or which actor from the external network
- consists of a team, colleagues, supervisors, coordinators who participate (in different constellations) in different team settings such as team meetings, intervision and supervision
- reflective settings such as intervision and supervision allow to embody, imagine and reflect and to be aware of the fine line between keeping distance and nearness, but also between acting professionally and acting-out (re-enacting) (here it is more comfortable to face professional limits and potentials, or to discuss one's own regulation issues or to reflect triggers, if a foster care worker wants to discuss moments in which there is a risk for losing a professional stance)
- enables to explore reflective ways, e.g. through
 - playful techniques (card games, role plays)
 - empathy exercises (change of narrator)
- can provide a training format for de-stressing with the team (e.g. a day in the mountains with moments of sharing, distancing from difficult cases and heavy workload, moments of reflection and mentalization on one's own work)

With this final tenth point of the training programme, we would like to focus on one of the indispensable settings of the network that is or should be available to foster care workers: the reflective spaces in intervision or supervision, where the worker can find relief and gain new perspectives on the case presented. How this setting serves as a thinking space is illustrated by the following case example:

A CASE EXAMPLE:

A foster carer told us the story of an early teenage boy from Angola who had lost his mother during the flight and was going to live with an Italian foster family. The foster parents were very committed to the fostering process and met with the boy every weekend, although he was still placed in a foster home in another Italian city, where the foster worker seemed very attached to the case and the boy's situation. Nevertheless, in the meanwhile the foster parents were able to build a relationship with their foster child. As the fostering process is continuing and the placement in the home in the other city is coming to an end, the foster parents are starting to worry. The boy seems sensitive, he is very calm and seems to say "yes" or "ok" to everything. He even reacted calmly to the experience of being bullied at school. When the foster mother became ill and had to go to hospital, the boy remained calm. Yet, during this time the boy had a panic attack and seemed to be reacting to the stress and anxiety caused by his foster mother's illness.

The discussion of this case in our intervision led first to the question of "how". Questions like "How did he lose his biological mother?" or "How did he get to Italy?" were of interest to the intervision group, followed by the "why": "Why is he being bullied? By asking these questions, we were confronted with a lack of knowledge, with gaps and open questions, while at the same time there seemed to be a need for understanding. This dynamic within the intervision made us realise that the boy himself must be living with all the questions of 'how and why' and must feel abandoned with no one around to give him the answers. Keeping still and staying calm could be an unconscious mechanism for the child to protect himself from further pain and further loss (or fear of loss). But within his apparent calm, the child seems to be stuck in a frozen state as a reaction to the traumatic experience of losing his mother. While we have to face the fact that in school – and in relation to the shock of losing his mother as well as the fear of losing his foster mother – the boy was unprotected against this threatening and hurtful reality, the urge to protect and help him with boundaries (against the aggression of other boys at school) seems a reasonable way to intervene,

according to the intervision group. Both the foster carer and the new foster parents feel that this would be a good way of coping. The search for possible limits for the boy as well as the urge for answers has to do with the confrontation with an incomprehensible and rather unthinkable reality that the boy has been confronted with. The intervision group seemed to reflect the dynamics within the fostering process. This moment – what from a psychoanalytic perspective would be called 'working with the countertransference of the case dynamic' – leads to the question of how it is possible to teach both the boy and his foster parents about the need to have personal boundaries. This requires more than psycho-educational approaches to what boundaries might be or might mean. For the child (as well as for his foster parents), it is about recognising boundaries. And it is about getting to know oneself, even though there may be a fear of exploring these topics. It requires a witnessing attitude and acknowledgement of what the child is going through and has had to go through in his inner world. Because of the hurtful reality of the loss of the mother and of safety, it is a question of how the parents can show the child that they will stay, that there is a bond to rely on. It requires a mentalising attitude on the part of care givers, such as foster parents and carers, who will mirror the child's feelings – even if they are not always obvious and hidden behind his or her composure or calmness.

What we can see here is that it needs a network or a multitude of perspectives and that we need to get emotionally involved in the process of understanding a case and the reality of the boy. It needs an exile-specific understanding as well as a reflective network and it needs guidance for foster parents to help their child(ren) to develop within a safe space where they can ask themselves: 'Who am I?'; 'Who do I belong to?' and 'Where am I going?' Our 10-point approach provides guidelines that need to be adapted to each individual case. Nevertheless, the approaches to specific cases are

While these questions may give inspiration to the foster care workers for approaching on understanding the case dynamic, it needs to be highlighted, that understanding is always just a process. Therefore, we want to embrace the attitude of not-knowing, as part of relational dynamics. But, while approaching on (some of) these questions with care and sensitivity, some new perspectives might arise within the reflection of a case.

a tool that can be used to reflexively sharpen one's focus on one's own professional stance and enable a more in-depth approach to case work. Finally, the following list of reflective questions can be used as inspiration for deepening understanding and using a supportive team approach:

REFLECTIVE QUESTIONS FOR FOSTER CARE WORKERS:

Acknowledging the situation:

- *What are your first impressions? What can be observed in terms of appearance, behaviour, language, themes and topics, questions, etc.?*
- *What is the child-parent-dynamic in the foster family?*
- *In what way do the dynamics of the foster family influence the work and the planned intervention?*
- *How did you perceive the meeting with the foster family?*
- *What emotions did you experience during and/or after the intervention?*

Approaches in order to better understand the situation:

1. *What thoughts/associations do you have about this case?*
2. *What thoughts/associations do your colleagues have about the case you have presented?*
3. *What thematic line emerges in your discussion?*
 - a. *What meaning could you give to hidden expressions of stress and developmental problems?*
 - b. *What affects and emotions do the dynamics of the encounter/case lead to?*
4. *Which emotions are prominent in your discussion? What are the emotional triggers?*
 - a. *What can help you to accept the fact that you are confronted with or involved in the relationship dynamics of the foster families?*
 - b. *What can help you, as a foster carer, to remain stable and/or calm?*
5. *What can help the parents to remain stable and/or to regain your composure/calmness?*
6. *What can help the child to remain stable and/or to regain calm?*

Possible ways to intervene:

- *How do you feel after discussing the case in the group? What new thoughts/ideas/perspectives did you have after the team intervision or supervision?*
- *What kinds of interventions did you collect? What do you want to bring/take to the next meeting with the parents/family?*
- *What kinds of support can be offered to the children and foster families? How can the interventions be made transparent / understandable for the clients?*
- *When will you be able to discuss this case again?*
- *How did you find the meeting with the family after the case discussion? Were there any differences in your attitude/dynamics within the family intervention?*

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Framing elements

Aspects of culturally sensitive therapeutic foster care

Culturally sensitive practice in therapeutic foster care can be highlighted in several ways and includes several points discussed below:

1. Culturally sensitive aspects of trauma-informed counselling

- Be aware of possible (culturally influenced) stigmas against psychological or educational counselling within the cultural environment of origin of these unaccompanied refugee minors and possibly within the kinship foster families (linked to the same family network and culture of origin as the fostered young person).
- Learn to talk about the cultural meanings given to the problems of foster parents and fostered young people and be aware that the meaning given to the problems by a foster care worker living in a Western culture is also culturally determined and may be different from the meaning given by the foster child or kinship foster parent. This may include the culturally influenced view of the nature of the problem, the intervention and counselling (therapy) needed, the cause and what to work towards in counselling (cultural influence on illness narratives).
- Be aware that thinking in terms of 'disorder' or that focusing individually on the child, or the nuclear family of the foster parents is a western cultural way of counselling. Difficulties in parenting and child development are sometimes attributed to or explained by very different concepts in other cultures of origin, not all of which a counsellor should or can be familiar with. However, it is important that the counsellor can approach these explanations with an attitude of interest and 'not-knowing', without thinking that the Western view is the scientific one and the other is a matter of superstition or mere magic. What a foster care worker needs is cultural humility.

2. Cultural models of normality and pathology

- Culturally sensitive counselling does not mean that everything has to be culturalized: cultural meanings are dynamic and provide a basis for understanding difficulties and seeing opportunities. But culture is not everything or the only thing,

and certainly not a sacred cow. In fact, it is concrete families and individuals who come to use the cultural meaning of the difficulties in raising the foster child, to leave out certain cultural meanings and to promote others. In this sense, the three levels of culture-social group-individual are always intertwined. We should avoid culturizing (understanding everything only from a cultural point of view) or psychologising (not considering other dimensions than the individual or the smaller nuclear family).

- Be aware that there are culturally different views of 'the self' and the goals one should set for oneself in life. Western perspectives emphasise the autonomous self; other cultural perspectives are more likely to see identity as socially determined (the relational self). One can emphasise one's own development and achievement (and encourage a foster child to develop themselves, to 'stand out'), but also be aware of how that foster child is busy 'fitting in', fitting into a system of loyalty (loyalty to family and culture of origin).
- Also continue to pay attention to cultural norms and interpretations of developmental tasks. What do the supervisors, the foster parents and the foster child expect from the foster placement? Who can assist the child's development? How do they think about autonomy for one's self and loyalty to others?
- Also consider shame around difficulties in foster placement. An "honour culture" may prevail. Can you question the significance of the foster parents' shame about losing face when they have educational problems, especially when they come from a similar cultural background as the child in question and when they have familial ties to the biological parents of the child? Can you also talk about guilt of the foster parents when their foster child is not doing well and about guilt in the child (survivor's guilt)?
- Emphasise narrative ('storytelling') attitudes by helping them talk about their sense of self, the social roles they play and the views they have about normal and problem development or education.
- In all these matters, remain 'culturally informed' (having an eye for cultural meanings) and not-knowing (i.e.: open and aware of one's own Western position as a counsellor).

3. Working culturally sensitive also means being mindful of intersectionality:

- the foster parents can be simultaneously adults, Muslim, European, of a different origin, male/female, parents and/or foster parents, members of a community,

possibly also distant relatives of the foster youth, etc. These are very different positions and roles, sometimes even conflicting roles and positions.

- Another example is that the foster parents may be Christian/humanist, Flemish, have a certain idea of foster care, but do not know what the flight-specific trauma and grief processes do to their family and do not know how they should deal with expressions of belonging to or referring to a different cultural and religious origin in their foster child (e.g.: what does it mean for Christian parents to have a young person affirming himself as Muslim in the family?).

4. The foster family, like the school, for example, is an important partner in the parenting network around a foster child

- How does the fostered youngster speak about the foster family and the school? Does the young person give the impression that these families and the school mitigate or rather compound the problems? Do the foster parents and the fostered child, or also the fostered child and the teachers, see each other from a deficit view (only what one lacks in the other) or rather from an assimilation view (the child with a refugee background has to adapt in the family and at school like the other children) being blind to the specificity of the vulnerability of these children and the pitfalls of such foster placements?
- A colour-blind attitude in counselling arises when, for instance, teachers, psychotherapists but also (foster) parents do not want to consider the specificity of such a child and do not want to make an exception based on cultural origin or flight-specific traumata. Then one keeps expecting the same things from these children at the same time or in the same rhythm as from other children. This creates precisely what one wants to avoid: cultural misunderstandings, more discrimination because one is blind for their specific needs, etc.

5. Foster care workers understand the foster family from the perspective of universal challenges and developmental tasks, but be conscious that these universal elements (may) be culturally coloured

- Unaccompanied minors universally need protection and closeness, but also guidance, a strong hand that leads them and sets limits. Universal is also the perception of parenthood as a source of agency: one wants to give these young people the right upbringing (but the fostered young person in question may also need a specific approach because of the specific life history of the refugee adolescent, or because of suspicion and excessive vigilance or suspicion towards

authorities, teachers, supervisors, etc.). Universal also means, as a parent, wanting the best for your foster child and, as a child, wanting to make your parents (possibly also your foster parents) proud.

- Cultural influences are also present in how one sees the relationship between parents and children. Possibly foster care workers and foster parents with a background of exile have a different view of what should happen between parents and child. Culturally influenced is also how these young people cope with the loss of the attachment relationship with their parents or with separation from parents. Additionally, there are culturally informed forms of mourning and expression of grief and loss.
- Also known in refugee families are 'silencing' and 'active forgetfulness': people do not talk about the country of origin and what they left behind, in order to keep it bearable here. It is possible that the children and/or the foster parents want them to speak about these aspects. It is good to know that in some cultures these things cannot be talked about just like that, no matter how much need there is. One possibility for the foster care worker then is to emphasize caring for each other: helping each other to bear the loss experiences and traumata in silence with and for each other, at least for a certain period of time.
- Another exile-related theme that may come into play in these foster placements is survivor's guilt and falling short of family reunification expectations.
- Social stressors in such cases: discrimination at school, feeling like an invader or intruder and having to conform to the wishes of the outside world, feeling not really taken seriously, the child's feeling of being a stranger in the foster family, and the lingering uncertainty that one will eventually be sent back when growing up or becoming an adult anyway.

6. The attachment to the origins and the integration orientation

- Coping mechanisms framed by culture of origin: turning to religion rather than a psychologist (as would be expected in a secularized north-western perspective); showing identity through characteristics associated with other religions.
- Emphasising continuity and re-valuing the cultural identity of origin = origin attachment or the desire for interconnectedness with origin (remaining woven into the culture of origin), through keeping up to practices from the country and family of origin.

- Having an eye for hybridisation (hybrid identities) or métissage: how does the fostered child intertwine diverse cultural worlds, what succeeds and what fails in coming to terms with these hybrid identities?
- How do the adolescent and the parents deal with bicultural identities, or, with affirmation of aspects of identity that are different from those of the parents?
- In what ways are parents and the young person focused on social embedding?

7. Supporting adolescent development and parenting in foster care: some aspects of multiple cultural influences

- Which elements of youth and identity are well understood and accepted by parents, which are not?
- How can a foster care worker help change something between foster parents and foster child, each seeking recognition but also hitting a wall. That wall is there because of trauma, cultural otherness (strangeness), loyalty to the biological parents, shame and guilt about shortcomings along both sides, unspoken histories and expectations.
- How can foster care embed a family with parents and a foster child within a network of care, in order to support parenting and provide more opportunities for child development, rather than offering individual child therapy or family therapy for this nuclear family (the latter would be a way of working embedded in North-Western European culture).
- Following on from this point, one can also understand the whole of this FORM project on setting up trauma-sensitive and mentalising (reflective) networks in which foster families and foster children can be held or contained, as a cultural choice: a cultural choice different from the traditional Western emphasis on family therapy and individual therapy. In these more individual therapies or nuclear family therapies, the implicit (and consequently culturally influenced) assumption is sometimes made that parents are responsible for all they experience within their foster families. FORM rather wants to install a community or a network of foster care support around these families, a containing and reflecting network around the foster families. In the FORM-project, the foster care workers themselves are also supported. The latter serves to ensure that, as foster care workers, they are not alone with these families and can obtain the necessary attitude in trauma-sensitive, culture-sensitive, network foster family-specific and age-specific foster care.

8. Attention to aspects of power dynamics between majority-minority in the relationship with a foster family:

- Sometimes as a foster care worker, from an un-reflected cultural embeddedness in western perspective (Eurocentric) and especially from a WEIRD perspective (western, educated, industrialised, rich, democratic), one can exert undue pressure towards verbalising trauma and unbearable loss, towards individual or system therapy, or by emphasising deficits of foster parents and foster child. Rather, what is preferable is: (a) respecting silencing and adhering to culturally embedded ways of mourning rituals, (b) embedding the foster family in a development-oriented and resilience promoting collaborative network of care and school/education, and (c) continuing to mentalise about this family. The mentalization ability of the foster care workers can sometimes get lost, which is also why supervision of the supervisors is so important (intervision, supervision in which the foster care workers are helped to deal with moments of not-knowing and of impotence, as well as with the tendency to fall back on mere tips and tricks, for instance when one can no longer find the peace of mind to keep the parents and the foster child in mind).

Aspects of the professional attitude

The complexity of family dynamics, more specifically in the case of foster families with children with a background of flight and exile, requires a professional attitude from the foster care workers, that enables to acknowledge some of the dynamics that are described earlier on in the conceptual model and the practical guide. Following list of questions might help a team of foster care workers to reflect on moments of intervention and interaction:

- **creating a safe and trustworthy environment**
 - providing a reliable and predictable space for the experience of being understood, for the development of self-image and for the strengthening of hope for the future
 - planning regular appointments and a reliable structure of guidance and being transparent about the help and the intervention process
 - acknowledging the moment of meeting and asking and caring for the client's well-being
- **being aware of your professional role**
 - gaining knowledge of the specific structures of the foster care working system and of your own role within the foster family system

- the foster care worker is the one who mediates by helping people to re-connect, by helping to understand ambivalences and very difficult moments in the foster process as normal processes in complex human relationships
- being aware of pre-therapeutic and mediating quality of the intervention
- being aware of the limits of the professional role and communicate them to the foster family
- making use of a supportive environment
 - reflective spaces (like team meetings, intervision, supervision)
 - helping organisations (like supervisors and psychologists, psychotherapy centres, knowledge centres, etc.)
- **being empathically involved²**
 - being there and being professionally involved and caring
 - giving space to hurtful feelings and being aware of hidden signs as well as glimpses of hope
 - functioning as a container and helping to find words for expressed or even underlying contradictory feelings of strong intensity
 - empathise with and help to find a symbol or name for the unsustainable affects of the family members
 - listening and approaching in order to understand, even if not everything can be fully understood
- **building a safe and trustworthy relationship**
 - paying attention to signs of the search for connection, establishing it by being present and listening
 - recognising that trust is needed to build a relationship and keeping in mind the guiding question of “How does trust develop?”
 - elevating an encounter to a healing relationship by trustworthiness
 - providing the base for connecting and for the feelings of belonging
- **functioning as a reliable person (for the foster parents)**

² Gerspach, M. (2000). *Einführung in pädagogisches Denken und Handeln*. Stuttgart: Kohlhammer., p.97; Katzenbach, D., Eggert-Schmid Noerr, A., Finger-Trescher, U. (2017). Szenisches Verstehen und Diagnostik in der Psychoanalytischen Pädagogik. Eine Positionsbestimmung. In A. Eggert-Schmid Noerr, U. Finger-Trescher, J. Gstach, D. Katzenbach (Ed.). *Zwischen Kategorisieren und Verstehen: Diagnostik in der psychoanalytischen Pädagogik*. Gießen: Psychosozial, 11-38.

- acknowledging the different layers of the psychodynamic and being a safety in the background
- signalling acknowledgement, when there is something that is bothering the child and taking away the pressure of solving it immediately
- mentalising and mirroring the parent's engagement and helping them to build the capacity to mentalise
- support the parents, by helping:
 - staying calm in difficult situations and strengthen the capacity to self-regulate
 - signalling that strong feelings pass, that there can be a flow from negative affect towards more positive affect and that healing is possible with time and with an approach of carefulness
 - finding a healthy and constructive way for expressing feelings
 - finding meaning for the feelings that are expressed: feelings are a way to communicate, no matter how difficult the feeling may be
 - regulating by finding a way to calm down in moments of stress and misunderstanding, and, coming back to a state of calmness and safety
 - to maintain a caring and protective environment for the child and to stay available for the child and to show that the child is being cared for
 - to identify regulation points to be handed back to the parents, for example moments that show how foster family members (parents) try to understand their difficult moments and those of others (among which the foster child)
- approaching further help:
 - supportive systems and interactions (like a parental exchange, peer-to-peer support for the child, moments of enjoying an activity in the midst of conflictual phase in the family cycle, etc.)
 - psychoeducation (workshops, advisory centres, etc.)
 - if necessary and helpful, function as a cultural mediator between the foster family and other institutions
- **functioning as a third (as the one who creates some space between the foster parents and foster child, in moments when their interaction has become difficult)**
 - learning something about the child's aspirations, dreams and needs and helping the parents finding ways to help the child to express her-/himself
 - trying to find ways of how to translate and/or mediate within the family
 - helping to (re-)establish a bond between the care figures/foster parents and their foster child/ youngster

- help the foster parents to convey their child that there is the possibility to fall back on reliable care givers
- considering together that the child/youngster needs to feel understood
- **stance of not-knowing**
 - for the moment, there is no need for words and no explanation, just be present in the family, keeping in touch
 - being aware of signs that show us something that cannot yet be expressed in words (e.g. the boy's emotional retreat and unavailability)
 - acknowledging the inner state of the child
 - by being there and conveying participation
 - by helping the parents to signal their child/youngster that they are available, and that the child/youngster is not left alone with her/his situation
 - it is not primarily about the answers to these questions, but about staying present
- **hold on to an understanding approach through maintaining a reflective stance**
 - accepting the emotional states within the foster family – even if they are not always clear, or even if they are confusing, ambivalent and/or overwhelming
 - acknowledging (direct and indirect, obvious and underlying) expressions of emotional states that represent different parts of the inner reality and the life-experience of the child
 - adopting an approach that is focused on healing and on reparation through togetherness or connectedness, thereby:
 - reflecting with the team and making use of supervision, about how to work towards continuity and re-connecting within the foster family
 - emphasising the value of remaining present and staying emotionally available for the family and for the fostered children and youngsters
 - keeping in mind the question of what must have happened to the child that she/he experiences such pain: not so much what the symptom means, but primordially what the symptom tells us about what the child has been going through in the past and what the child is suffering about for the moment
 - sticking to an orientation towards an understanding approach or attitude

- **witnessing stance³**
 - acknowledging the experienced truth and pain of the child
 - acknowledging and believing the difficulties that the child is feeling inside
 - listening and giving space to hurtful emotions and contradictory feelings
 - validating the affects and emotions

Overview of settings

Training in which both foster parents and foster carers learn about the specific nature of the foster child's attachment problems is of paramount importance. As foster carers will be called upon by foster parents for advice on specific parent-child dynamics, behaviour or needs of their child, as well as for recommendations on further resources, it is first necessary to be informed about the variety of services and institutionalised support available:

Support system for foster parents:

- **Linking families to resources** such as mental health services (with expertise in infant, early childhood and family trauma), welfare services, social services, domestic violence services, refuges, early intervention services, agencies specialising in trauma.⁴
- **providing and/or linking foster parents to psychoeducational workshops** on unaccompanied children and their developmental profile, on Post-Traumatic Stress Disorder, on communication abilities for the foster parents, and on difficult behaviour (aggression, self-injury, etc.), in order to reflect on a meta-level but also to learn from other parents
- **organising an informal parental exchange** to create a safe environment for sharing experiences, helpful tips and to feel understood as a foster parent

³ Benjamin, J. (2019). *Anerkennung, Zeugenschaft und Moral*. Soziale Traumata in psychoanalytischer Perspektive. (E. Vorspohl & C. Trunk). Gießen: Psychosozial-Verlag.

⁴ Seitzinger Hepburn, K. (n.d.). Tutorial 7 – Recognizing and Addressing Trauma in Infants, Young Children, and their Families (Center for Early Childhood Mental Health Consultation's (CECMHC) Best Practice Tutorial Series). Retrieved from: <https://www.ecmhc.org/tutorials/trauma/index.html>, last access: 14/09/24.

In order to be able to provide a safe ground for the fostering intervention, foster care workers need and benefit from a knowledge-based and evidence-based safe ground for themselves:

Support system for foster care workers:

- **participating in `expert`-groups** to exchange knowledge and practical experiences
- **exile-related trauma-sensitive training**, with an emphasis on gaining knowledge, as well as on reflecting about specific questions of enhanced foster care
- **regular team-meetings**
- **regular supervision and intervision** to not only exchange on case-related questions, but also to strengthen team capacities and feeling more at ease » for a how-to see point 10, p. 55 seqq.; toolkit-section, pp. 84 seq.
- **knowing about the aspects of a culture-sensitive foster care** » for a how-to see toolkit-section, p. 63 seqq.

Different settings provide a collaborative network for foster parents and a safe environment for foster care workers. Here it becomes possible to maintain a multi-perspective process of understanding and navigating through family interventions and the needs of children and young people. The following is a list of reflective spaces that will guide the way through the elements of practical experiences and challenges from professional encounters with foster families that have already been described before:

A list of reflective spaces for professionals in foster care work:

- **Trainings and workshops**
 - can be beneficial regarding knowledge transfer on specificities of childhood and adolescence in the context of exile and trauma
 - allow to bring knowledge-based exchange on a practical level where interventions, questions, similar experiences and/or different tools can be shared
 - can be used as an extension to one's own institution or organization and therefore lead to alternative ideas on coping with specific dynamics
- **Team-meetings**
 - allow to share practical experiences and exchange on knowledge and conceptual understanding
 - enable to identify the institutional frame, which plays a role on how a professional can work and moreover to adapt this frame to the needs of the team

- function as a space where the workload (like administrative tasks, cooperation, round tables etc.) – which differs from case to case and from time to time – can be adjusted by sharing tasks
- offer a possibility to share more emotional triggering experiences in a familiar space with colleagues
- Intervention
 - Serves as a more safe and intimate space, without being protocolled or authorities being present (that sometimes can make it difficult to address certain aspects of the working environment)
 - can – more in depth – frame feelings of uncertainty, powerlessness and of being touched or stuck in a trauma dynamic, not knowing how to help or how to handle dysregulation
 - enable the group of colleagues to function ‘as a third position’ (beside the foster care worker and the foster family), thereby bringing in an objective perspective on the shared questions and on the dynamics of a specific case that is presented in the intervention
- Supervision
 - usually is accompanied by a specialized professional supervisor (an external person)
 - serves as a safe space for sharing feelings of uncertainty, hopelessness, not-knowing, emotional overload, or dysregulation, that are part of the foster care work
 - also, here the team members (the group) and the supervisor are in the position of ‘the third’, that brings in another perspective
 - through processes of mentalising the actual care work can be better understood, by acknowledging and emotionally processing the most difficult affective-relational dynamics within a certain case that is presented in the group supervision
 - finally, this supervision setting helps to understand latent (underlying) dynamics and unconsciously expressed needs or phantasies of the foster child as well the parents

- therefore, it enables the group of workers to take the latent expressions into account during processing through and reflecting upon family interventions; supervision enables to find different, alternative ways of intervening

	Trainings and workshops	Team-meetings	Intervention	Supervision
setting definition	<ul style="list-style-type: none"> • Intra- or inter-institutional • knowledge transfer • exchange on a practical level 	<ul style="list-style-type: none"> • Internal • knowledge transfer • exchange on a practical level 	<ul style="list-style-type: none"> • Internal (and/ or external) • (inherent knowledge transfer) • exchange on a practical level • serves a safe and reflective space • no a specialized professional needed (an external person can be beneficial) 	<ul style="list-style-type: none"> • Internal (and/ or external) • (inherent knowledge transfer) • exchange on a practical level • serves a safe and reflective space • accompanied by a specialized professional supervisor (an external person)
benefit	<ul style="list-style-type: none"> • sharing practices on how to cope specific dynamics • extension to own institution • gaining expertise 	<ul style="list-style-type: none"> • sharing practices on how to cope specific dynamics • identifying and adjusting the institutional frame • sharing tasks and workload 	<ul style="list-style-type: none"> • sharing practices on how to cope specific dynamics • can frame feelings of uncertainty, powerlessness and of being touched or stuck in a trauma dynamic, not knowing how to help or how to handle dysregulation • group of colleagues to function as a third, objective perspective on a case • processing on mentalizing 	<ul style="list-style-type: none"> • sharing practices on how to cope specific dynamics • frames feelings of uncertainty, powerlessness and of being touched or stuck in a trauma dynamic, not knowing how to help or how to handle dysregulation • helps understand latent (underlying) dynamics and unconsciously expressed needs or phantasies of the foster child as well the parents • enables the group of workers to take the latent expressions into account while processing through family interventions/ finding different, alternative ways of intervening

Making use of institutional setting and of collaborative networks

- Making use of the network and knowing *when* to address *whom*
- Nourishing networks and identifying roles of cooperation partners (like judges, schools, teachers, mentors, psychotherapists, other care workers)
- Networking on:
 - exile-related and trauma-specific dynamics
 - development-specific dynamics that lead to stress and tension within foster families
 - on the dynamics of extended family relationships (kinship relationships) in a transnational exile-perspective
- Acknowledging the own professional role and its function for the clients
- Gaining distance (in a sense that the setting can be used as a `third´ and objective position) to obtain knowledge through the process of understanding
- Improving on self-help techniques to be able to react calmly and to better self-regulate
- Re-adjust your own role as foster care worker, based on the golden rule that helping to regulate tensions and thereby helping to re-establish a relationship are the first two steps in guidance for complexly traumatized youngsters, so that in a later phase reasoning and working through can become possible for the fostered child and its foster parents.

Practical elements

How to: Regulation

Being there:

- In moments of extreme emotional overload, or when the child's fear of abandonment toxifies the actual relation to another person (the foster parents), remaining present or 'remaining there' can make the difference for the emotional balance of a foster child.

Giving space to affects and emotions:

- In a moment of high tension, it can be helpful to acknowledge affects and emotions. This does not mean letting the child or young person get lost in exaggerated feelings, nor does it mean finding rational explanations for behaviour. It means recognising the expression of anger, rage or panic. At this stage there is an acceptance of not knowing. There is no need to label or understand in that first moment of overwhelming emotion. It is about giving space to calm down.

Referring to the present moment:

- The unpredictability of psychic triggers can suddenly destabilise or disrupt a child's inner life and lead to an emotional tsunami of experienced pain and existential anguish. Bringing the child emotionally out of the dissociation and bringing the child back into the present moment can also be a tool for the foster care worker.

Providing orientation⁵:

- In moments of dissociation, panic, rage or aggression an immediate, quick de-escalation is needed. The first step is interruption. It can be a form of irritation like clapping your hands, calling the child by his or her name and eye contact. It is an approach without physical interaction. Yet, it is about neurobiological cues that will give the child the opportunity of reorientation.

⁵ Goettl, C. (2021). WENN DAS EISEN HEISS IST - WHEN THE IRON IS HOT. Uploaded: 30/08/21.
<https://www.youtube.com/watch?v=dxSG54RV8Cs>, last access: 17/01/24.

- Here lies the possibility of pausing the tension and offering the child the opportunity to evaluate whether the tension will continue or if the child takes advantage of the offered support in form of pausing together.

Allowing definition⁶

- After creating a moment where the tension (anger or panic) is being interrupted due to the irritation implemented by the care worker or parent, the child or youngster will (within seconds) unconsciously acknowledge the offered gestures.
- In that slight moment the nervous system of the child registers bodily expressions (relaxed and harmless), gestures (the formal step back, a rotated upper body, visible and mid-centred hands), the intensity of the voice, a friendly open gaze of the other. It is important to show that you are no threat, but that you are there to offer support. A definition of the recognized and registered appearance will follow. The child will define whether the person seems trustworthy or not.

Offering a break⁷:

- The care figure (parent or foster care worker) will then find words to open up the opportunity to change the environment together (e.g. leaving the room together) and more important to establish a connection (trust and relation), as a base from where further steps (rethinking, finding words, etc) can be made.
- Physical exercises, like movement or breathing and relaxation exercises, can help the child (who is flooded by his or her affects and emotions) focus to on the actual situation.
- It is important to consider that a direct speech can break the fragile connection. Playful ways of indirect speech (or mirroring can help to establish the connection).

Providing ambivalence tolerance⁸:

- While approaching in the actual moment of tension through above mentioned techniques and accepting not-knowing (e.g. the root of the child's behaviour), it can be helpful to remember that anger is secondary emotion, to face reality and to embrace the

⁶ Ibid.; Goettl, C. (2023). Mut zur richtigen Deeskalation in brenzligen Situationen. Uploaded: 31/03/23, https://www.youtube.com/watch?v=9J_G30qSfOU, last access: 17/01/24.

⁷ Ibid.

⁸ Meurs, P., Poholski, C., Rickmeyer, C. & Lebigier-Vogel, J. (2019).

Die Anziehungskraft des Extremen in Zeiten der Wandlung und Wanderung: Islamische Radikalisierung aus einer psychoanalytischen Perspektive. In P. Wahl (Ed.). *Spaltung – Ambivalenz – Integration*. Göttingen: Vandenhoeck & Ruprecht, 52-89.

(sometimes very small) ‘glimpses of hope’. Reconnecting with more positive feelings such as hope helps make negative feelings such as despair more bearable, less dominant.

How to train regulation on the long term:

Implementing structures:

- Predictable and trustworthy structures (regarding time, space, and persons) can help to prevent a person (the foster child, the families, but also the care workers) from feeling overwhelmed and powerless. Routines and rituals can be helpful.

Counselling for foster parents:

- Sometimes a third and objective perspective can shed light on forgotten or overshadowed aspects. Counselling for parents on their parental capacities or discussing emotional difficulties they might be facing can ease the tension with the parental-child-dynamic and can be a helpful tool (encountered challenges: creating trust with each worker and the foster carer, difficulty understanding and utilising the role of the psychologist, and difficulty with translators/interpreters that might be too intrusive).

Recommending further external settings:

- Moreover, informal parental-exchanges, psychosocial support, psychotherapy, etc. help cultivating a network for foster families.

How to regulate as a professional:

- Identifying triggers and tensions
- Giving space to the affects and emotions
- Stepping back from the moment of tension
- Providing orientation
- Let yourself be mirrored (by guided settings, by colleagues, in intervision or supervision)
- Get into communication and connection in team settings

Interventions in the foster family support system focus on how to help the child bounce back after adversity and how to help the child regain resilience; the same is true of interventions for foster parents.

How to: (New) attachments

Inspirational list as a guiding point for the foster families:

- acknowledging resilience in a sense that there already is a relationship
- identifying small bridges to overcome the loss of epistemic trust
- nourishing the seeds that have been set and see which bonds or common aspects have brought joy, peace, and moments of understanding
- realising that the current bond (or potential bond) can be a starting point for further processes of working through losses and traumata and for development enhancing interactions within the foster family
- surviving the difficult moments of being pushed away (by extreme reactions of the child) through ambivalence tolerance (a knowledge that these moments of being pushed away belong to the foster process)
- asking 'How to be useful?' in moments where it seems as if the child or youngster will not be able to stay in the relationship with his foster parents and/or will not receive any help or contact
- balancing distance and closeness (Rössel-Čunović 2018)
- recommending groups with other foster parents, with a psychologist as facilitator (encountered challenges: lack of participation, low attendance numbers, foster parents mostly focus on practical rather than behavioural or emotional difficulties)

An inspirational list for the foster care workers:

- identifying your own role within the family helping system (which dynamics occur and with what questions are you being addressed with)
- making use of the mirroring capacities of your team (in intervision and supervision)
- reflecting emotions and affects you perceive within the dynamic of a family intervention, and clarify similarities and/or differences in emotions between the members of the foster family
 - if being triggered, ask yourself, if it comes from the dynamic or from elsewhere.
 - ask 'How can we see lies, anger etc. as something we can work with?'

How to: Mentalizing

Children and young people with attachment trauma or breakdown, and refugee children who have experienced a loss of trust, present particular challenges to their foster carers. Because of this vulnerability, fostered children need foster parents who can deal with these traumatic

experiences, and they need a collaborative caring network around the family. It takes more than good enough parenting to succeed: foster children need a special kind of sensitivity and responsiveness to their needs.

A recommended source of mentalization-based approaches is the well-researched work of the Anna Freud Centre in London (UK) with its therapeutic *Mentalization Based Treatment* (MBT)⁹ from which some basic support elements can be transferred to a mentalization-oriented approach in foster care, as the main focus is also on building relationships in order to gradually stimulate a mentalization process. Although the MBT training programme – in contrast to the pre-therapeutic approach of the FORM project – is specifically designed for the therapeutic setting, it also refers to the recognition of a professional attitude as well as to support in the development of the mentalising capacities of professionals.¹⁰

Some of the important aspects for a mentalization-supported attitude for accompanying unaccompanied fostered minors are summarised here:

- engagement, interest, warmth and authenticity of the professionals
- high levels of structure as well as consistency, coherency, predictability and reliability approach
- focus on (attachment) relations
- maintaining a not-knowing stance and a process-oriented approach (the foster care work is about bringing foster parents and foster child back together again, reconnecting them, rather than on exploring traumatic backgrounds, etc.)
- validating emotional states and not labelling unilaterally
- relying on teamwork

Following list may give orientation of finding back to a mentalizing stance during moments or situations of family interventions in foster care work:

⁹ <https://www.annafreud.org/training/health-and-social-care/mentalization-based-treatments-mbt/mentalization-based-treatment-adults/about-mbt/>

¹⁰ A Quality Manual for MBT by Prof Anthony W Bateman Dr Dawn Bales Dr Joost Hutsebaut: chrome-extension://efaidnbmninnibpcjpcglclefindmkaj/https://d1uw1dikibnh8j.cloudfront.net/media/19065/a-quality-manual-for-mbt-ed-sept-2023.pdf

How to maintain or finding back a mentalizing stance:

- giving space for the child to express feelings and release tension, for example by:
 - physical activities / movement
 - drama classes
 - dance- or music classes
 - or other individual aspiration
- recognising and acknowledging the affects and emotions
- recognising and acknowledging emotions, needs, thoughts, reasons, phantasies as aspects that are connected to tensed behaviour
- keeping a distance towards aggression (without re-acting towards the aggressive youngster)
- open a potential place for understanding through realising, acknowledging, describing, envisioning, remembering
- make use of creative ways to communicate with the child or youngster, for example by:
 - using metaphors » see toolkit-section, p. 41
 - implementing role play » see toolkit-section, p.42
 - painting and creating
 - utilising building blocks, dolls/puppets, play figures

Reflective parental functioning and mentalizing is helpful in re-establishing a constructive parent-child relationship, but also enables the child to develop and nurture relationships with his or her environment (e.g. school, peer group, etc.). Over time, the child can learn from this experience and internalise these moments into more constructive coping mechanisms. Mentalization will be a helpful 'tool' for the child or young person to process emotions, to gain a better understanding of what is being felt inside and, as a further step, to learn that there are ways to overcome hurtful or overwhelming emotions and to return to calm or joy. This is why a child needs to be taught this process of mentalization by care givers. However, as parents can be drawn into the dynamics of overwhelming emotions, confusion or contradictory behaviour, they also need to be offered a mirroring other and a safe space to mentalise their experiences. To some extent, foster care workers will help to create a safe space for reflection, to help parents to regain balance, to open up new perspectives and to evaluate certain situations in order to find alternative ways of coping. However, as this can be an overwhelming task due to the dynamics they will also come into contact with, it also requires a safety net for them as professionals.

A short guide for guiding the foster care workers:

- finding orientation and answers by making use of safe spaces to get contained and mirrored by colleagues of your team and by a supervisor
- asking yourself what can help you in difficult moments with foster families
- clarifying professional limits and potentials
- Ask which network can help
 - asking for help from authorities
 - asking for cooperation with other institutions (e.g. how can we think about what the teacher in school can do for the fostered child, in a different way from what I can do for the child in my role as a foster care worker) or with colleagues of other professions (e.g. transferring a client to a psychotherapist: when and to what end?)
- linking parents to educational workshops, parental exchanges, or parental consultations, to help them to reflect on a metalevel but also to learn from other parents
- linking parents to mentalizing trainings or psychosocial settings

To create links and to know who to address when, is a step to take, if further support becomes necessary. Nevertheless, the mentalizing stance will help to stay emotionally available during difficult moments or phases.

SELFCARE

The SELFCARE section of the Anna Freud Centre is particularly worthy of mentioning here, as it contains a particularly well-developed section that provides guidance on the fundamental aspects of the mentalization-based approach, such as regulation, by offering various well-chosen techniques and strategies for self-care.

Some of these strategies can be directly passed on by foster parents to their children (aged 11 to 25) and can be incorporated into the daily life of families (such as hobbies and activities, healthy living and physical health, social relationships, conversational learning, etc.). They can also be integrated into a foster care intervention.

You can find inspiration on their website: https://www.annafreud.org/resources/children-and-young-peoples-wellbeing/self-care/?gad_source=1

Additionally, you will find here a selfcare-booklet:

<https://d1uw1dikibnh8j.cloudfront.net/media/15030/my-self-care-plan-secondary.pdf>

How to: Symbolizing

Most traumatised children can be reached through techniques such as play activities/therapies, techniques in which pictures and/or verbal skills and narratives play an important role. After trauma and dehumanisation, symbolization through play, drawing and storytelling is of great importance. It takes time to find oneself in a narrative.

Some technical tools:

- A lot of work with unaccompanied minors is of the *stabilising kind*: helping the child to contain his inner stress, to hold or contain the emotional turmoil that is an effect of the traumata experienced.
- Children and youngsters can be helped by *playing, drawing, creating visual materials and writing diaries*, all of which are age-specific ways of expressing their own experiences.
- Recommend a *storybook for the foster parent* to utilize in case the child is of young age. This can help the child understand his or her role as well as to find word, symbols, meaning for understanding the different relation to the biological parents and the foster parents.
- Create a *visual timeline*: this can help the minor re-situate and bring together the past and the presence as well as truth and safety.
- A *family narrative* can make it possible to find symbols and expressions for the absent biological parents and family members.
- Utilize metaphors and symbols to help the child gain better understanding of his or her own roots and context; like “Tree of life” is a methodology (see p. 87 seq.).
- Still, it needs to be *acknowledged that a care giver can be touched* by the dynamics of unimaginable breakdown, losses, and traumata within the context of the own bodily affective experiences.
- It is important to understand, that the bodily expressions of irrepresentable loss and trauma as well as the signals and communications of them in drawing, playing and creative materials serve as the basis for the following steps of guidance.
- A later process of understanding involves finding words and integrating the traumatic experiences into the context of a narrative about one's own life story and self.
- Especially in the context of trauma driven dynamics, it will be important for the foster care worker to make use of a guided supervision, in order to remain present in the context of difficult behaviour such as, for example, lying, or when the foster care worker realises that there are missing pieces in the child's narrative.

How to: Reflective approach

Guiding questions for team-meetings, intervision and supervision:

- What are the first impressions? What can be observed according to appearance, behaviour, speech, topics, questions, etc.?
- How did you perceive the encounter?
- What emotions occurred during and/or after the intervention?
- Which child-parent-dynamics can be identified within the foster family?
- In what way does the foster family dynamic infect the work of the foster care worker and intended intervention?
- What is helpful for accepting the fact of being faced with or – as a care worker – being drawn into relational dynamics of the foster families?
- How to stay stable during overwhelming situations while working in the context of a foster family with an unaccompanied minor refugee?
- How to reflect on case-specific dynamics and how to analyse the meaning of hidden expressions of stress and of developmental problems?
- How to identify emotional triggers or latent dynamics?
- Through which ways can support for the children, the families, and the foster care workers be offered?
- How to install helping interventions and systems, that are transparent and understandable enough for the clients?

Key elements for foster care workers to embody that they work towards continuation:

- Staying available for the foster parents
- Acknowledging the trauma related dynamics of the fostered minor
- Observing repeatedly appearing moments and behaviour that seem irrational or that makes you feel ambivalent
- Sharing experiences in safe spaces and find your own mirrors to reflect and to figure out alternative ways of intervention
- Being contained by supervision

Key elements for understanding within a team exchange:

- Above mentioned questions can also be useful to reflect from a professional view within team meetings and/ or in supervision
- Additionally following questions can be helpful to detangle the complexity of the dynamic:

- How are you being addressed by the foster parents and by the child?
- What attempts or difficulties in re-establishing a working relationship do you observe?
- Which dynamics do you observe between the foster parents and child; how do you observe moments of distancing and re-assuring the bond between the family members?
- Which relational challenges do you experience? How do you cope with moments of emotional imbalance or insecurity?

Toolkits

Bucket and treasure chest methodology

The bucket

Conversations with families can start with the metaphor of the bucket. A bucket holds water but can sometimes overflow. You can use this metaphor to start short conversations with families about aspects of their parenting or life in care.

Practically, you can print out a picture of a bucket and have the family stick post-its with the elements they would like to see changed.

- What is in your bucket? What aspects, problems or challenges weigh heavily or burden the family?
- How full is the bucket (today)? (Here the family should reflect on how heavily burdened they feel. A family indicating that the bucket is almost full or already overflowing sends a clear signal that more support or a possible referral is needed).
- What makes your bucket overflow or what could make your bucket overflow? This question creates awareness within the family, but also among foster care workers. It gives indications of possible priority counselling needs.
- How much space do certain aspects take up in the bucket? It can be important to reflect on how much place each problem or challenge takes up in the bucket. Does one problem take up a large part of the bucket? Or is it rather an accumulation of many different aspects? This can again provide insight into what support is most needed for a family.

The treasure chest

In supporting families, it is essential to look not only at problems or challenges, but also at resources and resilience. Here the metaphor of the treasure chest can be a stepping stone.

- What makes your family strong? (with this question, you get an insight into the family's resources and where they get their resilience from)
- What is in your treasure chest? Where do you draw strength from? Where do you think your family's (resilience) lies? These questions provide insight into families' coping strategies and resources.

- Who can you lean on? Where can you find information and support? When asking these questions, take a broad view. Ask not only about formal help, but also about informal help from friends or volunteers. Also ask about the family's transnational context: are there people in the country of origin or elsewhere from whom families find support or seek advice? With these questions, you can get an overview of families' network and the degree of inclusion or isolation. Families can also become aware that they are less alone than they think.
- Other uses: you could apply this exercise to you as a foster care worker (how full is your bucket and what is in your treasure chest)?

Based on

Fournier K. Acker K. V. Geldof D. & Heyerick A. (2022). *Kind zijn in een asielcentrum kansen versterken voor gezinnen na de vlucht*. Acco.

Mooren, T.& Bala, J. (2016). *Goed ouderschap in moeilijke tijden. Handleiding voor meergezinsgroepen met psychotrauma*. Boom: Koninklijke Van Gorcum Uitgevers.

Team of Life

Origin of the "Team of Life" methodology:

"Team of Life is a methodology used in narrative therapy. The Team of Life approach "uses sporting metaphors to enable young people to deal with traumatic experiences without having to talk about them directly". It was developed by David Denborough of the Dulwich Centre Foundation.

It builds on 4 parts:

- Part One: Developing Team Sheets
- Part Two: Celebrating Goals
- Part Three: Tackling Problems
- Part Four: Celebrations

In this annex we will focus on part one, but the other parts could be also relevant. Please look up more information on the references further below.

Part one focuses on identify support networks. It brings together several needs that appear in the FORM training like the need to build a narrative (point 5) and to work with networks (point 10).

This methodology can be used in multiple ways to analyse the support network of:

- A team of foster care workers
- An individual foster care worker
- A foster care family
- An unaccompanied child.

Coach

- Who would you identify as your coach?
- Who is the person who teaches you and pushes your forward?

Goalkeeper

- Who would you identify as your goalkeeper?
- Who is the person you can count on, that looks out for you?

Defence

- Who helps protect what is important to you?
- Who can you turn to when you have a problem?

Attackers

- Who helps score goals (for your team)?
- Who will try to make things happen for you?

Captain

- Who gives you good advice?
- Who inspires you?

Team players

- Who are the people that you enjoy spending time with that you would consider being part of your team?

Medical staff

- Who takes care of you when you are hurt?
- Who looks out for your physical and mental well-being?

Supporters

- Who are the people who support you (no matter what)?

Home ground

- What is your home ground?
- Where is “home” to you (you can have multiple homes)?

Your position

- Where would you place yourself on this team?
- What is your current position?

Others

- Is there anyone else that it important to you?




Important remark:

- When talking about team members it can include people who are living in this country but also in another country, people who are alive or not.
- This exercise is a mapping exercise (of relational dynamics and networks) but can also be a starting point for a more in-depth analysis with for example:
 - Adding systematically the question: Why? For example: “why do you say this person is your defender”?, and if the why-questions are too difficult: “how do you experience this person as your defender?”
 - Who else would you need on your team?
 - What goals you want to score?

For more information and to go further: <https://dulwichcentre.com.au/team-of-life/>

Reflection cards

 <p>GROUP-REFLECTION</p> <p>What are the non verbal attention point to consider?</p>	 <p>CASE DISCUSSION</p> <p>What are the trauma dynamics at play in the situation?</p>
 <p>CASE DISCUSSION</p> <p>What could you do to reinforce your relationship with family 'X'?</p>	 <p>SELF-REFLECTION</p> <p>What are your triggers or red buttons?</p>
 <p>SELF-REFLECTION</p> <p>What are your tools to regulate yourself?</p>	 <p>GROUP-REFLECTION</p> <p>How can your colleagues help you to regulate yourself?</p>
 <p>SELF-REFLECTION</p> <p>Who is your 'safety in the background'?</p>	 <p>GROUP-REFLECTION</p> <p>How can you be the 'safety in the background' of the foster family?</p>
 <p>GROUP-REFLECTION</p> <p>What are your tips and tricks to de-escalate a situation?</p>	 <p>SELF-REFLECTION</p> <p>How can your ambivalence tolerance be increased? What do you need?</p>
 <p>GROUP-REFLECTION</p> <p>How can you talk with foster families about ambivalence?</p>	 <p>SELF-REFLECTION</p> <p>What helps you feel contained?</p>

	GROUP-REFLECTION What can help (with tools) to build a narrative for/with the foster family?		CASE DISCUSSION What biopsychosocial loops are at play in situation 'X'?
	ROLE PLAY Replay a situation a family (member) was dysregulated. Try to really feel what they were feeling and take their role. Another colleague take on the role as the foster care worker. The rest observes. What did everybody see and feel? (How) did the tension go down? What helped?		

USE OF THE CARDS:

- **Self-reflection:** Cards that can be used to take some time to reflect on yourself. These cards can also be used in group discussions as a way for colleagues to get to know, understand and support each other better.
- **Group reflection:** Cards to share reflections, tools and experiences as a group.
- **Case Discussion:** Cards to discuss a case with feedback from other colleagues.
- **Role-play exercises:** Exercise to do in a team to take different perspectives on a situation.

Further toolkit inspiration

- “Team of life” and “Tree of life”
- “Wortelen in nieuwe aarde” (“Taking root in new soil”: a method with story cards, focus on resilience in children and young people with a flight story; developed by Odisee University)
- “Identity circle”
- Experiential Workshops in Schools as to increase social inclusion
- Work with visual life stories: use pictures, draw or write something: make a story of your life from birth to your age now (and if possible, who do you want to be, what do you want from life in 5, 10, 20 years). Just draw a line/an arrow on a big piece of paper. Or a life book (per page refers to 5 years). Be creative.
 - Make a life story with LEGO or DUPLO or other puppets and gadgets and take pictures.
 - Draw the houses you have lived in and find your identity, sense of belonging, attachment
- ...



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