

# Supporting Children with Disabilities in Family-Based Care



## VIDEO SUMMARY

All children have an equal right to enjoy family and community life. Yet in many contexts, children with disabilities continue to be segregated and deprived of family care in order to access services only made available in residential care settings. To reverse this trend, and uphold the rights and best interests of children with disabilities, new approaches need to be developed to make communities and family-based care inclusive for children with disabilities. This requires the development of services accessible to children in the community and specialised support for caregivers.

In this two-part video, you'll hear from Children in Families ABLE project practitioners, Sorn Sreyny and Lisa Yunker, as they share their experience of making family-based care in Cambodia inclusive for children with disabilities.

**In part one**, Sreyny and Lisa discuss their key learning with respect to supporting caregivers to care for children, including the importance of managing stress and expectations, developing trusting relationships and taking a whole family approach to support.

**In part two** they speak to their experience and learning around recruiting foster families to care for children with disabilities, including the types of families to target and how to use role modelling to address issues of stigma in the community.



## DISCUSSION QUESTIONS FOR PRACTITIONERS

### Functional discrimination

In the video, Lisa discusses 'functional discrimination', describing it as an unintended discrimination that occurs when organisations do not take intentional steps to make their programs inclusive and accessible to people with disabilities.

### In your context:

- ① How has your organisation approached inclusion and are there aspects of your services and programs that are not yet accessible to children with disabilities?

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- ② What more could be done to make your programs more inclusive and prevent functional discrimination from occurring?

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- ③ What specialised services or supports might you need to develop or add to your current portfolio?

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- ④ What obstacles (resource, capacity, expertise etc) might you have to overcome to become an inclusive organisation? What are the next practical steps you can take to move the agenda forward?



## DISCUSSION TOPIC

### Addressing stigma and discrimination

In the video, Sreyngy discusses some of the cultural causes of discrimination and stigma surrounding disability and talks about how that creates a reluctance amongst families to care for children with disabilities. She further unpacks how role modelling has been key to CIF's ability to reduce stigma and increase the number of families willing to provide foster care to children with special needs.

### In your context:

- ① What are some of the beliefs and misunderstandings surrounding disability that lead to stigma and discrimination?

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- ② How does stigma and discrimination currently impact your ability to make your services inclusive?

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- ③ What strategies could you employ to reduce stigma and how could these be incorporated into your programs?



## CASE STUDY

### Realising the Right to Family Life: Deith's Story

Deith was a five-year-old boy when he first came into CIF's Kinship care program. Deith's mother was a single mother and had left him in the care of his Aunt. Deith had Cerebral Palsy as a result of illness and seizures that occurred when he was an infant. He presented with significant cognitive, communication and physical developmental delays and was undernourished. Despite extensive efforts to counsel and provide comprehensive support to his extended family, Deith's Aunt remained unable to provide adequate care and requested for Deith to be placed with a foster family. CIF staff went through the process of working with the authorities and family to place Deith in a foster family. CIF social workers provided extensive pre-placement counselling to the foster family to ensure they were fully aware of Deith's support needs, nutritional requirements and developmental prospects. They worked with the family to identify how Deith's care might impact on their family's involvement in community life and what support they would need to ensure that continued. When Deith was placed, CIF therapists began home therapy with Deith, involving his caregivers and modelling techniques they could use to work with Deith on a daily basis. They encouraged the family to involve Deith in everyday family life and modelled how to make that possible. Deith responded quickly to the warmth and affection he received from his foster family and his playful and mischievous character began

to emerge. His strength and control over the use of his legs improved greatly, and CIF supported him to access leg braces to protect his joints and improve his positioning. Staff accompanied Deith and his foster parents to the hospital to have the braces fitted by another organization specializing in prosthetics and orthotics. The ABLE team built him a walker out of PVC pipes and showed his foster family how to help him use it safely. Deith quickly got the hang of it and was walking around on his own to the applause of his family and neighbours. This new-found mobility enabled Deith to participate with his family in a wider range of community activities. The ABLE team are also working with Deith and his family on strategies to improve his language and cognition. Speech therapy services are not yet accessible in Cambodia, so ABLE practitioners have received training and are building their capacity to incorporate this into the supports they offer families. ABLE staff visit Deith's family regularly and spend time with them, monitoring their stress levels and making sure they feel well supported as they continue to care for Deith. The local school is not yet equipped to provide inclusive or integrated education and meet the needs of children like Deith. Therefore, as Deith is now five and approaching school age, ABLE staff will work with the school and support Deith to receive education in an environment suitable to his needs.