The Benefits of a Cluster Approach to Supporting Foster Families

Better Care Network

VIDEO SUMMARY

A key element to effectively supporting children in foster care is the provision of adequate social support to caregivers. Where this support is not forthcoming or timely, problems experienced by foster families can escalate and impact the quality of care for children and/or lead to placement instability and breakdown. Providing sufficient social support on a one-to-one basis can be costly and place high demands on social workers. This is exacerbated in situations where social workers must travel long distances to meet with foster families.

In this video, you'll hear from Children in Families social workers, Keo Ravy and Chhoun Leak, as they share their experience of using a cluster model to enhance the social support available to foster carers whilst reducing the demands placed on organisational resources. Ravy and Leak will discuss their key learning regarding the impact the foster carer cluster groups have had on reducing caregiver stress, enhancing problem-solving skills, placement stability and building caregiver capacity through promoting observational learning. They will further share their insights on effective facilitation of cluster group meetings and the key competencies required by social workers.

DISCUSSION TOPIC

Informal social support

In the video, Ravy and Leak discuss the intersection between caregivers' feelings of isolation and chronic stress. They describe the importance of creating informal social support networks comprised of peers with similar experiences to reduce chronic stress in foster families and how the cluster groups have enabled that.

In your context:

? What is the importance of informal social support for the families and children you are working with? What issues and sources of stress could informal social support networks address or mitigate against? What benefits would this have for children, families, communities and your programs?

? How could you enhance informal social support networks through your programs and activities?

? What would be the mechanisms and resource implications for your organisation to do this?

Observational learning

In the video, the practitioners both discuss the enhanced efficacy of observational learning or role-modelling in terms of information retention and building caregivers' capacity as opposed to lesson-based teaching or training. Culture has a huge influence on individual and community learning style and whether observational learning or abstract learning will be more dominant.

In your context:

(?) What is the dominant learning style of the individuals, families or communities you are working with? What anecdotal or empirical evidence do you have to support this?

(?) How do you currently deliver training or facilitate capacity-building and what learning style does that reflect? Does it align with the dominant learning style you've identified?

(?) How could you improve efficacy and facilitate greater opportunities for observational or vicarious learning where relevant?

📁 CASE STUDY

Enhancing Care Through Peer Support

Dara entered CIF care at the age of 3. He was a sweet child who adjusted easily to life with his new foster parents. His foster parents were excited to be parents and to welcome him into their life, community and family routine. Over the next five years, Dara and his foster family were regularly visited by his CIF social worker, who helped them to set goals as a family and who celebrated with the family as Dara grew strong and healthy and started school.

When Dara turned 8, the social worker was surprised when the tone of the conversations at their monthly meeting changed. The parents were having great difficulty managing Dara's behaviour. He was too focussed on playing and doing what he wanted and was not obeying his family or helping out with family chores as willingly as before. The parents had decided that they wanted CIF to take Dara back as they couldn't parent him. During this discussion, the social worker gave the family some suggestions on how to treat the child and help encourage positive behaviour. The family were sceptical about these suggestions. At a follow-up meeting, the parents still raised concerns about the child's behaviour, and they had not tried the techniques the social worker had suggested.

At the end of the month, this family attended their monthly cluster group meeting. The parents shared openly about the frustrations they were having with Dara's behaviour. To their surprise, another mother with a similar aged foster child also expressed her frustrations with her child's behaviour. She seemed a little embarrassed to tell the group as she had only shared this story with her husband before. An older mother, who had raised her biological children and was now fostering a younger child nodded her head knowingly. She shared her experience with similar behaviour when her children were young. This helped the family to see that the issues were related to the child's age and stage of development, and not because he was fostered. All three families felt supported and encouraged after having the opportunity to share their experiences and discuss strategies for managing their children's behaviour. This support gave Dara's foster parents the confidence and reassurance they needed to continue providing care for Dara.