

Neglect of Children

Contents

1. **Definition**
2. **Risks**
3. **Indicators**
4. **Protection and Action to be Taken**
5. **Issues**
6. **Further Information**

1. Definition

Neglect can be complex and is often difficult to define clearly because most definitions are based on personal perceptions of neglect these include what constitutes 'good enough' care and what a child's needs are.

The aim of this multi-agency guidance is for professionals working with children and their families at all levels of need where neglect may be a factor. The overall aim being to support good practice, early identification and assessment of neglect.

When responding to neglect it is crucial to provide help at the earliest point at the lowest level of service provision so that help and support can be provided quickly and the families get the help they need.

Neglect is defined in the UK Working Together to Safeguard Children as:

"the persistent failure to meet a child's basic physical, emotional and/or psychological needs likely to result in the serious impairment of the child's health and development. Neglect may occur during pregnancy as a result of maternal substance abuse". Once a child is born, neglect may involve a parent or carer failing to:

- Provide adequate food, clothing and shelter (including exclusion from home or abandonment);
- Protect a child from physical and emotional harm or danger;
- Ensure adequate supervision (including the use of inadequate care givers)
- Ensure access to appropriate medical care or treatment.

It may also include neglect of or unresponsiveness to a child's basic emotional needs.

2. Risks

Neglect is sometimes not seen as severe, impactful abuse by some practitioners. Perhaps as a single act it may not be considered severe enough to impact on children, but, persistent and recurring neglect is.

The impact of neglect during the first two years of a child's life can have profound and lasting effects on the development of the brain, leading to later problems with self-esteem, emotional regulation and relationships.

Neglect during the first five years of a child's life is likely to damage all aspects of the child's development. A neglected child may have difficulties with:

- Basic trust;
- Self-esteem;
- Ability to control their behaviour;
- Social interaction;
- Educational attainment; and
- Problem-solving.

Neglect in childhood can also lead to problems during adulthood including:

- Living independently living in the community;
- Accepting adult responsibilities;
- Anti-social behaviour such as criminality, substance misuse;
- Increased vulnerability to being in abusive relationships (including the risk of sexual exploitation, criminal exploitation and being trafficked);
- Life chances and opportunities such as employment and education;
- Parenting - children who experience neglect lack a role model for good parenting, and so are vulnerable to becoming neglectful or abusive parents; and
- Self-care - for example nutrition, general health, risk-taking behaviour;
- Domestic Abuse;
- Substance abuse/addictions.

A particularly damaging combination for children is growing up in an environment of low warmth and high criticism – that is, parents/carers who switch unpredictably between helpless (neglectful) and hostile (abusive) care.

Neglect can affect children of all ages, including adolescents and older children.

Where parents/carers have specific beliefs, which may influence their views on how the child receives health care and treatment or general nutrition, the outcome can be that the child's health and well-being can be dangerously compromised.

It is important to remember that neglect can be fatal to the child.

"The majority of neglect related deaths of very young children involve accidental deaths and sudden unexpected deaths in infancy where there are pre-existing concerns about poor quality parenting and poor supervision and dangerous, sometimes unsanitary, living circumstances which compromise the children's safety these issues include the risks of accidents such as fires and the dangers of co-sleeping with a baby where parents have substance and/or alcohol misuse problems" (Brandon et al, 2013).

3. Indicators

Neglect differs from other forms of abuse in that there is rarely a single incident or crisis that draws attention to the family. Rather it is repeated, persistent neglectful behaviour that causes incremental damage over a period of time.

There is no set pattern of signs that indicate neglect other than that the child's basic needs are not adequately met. In this context:

- The child's basic needs are for food, shelter, clothing, warmth, safety, stimulation, protection, nurture, medical care, education, identity and play;
- Adequately means sufficient to avoid harm or the likelihood of Significant Harm;
- Failure to meet the child's needs does not necessarily mean that the parents/carers are intentionally neglectful, but it points to the need for intervention;
- It is essential to monitor the outcome of intervention – are the child's needs being adequately met after the intervention and is there a sustainable improvement?

The essential factors in demonstrating that a child is being neglected are:

- The child is suffering, or is likely to suffer, Significant Harm;
- The harm, or risk of harm, arises because of the failure of parents or carers to meet the child's needs;
- Over time, the harm or risk of harm has become worse, or has not improved to the point at which the child is consistently receiving a "good enough" standard of care;
- Persistent, severe neglect indicates a breakdown or a failure in the relationship between parent and child.

4. Protection and Action to be Taken – key principles of good practice when working with neglect

An effective multi-agency response to neglect is early recognition and a timely response with a robust management oversight and acknowledgement of the complexities around neglect and the impact of it.

Family members may be unaware of or unable to recognise potential risks and may not know where to go with their concerns, or have their concerns taken seriously. They may be fearful and mistrustful of child protection services and the potential removal of their child or children and therefore avoid approaching services with their own concerns. Treating parents with openness and respect allows practitioners to build a trusting relationship within which challenge can be made. This includes an attitude of curiosity which requires professionals to think beyond the usual remit of their professional role and to consider, holistically the circumstances of the child and family.

Practitioners should take into account the impact of neglect on children and understand that it is often accumulative, and often advances over a period of time. This may arise from a parent's lack of knowledge, competing priorities, stress or deprivation. It may also be linked to parents/carers who retain cultural behaviours which are inappropriate in the context in which the family is living. To understand the impact of the standard of care it is essential that the child is spoken to and their feelings explored. For those who have communication difficulties their wishes and feelings should still be gathered using alternative methods. This should include direct observation with their family.

When a child's needs are unmet because of the parents/carers lack knowledge or skill the first choice for intervention should generally be the provision of Early Help services such as information advice, specific training programmes and support.

Practitioners should be aware that family members might, however be covering up abuse or neglect particularly as research indicates neglect of a child may co-exist alongside other types of abuse and is often a pre-condition to allowing other abuse to take place therefore balancing parental support building on resilience and progress, whilst maintaining an attitude of respectful uncertainty is often a challenge.

When assessing the needs of a child it is not only the child's wishes and feelings that should be taken into account, practitioners should also explore the lived experience of the child to be able to determine whether the child is suffering other abuse as well as being neglected.

Whenever there is a deterioration in home conditions and the wellbeing of the child or children with no measured progress, despite the provision of Early Help Services, then parents should be informed of the increased concern by those who are working with the family. A referral should be made in accordance with the Referrals Procedure to the Initial Response Team, Children and Families Division. In such cases parental consent is required prior to a referral being made unless there is evidence that that the child has suffered significant harm or is likely to without the intervention of services. Where there is reasonable cause to suspect that a child is suffering or likely to suffer significant harm through either neglect or other abuse parents should still be advised that a referral is being made even if consent is denied and if the threshold has been met for significant harm.

Once the referral has been accepted and if there is evidence of significant harm or the likelihood of it then a strategy discussion should be held with completion of a Section 46

NARRATES which will determine the next course of action. See [Child Protection Section 46 Enquiries and Assessment Procedures](#) for further guidance.

The model of assessment used on the Isle of Man (NARRATES) is not intended to be an assessment tool specifically aimed at assessing/grading the level of neglect. It is a widely used method of assessment that measures risk and protective factors and the impact of these on children. The assessment is undertaken by practitioners when conducting enquiries in response to concerns of neglect and other potential abuse of children. See Professional Operational Guidance 2016.

A response to the recognition of neglect is no different to how any type of abuse should be assessed and responded to. A strength-based approach should be adopted to work with families and support them to meet their own needs to enable positive outcomes for families, especially as the majority of parents can be supported to change their behaviour and improve the lives of their children. It is critical that the extended family network and community around the child are initially considered at the earliest opportunity and are part of any resilience and safety building plan.

Key principles of good practice when working with neglect

- The earlier neglect is identified and responded to, the better the outcome for the child;
- Capture the voice and daily lived experience of the child (what is it like for the child living in this house with these parents?);
- Capture the voice and daily lived experience of the parents;
- Always maintain a focus on the child and the impact of the neglect upon them;
- Triangulate the daily lived experience of the child and parent with multi-agency professional observation and information. Review of the lived experience may assist in evidencing change;
- Ensure that the NARRATES assessment provides a holistic view of the circumstances which is essential in determining the severity of neglect and the impact on the child.
- Take into account the parents own upbringing in the household and the history of parenting this child and any previous children. Look at the attachment, the relationship between the parent and child and any other children in the household.
- Take into account the protective and risk factors and the weight afforded to each;
- Look at parent's capacity to change;
- Be specific in relation to the changes that you expect and be clear about the timescales in which you expect changes to be made;
- Guard against an over optimism and adopt a balanced approach.
- Avoid the 'start again' approach
- Embrace Multi-agency working – no one agency can provide the support that the children require.
- Regularly review the progress against the multi-agency plan.

Messages for Good Practice

- Practical resources are often beneficial but their impact on meeting the child's needs must be kept under review;
- Relieving financial poverty does not necessarily relieve emotional poverty;
- Neglectful families are more likely to be isolated and to have weak informal networks. Providing volunteer support, and facilitating better relationship with family and in the community, can be effective in raising standards of care;
- Dealing with neglect can be overwhelming for professionals: support and regular supervision are crucial;
- It is important to carry out regular reviews of the rate at which the required change is being achieved in terms of the child's improved health and development.

5. Issues

Neglect is characterised by a cumulative pattern rather than discrete incidents or crises, and so drift is always a potential problem. Drift may result in a loss of focus on the needs of the child, and a change in professional expectations of what an acceptable level of care might be.

Accurate, detailed and contemporaneous recording by all professionals, and sharing of this information, is crucial to the protection of the child. In any service, professionals should work from a single set of records for each child. All entries in case notes should:

- Be factual and evidence based;
- Rigorously separate fact and opinion;
- Be dated and timed;
- Give names and agencies in full; and
- State agreed responses and outcomes.

Records should include a detailed Chronology of historical and recent events of what has been tried, and to what effect. The chronology should:

- Be seen as central to a good assessment, one should not exist without the other. It is the sequential story of significant events, providing a factual overview of the history of the child and their family;
- Create an emerging picture and become an analytical tool to help practitioners understand the impact of the harm and clearly indicate any changes to a child's wellbeing and developmental progress;
- Highlight events to help make sense of any past or current challenges and prevent the potential problem of drift or the risk of the practitioner adopting 'the start again' approach;

- Provide the practitioner with an understanding of the child's needs, what the risks are and the impact of the abuse, including the need for protection from significant harm, whether it is immediate, which will require further action, or not.

There is a risk of confusion about the difference between style of parental care and standard of care. Styles of appropriate care vary widely, influenced by gender, class, culture, religion, age etc. The common factor in all styles of appropriate care is that the parent or caregiver address the needs of the child. Neglectful care may have a host of common factors with various styles of appropriate care, but it fails to address the child's needs and falls below an acceptable standard.

Non-attendance at or repeated cancellations of appointments and lack of access to the child on visits are indicators that should increase concern about the child's welfare.

All agencies should be aware of the need for good quality supervision of staff who are monitoring cases of chronic neglect:

- Professionals often want to think the best of the families with whom they work, and interpret events accordingly;
- Familiarity with the family's lifestyle may cause professionals to minimise concerns and accept that the observed standards are normal for this family;
- Changing the worker also carries risks as it takes time to see the pattern of events that identifies care as neglectful.

Supervision must provide a time of reflection between practitioner and manager, keeping the focus on the child's needs and the adequacy of parenting over time.

If the child appears resilient, professionals should not accept this at face value, but should check for evidence of unmet needs and impaired health and development.

When reviewing progress in cases of neglect it is important to look for evidence of sustained improvement in the child's health and development. Where there is a pattern of short-lived improvements, the overall situation remains unsatisfactory - if adequate standards of care cannot be sustained, the child remains at risk of significant harm.

It is important to see current events in the light of the full history of safeguarding and child protection issues, including previous responses to support. The family histories of neglectful families are often complex and confusing, and professionals may be tempted to set them aside and concentrate on the present. This can result in an over-optimistic approach to a family with deeply entrenched problems.

As noted above, neglectful adults are often enmeshed in a complex network of problems. The clamour of the parents'/carers' needs tends to draw professional attention away from the unmet needs of the children. When addressing the needs of neglectful parents/carers, it is necessary to ask repeatedly:

- Do they understand what action is needed and within what timescales?

- Are they able and willing to meet the child's needs?
- Are they doing so?
- Are they able to access appropriate support services?
- Is anything changing for the child? Is the change enough to bring the standard of care up to an acceptable level?

If adult social care is supporting the parents/carers, it is important to stress the need for them to make a referral to Children and Families Division if the parents/carers fail to engage with the services offered and there is concern that the child is suffering or likely to suffer significant harm as a result of the neglectful care provided by the parent/carer. [See Referral Procedure](#)

If there is a vulnerable adult living in the same household as a child whose needs are neglected, then their needs may also be neglected or unmet. Practitioners should report any concerns about the welfare of vulnerable adults to adult social care using their referral process.

Intentional Neglect

Where there is strong evidence that the parents or carers know and understand the likely effect of their actions or inaction on the child, but intend to cause harm or are reckless as to whether harm is caused to the child, this should be regarded as serious physical and/or emotional abuse. In these cases, support is unlikely to reduce the risk to the child. If a child is found to be the victim of intentional abuse, then the police and the Initial Response Team, Children and Families Division should be contacted immediately. Unintentional neglect should not be confused with deliberate or malicious failure to meet the child's needs in the full knowledge of the potential effects on the child.

One Child Singled Out

Serious Case Management Reviews have demonstrated that in some instances a child in a family may be singled out and cared for in a manner which amounts to serious neglect. Where a school or other agency raises concerns about the child the parent's response and first assessments of the family may mask the particular treatment in the home of that child, particularly if the siblings appear well and cared for. Assessments where there are concerns of neglect should include understanding the functioning of the family and speaking to the specific child on their own as well as viewing their sleeping arrangements.

Neglect by Secondary Carers

This guidance relates only to the child's primary carers. Neglectful care may also be found in secondary carers such as childminders, foster carers, day care or residential settings. In this situation concerns should be reported to:

- The child's primary carers, so that they can take appropriate action to protect their child; and

- Children and Families Division, Initial Response Team.
- The Designated Officer (Senior Independent Reviewing Officer) within the Safeguarding and Quality Assurance Unit
- In the case of emergencies see **Referrals Procedure and Child Protection Section 46 Enquiries Procedure**.

Children who are being neglected, or at risk of being neglected, need to be seen, heard and helped. It is common for evidence of neglect to present through signs and symptoms which may be noticed by different agencies in relation to different children in the family, often at different points in time. It is therefore important for all practitioners within agencies to be sufficiently skilled and confident in recognising and naming neglect. Where early help for children and young people is dealt with swiftly and effectively this could prevent the consequences that result from living and growing up within a neglectful environment.

Further Information

Recent Research on Child Neglect/Springer Link 22 February 2022

Child Abuse and Neglect in the UK today – NSPCC Learning

www.nspcc.org.uk

Research Evidence to Inform Practice – Dr Patricia Moran – Action for Children.