

Child Neglect Practitioner Briefing

Welcome to this briefing to help practitioners and their managers understand child neglect and its impact. The messages in this Briefing are just as important for those working in adult services, where service users could be parents).

Remember Victoria Climbié and Baby P Peter Connelly were victims of neglect as were Arthur Labinjo-Hughes and Star Hobson.



The experience of neglect during childhood can have significant, long lasting and pervasive consequences, affecting all aspects of a child's development and their lives into adulthood. It is the most common type of abuse experienced by children across Bedfordshire, as it is nationally. The Pan Bedfordshire Neglect Group wants to ensure that practitioners identify and prevent unmet needs from escalating so that all children have the childhood they have a right to.

- Neglect is the most common reason for a child to be the subject of a child protection plan
- Neglect is the form of maltreatment more likely to be repeated.
- Neglect exposes children to other forms of abuse, e.g., child sexual exploitation, increasing vulnerability.
- Neglect can be difficult to identify, making it hard for practitioners to take action to protect a child.
- Neglect is an area where there can be drift and delay; practitioners can become de-sensitised to children's living conditions and poor parenting.

Some of the wider determinants are often interdependent of neglect so addressing a single issue will not deal with the underlying causes present, such as poverty, mental health, substance misuse, parental childhood trauma, childhood obesity, dental decay, homelessness, school readiness and school attendance.

Types of Neglect: Howarth (2007) has identified the following types of neglect:

Medical neglect – this involves carers minimising or denying children's illness or health needs, and failing to seek appropriate medical attention or administer medication and treatments. **Nutritional neglect** – this typically involves a child being provided with inadequate calories for normal growth. This form of neglect is sometimes associated with 'failure to thrive', in which a child fails to develop physically as well as psychologically. However, failure to thrive can occur for other reasons, independent of neglect. More recently, childhood obesity resulting from an unhealthy diet and lack of exercise has been considered as a form of neglect, given its serious long-term consequences. **Emotional neglect** – this involves a carer being unresponsive to a child's basic emotional needs, including failing to interact or provide affection, and failing to develop a child's self-esteem and sense of identity. Some authors distinguish it from emotional abuse by the intention of the parent. **Educational neglect** – this involves a carer failing to provide a stimulating environment, show an interest in the child's education at school, support their learning, or respond to any special needs, as well as failing to complying with state requirements regarding school attendance. **Physical neglect** – involves not providing appropriate clothing, food, cleanliness and living conditions. It can be difficult to assess due to the need to distinguish neglect from deprivation, and because of individual judgements about what constitutes standards of appropriate physical care. **Lack of supervision and guidance** – involves a failure to provide an adequate level of guidance and supervision to ensure a child is physically safe and protected from harm. It may involve leaving a child to cope alone, abandoning them or leaving them with inappropriate carers, or failing to provide appropriate boundaries about behaviours such as under-age sex or alcohol use. It can affect children of all ages."

Neglect Screening Tool when used is often dependent on collating seemingly small, un-dramatic pieces of information, which when collated may present an overall picture of a child who is being neglected. The Neglect Screening tool may identify that a single agency can provide the services required to reduce the neglect. If it indicates that more than one agency is required to deliver support, then it can be used in conjunction with an [Early Help Assessment](#) to enable working together effectively to deliver support. However, it may indicate that work with the family to complete a [Grade Care Profile 2 \(GCP2\)](#) is required. It is important when reviewing a GCP2 that practitioners look for evidence of sustained improvement in the child's health/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 may remain at risk of significant harm. The assessment should be repeated to review and measure progress against the assessed deficits.

Neglect is the persistent failure to meet a child's basic physical and/or psychological needs, likely to result in the serious impairment of their health or development. Neglect may occur at any time during a child's life from pregnancy and beyond. After a child is born, neglect may involve a parent or carer failing to;

- provide adequate food, clothing and a home
- protect a child from physical and emotional harm or danger
- ensure adequate supervision
- ensure access to appropriate medical care or treatment

It may also include neglect of, or responsiveness to, a child's basic emotional needs. Neglect differs from other forms of abuse in that there is rarely a single incident or crisis that draws attention to the family. It is repeated, persistent neglectful behaviour that causes incremental damage over a period of time. It is important to avoid 'start again' syndrome. Neglect should not only be measured by the most recent set of events but should be judged by the cumulative impact on the child of any previous incidents. Whilst statutory definition of neglect in [Working Together to Safeguard Children](#) refers to 'persistent failure to meet needs', neglect can be episodic or cumulative. It can also be intentional or unintentional.



Recognising Neglect: Neglect can be difficult to recognise.

Children who are neglected may (not an exhaustive list):

- Be dirty and wear dirty clothing or dressed in inappropriate clothing for the weather
- Be hungry
- Have untreated medical issues e.g. constant toothache
- Not be given their prescribed medicine
- Live in inappropriate conditions e.g. animal mess being left or not having any heating
- Be left alone for long periods
- Take on the role of carer for other family members when too young to do so.

The above signs don't necessarily mean that a child is being neglected. You should look for a pattern of on-going neglect and understand the lived experience of that child and family.

Impact of Neglect: Children who have been neglected may experience the impact differently, with some being more resilient than others. Some may experience short term effects which may reduce or disappear with support and care. These can include: Illness or infections - Under/overweight - Lack of confidence - Lack of trust - Bullying - Difficulty in establishing friendships. Others children may experience long term effects that last throughout their life such as: Anxiety or low self-esteem - Depression - Eating disorders - Obesity - Learning difficulties.

For more information and guidance re neglect; [Pan Bedfordshire Child Protection Procedures](#) - [NSPCC Protecting children from neglect](#) - [Research in Practice - Child neglect](#) - [SCIE - Safeguarding](#) - [Safeguarding Network - Neglect](#) - [NSPCC - Graded Care Profile 2 \(GCP2\)](#)