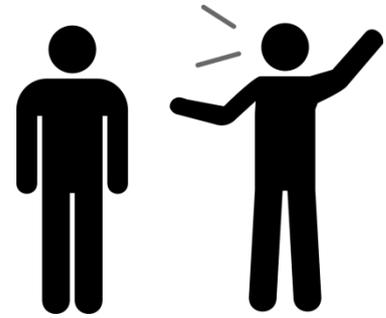


Pan Bedfordshire LSCB FACT SHEET: Uncooperative Families



There is a range of behaviours by families towards practitioners which may be considered uncooperative. This may range from those who are apparently (but not genuinely) compliant, reluctant, or resistant, to those who are angry or aggressive in their response to agency involvement. In extreme cases there can be intimidation, abuse, threats of and actual violence. Practitioners must always ask themselves what it is like for the child or young person living in the household and keep their safety and welfare in focus.

Signs of a lack of cooperation

- Parents seem to agree but do not follow through with health appointments or school attendance
- Appointments are missed or changed
- Meetings are missed and the door is not opened or the phone is not answered
- Confrontation and challenge, making repeated complaints
- Asking for practical help and diverting attention

The effect of the behaviour is that the practitioner is kept away from the child/young person over time and any assessment that takes place is incomplete and does not adequately reflect the child/young person's voice.

There will be a range of reasons for the behaviour, some of which may be to conceal what is happening to the child/young person and some of which might be because of a lack of understanding of the role and authority of the agencies involved.

Isolating the child/young person

Parents, who are uncooperative, often try to keep the child isolated from the practitioners. The child might be absent from school supported by the parent or may fail to attend medical appointments.

Significant periods of absence and failure to bring the child/young person to an appointment(s) should be monitored and action taken to follow up to ensure that the child is seen.

The impact on the child/young person

The impact on the child/young person of the parent's behaviour towards the practitioners may be to:

- Cope with hostage - like behaviour
- Have become de-sensitised to the aggression
- Have learnt to appease and minimise
- Be too frightened to tell anyone
- Identify with the parent or carer.

Multi Agency Collaboration

- Any agency faced with incidents of threats, hostility or violence should routinely consider the potential implications for any other agency involved with the family as well as for its own staff and should **alert them to the nature of the risks**.
- Similarly where there is a lack of attendance agencies must share information and act together.
- There must be care taken to avoid collusion with the family and confusion between practitioners.
- Practitioners must understand each other's roles, responsibilities and duties and support each other by joint working.
- Strategies should be agreed between agencies to ensure that the child/young person is seen and monitored so that any assessments or Child Protection Plans can be carried out in order to safeguard the child.

Where a family remains resistant to involvement by agencies the approach must be to maintain the focus on the child/young person and to review and amend the Plan in place to ensure that action is taken to safeguard the child/young person.

For more information on working with families access the Pan Bedfordshire Interagency Child Protection procedures at <https://bedfordscb.proceduresonline.com/index.htm>

