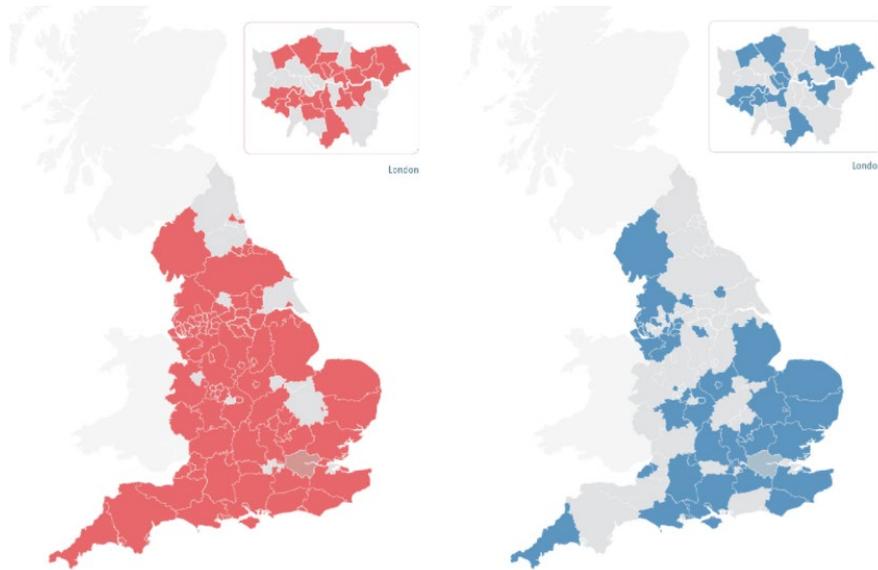


# research in practice

## Thinking critically about neglect

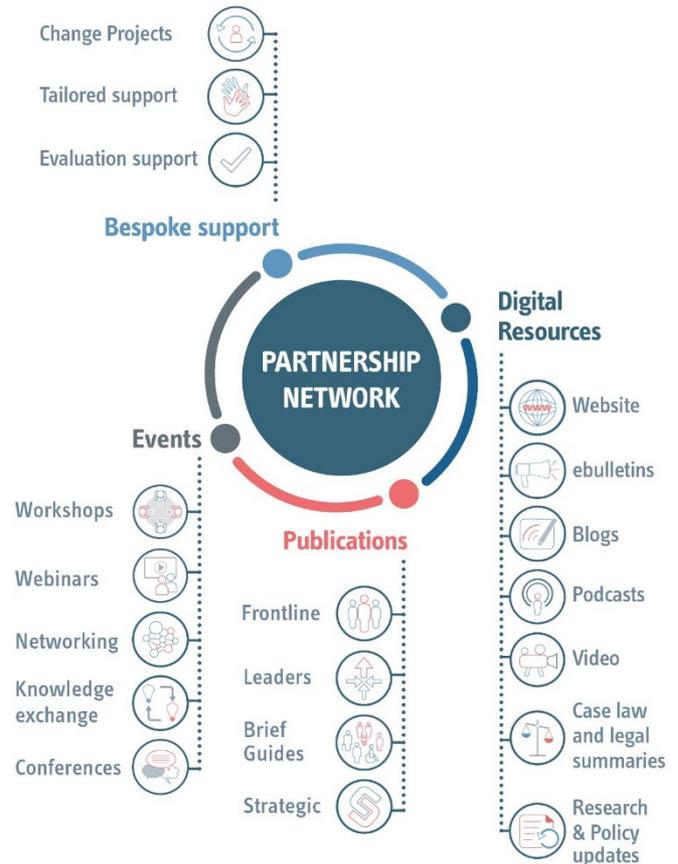


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*'...the persistent failure to meet a child's basic physical and/or psychological needs, likely to result in the serious impairment of the child's health or development. There can also be single instances of neglectful behaviour that cause significant harm. Neglect can arise in the context of systemic stresses such as poverty and is an indicator of both support and protection needs.'*

(Scottish Government 2021, pp.13)

## Defining neglect

- > medical neglect
- > nutritional neglect
- > emotional neglect
- > physical neglect
- > lack of supervision & guidance
- > educational neglect
- > ***societal neglect?***

(Allnock, 2016)

| Early impacts                                   | Medium term impacts                     | Long-term impacts                      |
|---|---|--|
| changes to body's stress response               | violence and delinquency                | longer term mental health problems     |
| low self-esteem / negative self-representations | ADHD symptoms                           | anxiety disorders                      |
| attachment difficulties                         | personality disorders                   | suicide attempts                       |
| socially withdrawn                              | more likely to be arrested for violence | substance misuse                       |
| aggression / impulsivity                        | withdrawn / few friends                 | 'risky' sexual behaviour               |
| impaired cognitive ability / problem-solving    | experience relationship conflict        | increased risk of poor physical health |

**... But beware deterministic, labelling, stigmatising or blaming practice. 3**

- > *“You have to put up a pretence. You cover up your feelings*
- > *“Having friends helps but you don’t like upsetting your friends when you talk about it so you try not to very much”*
- > *“You get the mickey taken out of you but you blame yourself, not your parents”*
- > *“At school, you can’t concentrate on the subject because things are bad in your life and then you feel it’s unfair because you get told off “*
- > *“Feeling it was too crowded in our house, too chaotic, not enough money and like having two families – my parents in one and me and my brother in the other”*
- > *“I didn’t think about it much at the time, but when I look back I think it shouldn’t have happened”*
- > *“Love is a doing word”*

## What 'neglect' can sound like...?



- National programme of research demonstrating relationship between poverty and child welfare interventions – see [https://research.hud.ac.uk/institutes-centres/cacs/projects/child\\_welfare\\_inequalities/](https://research.hud.ac.uk/institutes-centres/cacs/projects/child_welfare_inequalities/)
- Highlights a narrative from practitioners that argues that, as many poor families do not harm their children, it is stigmatising to discuss a link between poverty and child abuse and neglect.
- The data reveal poverty has become invisible : “poverty is the wallpaper of practice, too big to tackle and too familiar to notice” (Morris et al, 2018)
- In light of evidence that poverty is a contributory factor in the risk of harm, that it is vital that social work engages with the evidence and in critical reflection about intervening in the context of poverty. (Morris et al, 2018)

- > Poverty and disadvantage increases poor health – *and vice versa*
- > “Families living in poverty are over 40 times more likely to be referred to the child welfare system than their higher income counterparts...”  
(Rostad *et al*, in Gardener, 2016)
- > Correlation between poverty and issues affecting parenting capacity  
(DVA, MH, SM)
- > “In England, children in the most deprived 10% of small neighbourhoods were over ten times more likely to be looked after or on a child protection plan than children in the least deprived 10%.” (Bywaters & Brady for CWIP, 2017)
- > Intersectionality matters - poverty / disadvantage and ethnicity, gender and disability
- > Poor young women (esp care-experienced) are particularly vulnerable to DVA (Wood *et al*, 2011)
- > Policy implications – **forget the politics, see the people**

## The 10 principles of intensive family support (The Promise)

- > Holistic and relational
- > Therapeutic
- > Non-stigmatising
- > Patient and persistent
- > Underpinned by children's rights
- > Community Based
- > Responsive and timely
- > Work with family assets
- > Empowerment and agency
- > Flexible

- > Evidence base is 'alarmingly weak' - lacking in precision, detail and depth
- > No definitive answers on how prevalent these factors are in combination, nor how many children are or are not experiencing abuse or neglect as a result.
- > Little consideration, theoretical or empirical, of the causal mechanisms.
- > Rarely define how they were measured – eg MH
- > no studies have examined in any detail whether or how the availability of social, economic & environmental resources might influence the impact of the factors on childhood maltreatment.
- > parents we consulted viewed the 'toxic trio' concept as offensive and alienating as well as liable to lead to self-fulfilling bias in social work assessments.
- > <https://www.sciencedirect.com/science/article/abs/pii/S0190740920321010?via%3Dihub>

- › Even the best evidenced tools still require thoughtful practitioners, adopting an equalities lens...
- Child's hair is clean and brushed daily
- Kitchen utensils and evidence of home cooking
- Parent/carer regularly reads stories to the child
- Family sit and eat together
- Age-appropriate toys available
- Child/ren are supervised
- Parent/carer supports homework



<https://practice-supervisors.rip.org.uk/wp-content/uploads/2020/01/KB-Understanding-the-lived-experiences-of-black-Asian-and-minority-ethnic-children-and-families.pdf>

<https://www.basw.co.uk/system/files/resources/Anti%20Poverty%20Guide%20A42.pdf>

- > Neglect of older children sometimes goes unseen.
- > Work with parents to address the neglect of older children does not always happen.
- > Adult services in most areas are not effective in identifying potential neglect of older children.
- > The behaviour of older children must be understood in the context of trauma.
- > Tackling neglect of older children requires a coordinated strategic approach across all agencies.
- > *“...we recognise the complexity in identifying and intervening in order to protect and support older children who suffer neglect. While there has been a great deal of focus on the neglect of younger children, there is much less research and practice development to address the neglect of older children”.*

(HM Government, 2018)

[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/722740/Older\\_children\\_neglect\\_FINAL\\_060718.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/722740/Older_children_neglect_FINAL_060718.pdf)

*A significant minority of SCRs for older young people are prompted by a young person's suicide where there has been known maltreatment. When we studied seven suicides over a two year period we discovered all had experienced enduring and significant neglect.*

(Brandon and Belderson in Gardner *et al*, 2016)

*The signs of neglect of older children may be more difficult to identify than signs of neglect in younger children, and older children may present with different risks. For example, older children may want to spend more time away from a neglectful home, and, given their experience of neglect, they may be more vulnerable to risks such as going missing, offending behaviour or exploitation.*

(HM Government, 2018)

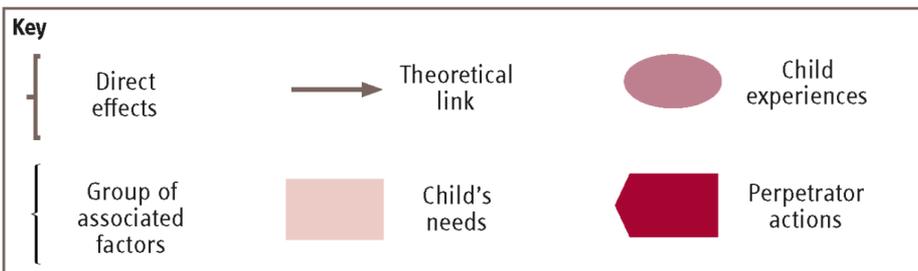
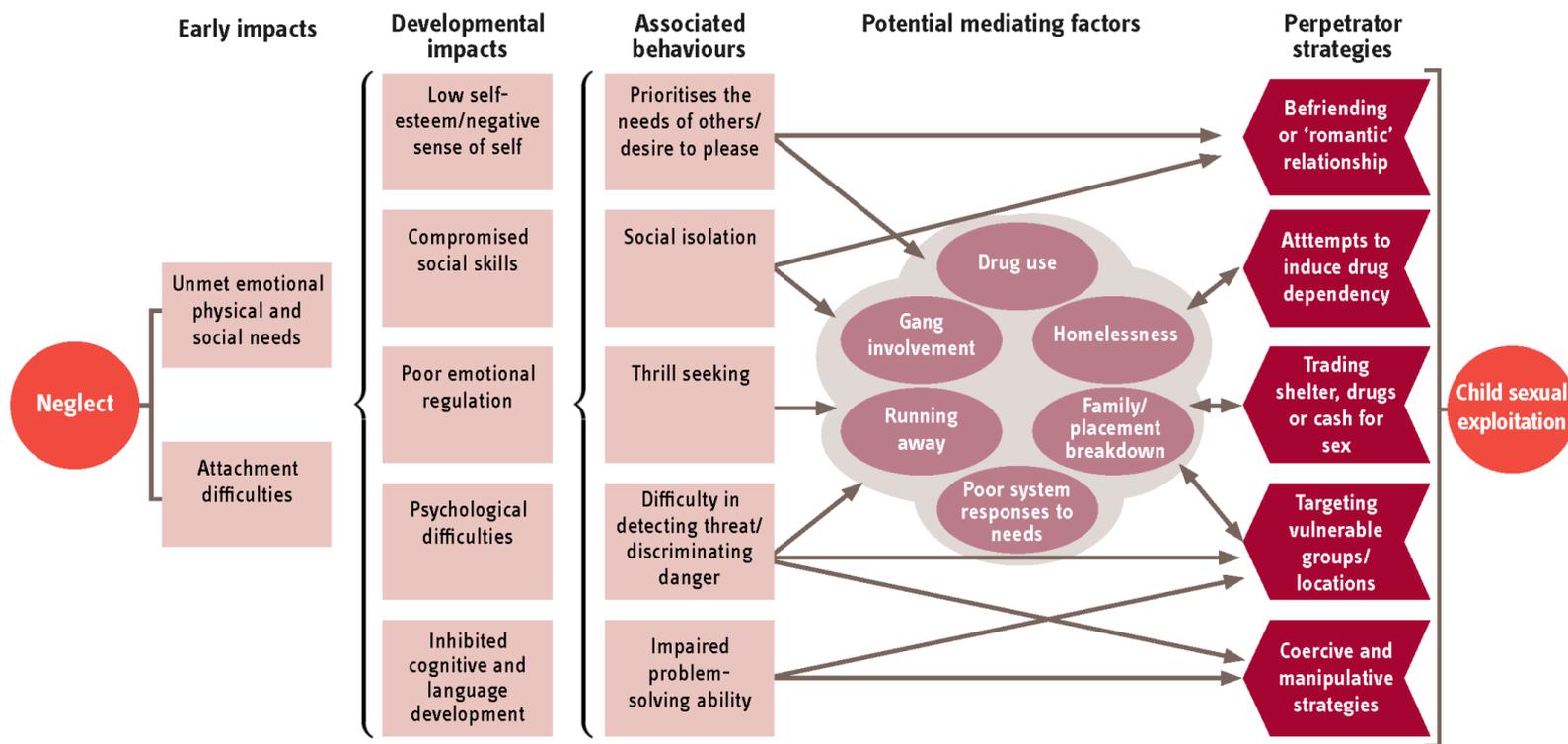
*...there were a number of examples in the current SCRs of children being erroneously seen as resilient. ...There was also presumed resilience among young people in recent SCRs for child sexual exploitation. Similar findings were apparent in our earliest biennial review where adolescents who were aggressive or feisty were thought of as “challenging and robust” and able to seek help and advice when needed rather than as vulnerable young people (Brandon et al, 2008, p.86). Rees and colleagues also noted the tendency to see adolescents as resilient in their study of neglect (Rees et al, 2010).*

(Sidebotham et al, 2016)

*They [professionals] saw me as functioning fine... They saw me as working and coping, working fine. They just ignored me completely.*

(Office of the Children’s Commissioner, 2011)

## Hypothesised model of how neglect may increase vulnerability to CSE



## Challenges of addressing neglect

- > Professionals can struggle to identify and act on indicators of neglect (Laming 2003; Gilbert *et al*, 2009)
- > Chronic nature of neglect
- > Rarely produces a crisis
- > Challenge to identify
- > Reluctance to pass judgement
- > Neglect may not be experienced in isolation

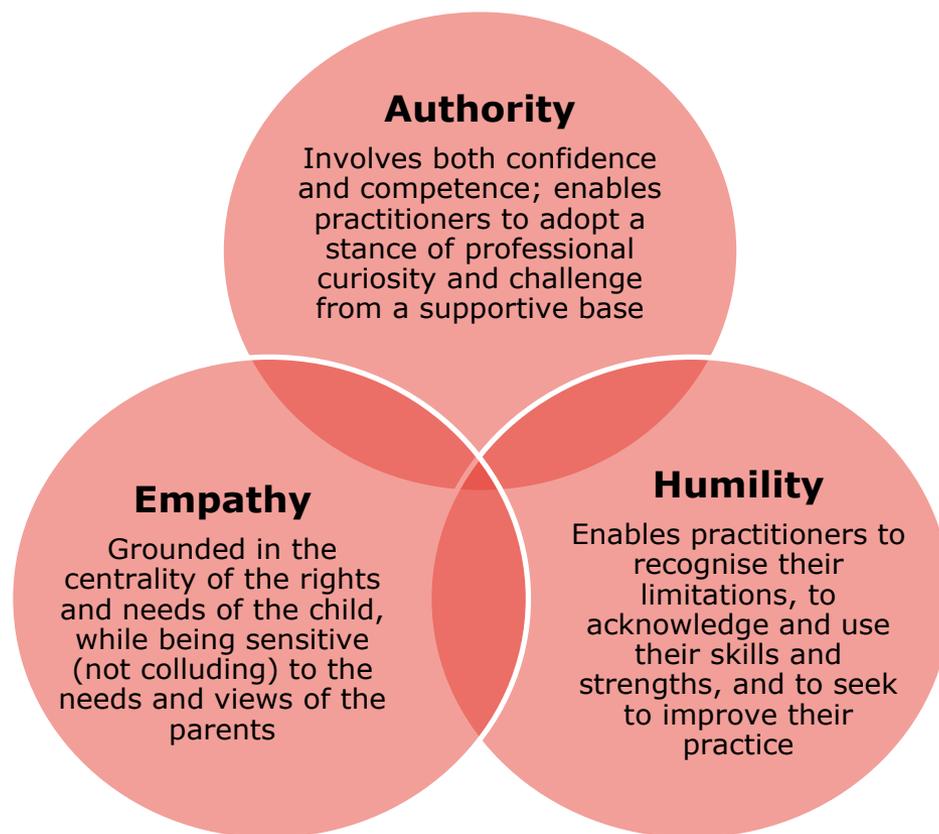
(Brandon *et al*. 2014; Sidebotham *et al*. 2016)

*“A linguistic and conceptual dilemma between a wish and need to protect children from harm, and a reluctance to label or blame caregivers”*

(Glaser, 2002)

## Authoritative safeguarding and child protection

- › Developing models and cultures of working that mitigate the complexity and ambiguity
- › Providing effective supervision and support
- › *Because we should*



(Sidebotham et al, 2016)

## What gets in the way?

- › Unfounded optimism (*and cynicism?*)
- › Relative judgement (*and confirmation bias?*)
- › ‘Start-again’ syndrome
- › Lack of information, time, feedback, reflective space, resilience (*true of families and pracs?*)
- › Decision fatigue/avoidance
- › Reliance on clinical judgement alone – we are fallible
- › *Structural, systemic inequality*
- › *Endemic mistrust?*

- › Structured professional judgement – *underpinned by research, relationships and reflection*
- › Support use of standardised evidence-based tools in practice and supervision – *but these cannot replace professional judgment*
- › Actively promote partnership working with families – *what we say, how we say it, from the top with feeling*
- › Clarity: goals, purpose, pathways... *But also adaptability*
- › Provide high quality training, CPD, peer support, reflective space and supervision – *for all agencies!*
- › Understand your decision-making processes, *don't just audit cases*
- › Congruence: supervision, management, strategic leadership all need to *model* the best of practice.

## Sensitivity, curiosity and persistence

- > Be alert to ‘professional desensitisation’ – *to children’s needs, but also families’ situation*
- > Coping mechanisms by professionals overwhelmed by the volume and complexity of their task – *not always healthy*
- > Managers should be alert to the risks of practitioners becoming desensitised in this way

(Sidebotham *et al*, 2016)

- > *How do we stay humane? How can we encourage hope?*

- › Recognises the complexity of human behaviour and relationships
- › Understands anxiety as a natural response to distress and uncertainty
- › Acknowledges practice as complex, unpredictable and uncertain
- › Emphasises use of self and the role of intuition
- › The past affects the present and we do not always realise its impact
- › Attachment theory, holding and containment are central to understanding and helping people
- › An awareness of unconscious processes and defense mechanisms is crucial in forming effective relationships
- › Argues that establishing meaningful professional relationships is the key to engagement

## Recognising we sometimes have a difficult relationship to “help”

**I don't trust you**

**I feel ashamed**

**I'm too scared to tell you!**

**You'll take my kids away**

**You'll hurt me like everyone else**



**I don't need you**

**Why are you blaming me?**

*To develop normally, a child requires progressively more complex joint activity with one or more adults who have an irrational emotional relationship with the child.*

*Somebody's got to be crazy about the kid.  
That's number one.*

*First, last, and always.*

# Thank you!



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