

Basic Introduction to Neglect Team Briefing Paper

November 2018



Leeds Safeguarding
Children Partnership

Why Talk about Neglect?

Neglect remains the most common reason for a child to be subject to a Child Protection plan or on the Child Protection register in England. In 2017 over 48% of CPPs had neglect as a factor. (NSPCC, 2018)

55% of Serious Case reviews that took place between 2011-14 had neglect as a factor. (DfE, 2016)

During 2016-17 neglect was the largest single cause of children entering care in Leeds. (Neglect Strategy 2017-22, LSCP)

How to use this briefing paper?

This paper should provide you with some basic information to deliver an awareness session with a staff team around the topic of child neglect.

- Work through the information on the sheet, using it as a prompt to promote discussions.
- Use the discussion points at the end to explore how your team works with the topic.
- Consider if there are a further training needs in your team and who is best to pursue this.

Defining Neglect

In Working Together to Safeguard Children, 2018 Neglect is defined as:

“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. 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:

- a. provide adequate food, clothing and shelter (including exclusion from home or abandonment)
- b. protect a child from physical and emotional harm or danger
- c. ensure adequate supervision (including the use of inadequate care-givers)
- d. ensure access to appropriate medical care or treatment

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

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 – this 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 – this 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: research evidence to inform practice, (2009, Action for Children)

Recognising Neglect

Neglect can be difficult to recognise.

Children who are neglected may:

- Be dirty and wear dirty clothing
- Be 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/over weight
- 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

Responding to Neglect

Due to the complex nature of neglect, sometimes it is only by professionals sharing their information that a full picture can emerge. These shared observations are essential to a timely and appropriate response to safeguarding a child.

The most important thing to remember is that doing nothing is not an option, you must take action.

If you believe a child is experiencing or is at risk of neglect, you should raise this with your line manager or with a Safeguarding Lead Officer, to consider the next steps.

If you think a child is in immediate danger, call the police on 999.

Depending on the circumstances, it may be appropriate for you to discuss your concerns directly with the family in order to get them the support they need. You need to consider whether this is appropriate in relation to the nature of your relationship with the family, for instance, you may visit them on a regular basis or you may have witnessed something in isolation.

You should always seek consent where it is safe and appropriate to do so.

Practitioners in Leeds should have a good understanding of the following approaches and use these as guiding principles when working with neglect:

- [Early Help](#)
- [Think Family Work Family](#)
- [Restorative Practice](#)

Further information on these is available on the LSCP website and Leeds City Council One Minute Guides (hyperlinked)

Areas for Consideration

- How do we recognise & respond to neglect in our service-user group?
- Is there more that we could do?
- Do we need to change any of our ways of working?
- Is there a further training need in our team?
- Who is our Safeguarding Lead?

Further Information & References

- Working Together to Safeguard Children, Department for Education, 2018
- How Safe Are Our Children 2018, NSPCC, 2018
- Neglect Strategy 2017-22, LSCP, 2017
- Pathways to harm, pathways to protection: a triennial analysis of serious case reviews 2011 to 2014, Sidebotham et al, Department for Education, 2016
- Neglect: Research Evidence to Inform Practice, P. Moran, Action for Children, 2009