

01 Background

This 7 minute briefing is a bit different, in that it is a summary of a research report about neglect. Everything in this briefing is from the report. The report is 46 pages, so this briefing will be a bit longer than usual.



Why it matters 02

Professionals struggle to make an impact in families where neglect is an issue, yet this is the most common form of child maltreatment in England.



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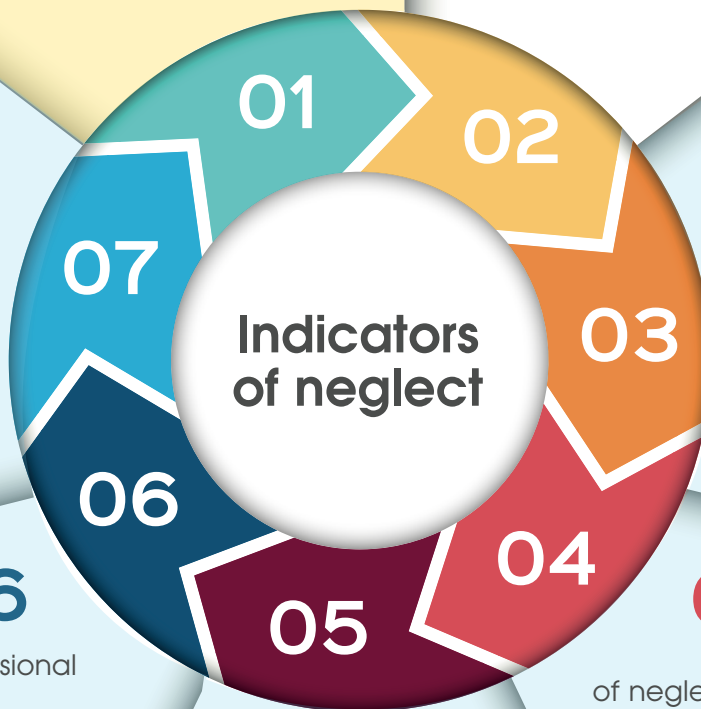
0-12months (lack of sensitivity and tuning in to infants. Not talking to babies. Finding the baby irritating and demanding. Perceiving babies as less accepting of their care).



03 Information



There is evidence that children who experience neglect alone have worse outcomes than those who experience both neglect and physical abuse. Neglect impacts on both brain structure and function



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3. 'Mindsets' hamper professional confidence and actions

It is important for practitioners to distinguish risk factors (e.g. poverty, poor living conditions, social isolation, poor mental health, domestic abuse) from indicators of neglect. Observable harmful behaviours are split into a number of categories:

1. Harmful parent-child interactions

a. Parent interaction with infants

One of the more striking features of neglecting parents was that they were psychologically unavailable to their children.

The report finds that whilst neglect is not difficult to recognise, there are numerous obstacles to effective action. The obstacles were:

1. Professionals who are concerned lack the knowledge of the impact of neglect
2. Resource constraints influence professional behaviour

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of neglected children. The overall impact of neglect is both widespread and cumulative, meaning that the longer children are exposed to neglect, the greater the harm. Resilience also falls over time, with 48% of neglected teenagers presenting as 'resilient' whereas this fell to 34% by adulthood.

Neglect can, of course, be fatal, but the majority of neglect related deaths of very young children involve accidental deaths or sudden unexpected deaths in infancy when infants lived in the context of neglect.

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- b. Parent interaction with toddlers 1-3 years. (Parents uninvolved and unresponsive to toddlers, showing little affection, ignoring toddler's cues for help or to find fault)
- c. Parent interaction with children aged 3-5. (Parents rarely talking to their children, when they do, only to give simple commands. Perceiving child to have conduct problems, not just failing to meet basic needs, but also a more subtle failure to display attentiveness and responsiveness)

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- 2. Concern about child's functioning
 - a. Infants 0-12 months old. (developmental delay, unnaturally quiet and unresponsive, do not seek comfort from care-giver)
 - b. Toddlers 1-3 years old. (Becoming less passive and more aggressive and hostile. Angry when trying to achieve tasks, angry with their mothers, perceiving them as unavailable to meet their needs)
 - c. Children aged 3-5. (learning delay, socially isolated, disruptive, poor attention span)

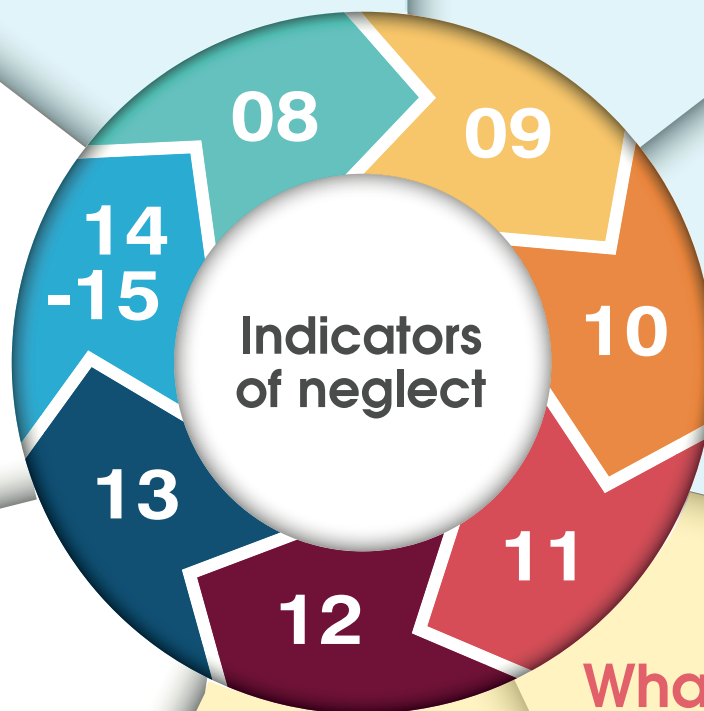
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- 3. Observable harmful parental behaviour
 - a. Poor parental supervision (looking after self, going hungry, going to school in dirty clothes, not being taken to the doctor)
 - b. Accidents. (unsafe homes, inadequate supervision)
 - c. Not meeting child's health needs

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Am I clear of the outcomes for neglected children, both short term and long term?

How can I increase my focus on the child and understanding of the child's world?



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Questions

Am I clear about what is a risk factor for neglect and what is an indicator?

Am I confident that I know how to have difficult conversations with neglecting parents?

Am I clear of what actually works in tackling neglect?

- Fears about being considered judgemental
- A focus on the parent rather than the child
- Failure to consider the child's lived experience or understand the child's world
- A fixed view of the family
- Parent's superficial or false compliance
- Not my area of expertise
- Reluctance to refer

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What to do



- 1. Ensure that you are trained in neglect and get supervision and support when working with children who are neglected
- 2. Resource constraints included professional's concerns about the obstacles they would find in obtaining services or resources
- 3. A number of 'mindsets' were found to prevent indicators of neglect from being acknowledged and acted upon:

