The experience of chronic neglect can be seriously damaging for children. The scale of the problem is also significant for childcare practitioners. Children’s experiences in Wales are very much configured by language tradition and home location in rural, urban, seaboard, valley or border regions. Their growing up is often accompanied by poverty associated with unemployment that has resulted from industrial decline. In Wales, the Assembly Government is promoting an integrated approach to children’s well-being in order to tackle substantial child poverty via strategic partnerships of service providers and service users.

National Statistics in Wales show that the number of children on Child Protection Registers in Wales registered on grounds of neglect has increased year on year, and this is now the highest category (52% of all registrations) on Child Protection Registers in Wales. (Note that registrations may state more than one category of risk.)

For a child’s name to be included on the Child Protection Register, the definition of neglect given in Working Together has to be satisfied:

‘Neglect is 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. It may involve a parent or carer failing to provide adequate food, shelter and clothing, failing to protect a child from physical harm or danger, or the failure to ensure access to appropriate medical care or treatment. It may also include neglect of, or unresponsiveness to, a child’s basic emotional needs.’

As this indicates, Working Together defines neglect as a sustained and serious failure to meet a child’s basic needs, but in practice there is likely to be a continuum of neglect from the reactive and short term to the chronic and severe.

Research highlights the deleterious effects of neglect, in its own right, on children’s development and challenges a common perception that it is ancillary to ‘more serious’ forms of abuse such as physical and sexual abuse. Given the scale of the problem, child neglect is an important issue in addressing the need to intervene effectively to protect children from significant harm and enhance their life chances. However, while the problem is growing and its seriousness is apparent, child neglect is difficult to handle.

It has often been said that neglect is itself a neglected subject, and the literature has tended to bear this out. Until recently, relatively little of the broader child protection literature has focused specifically on child neglect. To find relevant material and published research for this review, the authors searched a number of electronic databases (including Web of Science, BIDS IBSS Service, CareData, and PsychLit) using different combinations of search terms, for example: child* AND neglect*; mother* AND neglect*; father* AND neglect*; parent* AND neglect*. Only English language articles were used.
Many of the articles identified were in North American journals and may therefore relate more centrally to the experiences of families and social workers in the USA. However, it is possible to draw out some messages that are more generally applicable. In addition, there is a smaller but growing literature within the UK to assist professional thinking in a range of disciplines. It is not possible to review all the literature pertaining to neglect here, and the reader is referred to the useful review summaries found in Iwaniec 1995, Jones & Gupta 1998, Stevenson 1998, and (addressing the US literature) Gaudin 1993. What is set out here are some of the key messages from some of the main researchers on child neglect.

**CAUSES OF NEGLECT**
The literature exploring the aetiology and/or indicators of neglect operates at a number of different levels – intra-personal, inter-personal/family and social/societal - and encompasses a variety of theoretical positions.

Studies that focus on the personal characteristics of parents and the dynamics of family life identify a range of potentially interacting features that contribute to the neglect of children. Much of the research exploring individual factors focuses on mothers, reflecting the traditional association between women and caring. The concentration on women at the expense of men has been noted in relation to child protection work more generally and is particularly relevant to child neglect. Studies report that mothers often present as depressed, helpless/fatalistic, lacking in emotional maturity and with little faith in the competence and responsiveness of others.

Within the family, research suggests that there are often confused roles and a lack of structure and boundaries. There can be difficulties in expressing and attending to feelings, often with little expression of warmth or affection. Gaudin notes that the relationship between neglecting parents and their children is characterised by less frequent and more often negative interactions than in non-neglecting families. Difficulties in problem solving and conflict resolution have also been identified. The relationship between domestic violence and neglect has not been specifically researched. However the social, emotional and psychological impact of violence upon women can seriously affect their parenting capacity. Depression, fear, loss of confidence and maladaptive coping strategies such as alcohol misuse may place children at risk of neglect.

Children living in families where there is parental substance misuse may be at risk of neglect for a number of reasons: money may be diverted away from basic necessities; parents may be physically or emotionally unavailable to their children; they may not be able to offer consistent care or keep their children safe.

At the societal level, there is an association between poverty and neglect - although clearly, not all poor families are neglectful. When poverty, isolation/dislocation and racism co-exist, they can have a particularly negative impact on the functioning of families from ethnic minority backgrounds and asylum seekers. Many neglecting families are isolated within their communities and have few social contacts. The key supports for the families are relatives who frequently share the same difficulties of physical and emotional impoverishment.

Chronic neglect is unlikely to be mono-causal and is best understood from an ecological perspective. This involves looking at the way different internal and external factors in people’s lives interact. Four levels or systems
are identified: the individual or intra-personal, the inter-personal or family level, the social/community levels, and the societal level (which includes the broader cultural values and beliefs operating in a society).

The ecological approach to social work adopts a systems framework and, to understand the ways in which personal functioning is affected, focuses on the mutual interactions between individuals, their families, communities and the wider society. Social work assessments within this approach consider the balance between stressors and supports, or risks and protective factors. [...] The importance of the ecological perspective for social work lies in its ability to reveal the complex web of social interactions which help to shape personal behaviour and which need to be considered in the construction of preventative and therapeutic interventions.’ (Jack, 2000)

Within an ecological approach, assessment will identify some of the key features of each system or level for the particular family and look at the way different factors within and between the levels interact, rather than focusing on one dimension – for example, the intra-personal – and treating it in isolation. The task of the practitioner is to assess and analyse the contribution the different factors make to an understanding of that family’s situation; that is, they need to be able to synthesise the information from each level into a holistic picture of the child’s and family’s world.

**Effects of Neglect on Children’s Development**

The Framework for the Assessment of Children in Need and their Families identifies seven elements of child development: health, education, emotional and behavioural development, identity, family and social relationships, social presentation and self-care skills. Neglect can adversely affect any or all of them.

At the most basic level of development, persistent neglect has significant neuro-developmental consequences. Research suggests that it has a profound effect on the developing brain of the young infant, potentially affecting all areas of cognitive, social and emotional functioning. Further, the inattentive or unresponsive parenting often found in neglectful families can affect a child’s physical well being. This kind of parenting has been linked to non-organic failure to thrive in babies and young children and to injuries, even fatalities, resulting from lack of supervision. The literature highlights a significant and enduring connection between neglect and a child’s cognitive ability and educational performance. Neglected children not only do less well in terms of performance but also have more discipline problems, school exclusions and repeat years. These difficulties may begin in primary school and both persist and deteriorate in secondary school.

The internal world of the child, which underpins emotional development, identity and relationships, is also rendered vulnerable by neglect. Parental apathy and lack of stimulus and attunement can result in children developing an internal model of powerlessness and lack of belief in self-efficacy. Children who experience neglect are likely to develop insecure attachments and show impaired social competence. They may be smelly and scruffy; this can lead to social isolation and undermines the social skills required for social integration, as noted in the Report into the death by neglect of ‘Paul’.

Making links with research into resilience we can see that, while some children are more resilient than others, the experience of neglect is likely to
undermine the key factors that foster resilience and that act as a buffer to adversity, namely: a secure base, good self-esteem and a sense of self-efficacy.

**INTERVENTION STRATEGIES**

As would be expected, there is a correlation between the frameworks for understanding the aetiology of neglect and intervention strategies. Interventions range from individual work with caregivers and children to family work and initiatives aimed at the socio-environmental circumstances of isolation and poverty experienced by many neglectful parents/carers. However, within the literature there is a growing argument that no single method of intervention is likely to be sufficient. The chronic and multiple nature of the problems experienced by neglectful families necessitates an integrated ecological approach in which a blend of practical and therapeutic services are delivered to families, possibly for a long time.

While no one strategy of intervention may be adequate on its own, the research also cautions against a ‘one size fits all’ response. Intervention must be preceded by an in-depth assessment of the child and family that identifies the specific nature and source of their difficulties and their strengths. Crittenden argues that the characteristics of neglectful families also require a careful co-ordination of services, delivered by as small a number of individuals as possible. She suggests that the limited social competency of family members can easily be overwhelmed by the introduction of too many services and professionals.

The role and function of the practitioner and the relationship with the family has received attention in the literature. Loosely defined contact is identified by families as unhelpful and easily degenerates into unfocused surveillance. Interventions underpinned by a partnership between the practitioner and the family are seen as much more constructive. This partnership may have most to offer when it is not constructed purely in terms of case management and brokerage but involves direct work with parents and families. Dore and Alexander, drawing on resilience research and outcome measures in individual work with adults, argue that the relationship between the practitioner and the family is at the heart of the process of change and can, and should, be central to the work with neglectful families.

Timescales for intervention are considered in the literature. Distinction is made between ‘reactive’ neglect in response to a new stressor, and chronic neglect. The former may respond fairly quickly to intensive support, and clearly there is an argument for rapid, flexible, preventative family support services in these situations to avoid entrenched patterns of neglect developing. In this context, initiatives like Sure Start may have a lot to contribute in supporting parents and promoting their confidence and competence in parenting. In cases of chronic neglect, however, the picture is of long-term intensive support. In the absence of sustained, targeted work, a ‘revolving door’ syndrome develops in which families repeatedly return to agencies with the same unresolved difficulties.

Frequently, long-term work is associated negatively with the idea of dependency. Research suggests this can be avoided through the use of contracts, goals and reviews. DePanfilis identifies the importance of ‘carrying out interventions in a manner in which family members acquire a sense of control over their lives as a result of the efforts to meet their
needs’. She argues that if families feel empowered to deal with their own problems effectively, dependency on the child welfare system can be avoided. However, it may be that in cases of child neglect the concept of dependency needs to be rethought: particularly in the early stages of work, it may be a necessary part of the process of forming trusting relationships between parents/carers and key workers.

Finally it is acknowledged that intervention is not always going to be successful. Daro concluded that regardless of the type of intervention, the severity of the families’ problems was the most powerful predictor of outcome.

• Proactive assessment
  Neglect is an issue in its own right. Practitioners need to respond to concerns about the standard or quality of care that a child is receiving rather than waiting for a more clear cut trigger – for example, an accident or incident of physical abuse - before intervening.

• Addressing causes not symptoms
  A thorough assessment of the specific circumstances of each family where neglect occurs is needed in order to establish the nature of the difficulties that underpin the neglect in that case. A symptomatic response (for example, one that focuses on the domestic environment alone) is unlikely to be successful if other factors (such as relationship difficulties between parent and child or domestic violence) have not been attended to. Put simply, this means a move away from reacting to symptoms, towards an analysis of and work with the causes of neglect.

• An ecological framework
  Assessment and intervention need to be theoretically informed, and an ecological approach offers a framework within which to understand the different aspects of neglect. The causes of chronic neglect are complex and are likely to involve a number of crosscutting or interacting factors in the intra-personal, inter-personal/family, social/community and societal domains. Effective intervention will be directed at different levels according to the specific needs and concerns of the particular family.
  With the introduction of the Assessment Framework, social workers have potentially now got a very powerful tool for promoting the holistic understanding that is needed in cases of child neglect. However, care must be taken to keep all three ‘sides’ of the triangle in balance – that is, assessment needs to consider strengths and concerns within each of the domains and then how they interact.

• Multidisciplinary assessment
  Neglect cuts across children’s lives in so many ways and has the potential to compromise most aspects of their development. Reder and Duncan identified the danger of professionals failing to share discrete pieces of information. The knowledge held by an individual agency may not, on its own, appear worrying but when collated the overall picture may indicate a more significant level of concern and risk. So effective intervention will draw on a range of professional perspectives and will require a co-ordinated response from all professionals and services involved. Clear co-ordination is also necessary to avoid overwhelming the family and to prevent confusion in the professional network.
• Understanding family histories and patterns of interaction
It is important to locate assessments within the context of the family’s history. Given that chronic neglect is not a single event but a process or way of life that often spans generations, it is necessary to establish a clear picture of the family’s functioning, patterns of relationships and quality of childcare over time. Chronologies and genograms contribute to a baseline from which the severity of the problem and objectives for change can be established. In addition, direct observation of interactions between family members can generate valuable information about the actual care being offered to each child – which may not be congruent with the parent’s own perception and self-report – and the overall emotional ‘climate’ of the home.

• Matching interventions to identified needs
Intervention strategies need to be congruent with the findings of the assessment. This requires a flexible approach and the ability to match intervention to identified needs. A wide range of formal and informal responses may be needed in any one case to increase the family’s ability to offer appropriate care to vulnerable children and to support children to remain within their own family. For example, one successful project in the USA that focuses specifically on child neglect, Family Connections, offers intervention ‘packages’ that may include: the provision of ‘concrete resources, social support, developmental remediation, cognitive or behavioural interventions, individually oriented interventions, and/or family focused interventions’. (See www.childreninwales.org.uk and www.nch.org.uk - Wales – for evaluations of similar family support services in Wales.)

In terms of the nature of the support offered, the ecological literature suggests that when statutory agencies provide the social support that is missing for neglecting families, the most helpful interventions are those that mirror the everyday relationships and networks that are taken for granted by many families. For example, the support available from organisations such as Sure Start may include formal services such as counselling alongside more informal opportunities for developing friendships and local networks. Developing a network of supportive relationships and services may also require ‘thinking outside the box’ of existing local provision; examples could include linking a more experienced parent, someone with strong local connections, with a younger isolated parent and setting up weekly contact for tea, or arranging an outing for a child with a ‘social grandparent’.

• Appropriate time scales
In cases of chronic neglect, long-term intervention may be necessary. However, in order to avoid drift, interventions need to be purposeful and focused – underpinned by in-depth assessment, measurable objectives for change, strategies for achieving these changes, and ways of evaluating whether the required changes have taken place. That is, practitioners need to be able to say what a successful or acceptable outcome would look like in a particular case and how they would judge whether or not it has been achieved – and be prepared to remove a child if the necessary improvements cannot be made.

• Work with parents
The point above about addressing causes rather than symptoms identifies the need for on-going direct work with parents, using
what helps casework and empowerment skills to address whatever difficulties underpin the neglect. Casework skills are important in terms of building and sustaining a relationship within which parents can be helped to understand, learn from and ultimately change their responses to their children. Research suggests that typically neglectful parents experience themselves as powerless; a number of difficulties flow from this – for example, they often have difficulties with boundaries, problem solving and appropriate communication. So it is important that the relationship between practitioner and parent should involve interventions that empower the family members to develop a sense of personal efficacy and agency.

Parenting skills programmes may be helpful in addressing a range of family/parenting difficulties, but the literature identifies a number of factors that may militate against the success of this form of intervention. The factors noted as general contra-indications – depression, stress, low socio-economic status, lack of a sense of self-efficacy, social isolation, poor relationships, chronicity of problems – seem to reflect many of the characteristics typically associated with neglectful families. So these parents may need a lot of additional individual support to enable them to engage with, and make use of, such programmes.

Home visiting programmes, at the ante-natal and early post-natal stage, can be effective in facilitating the development of a sensitive and empathic relationship between the parent and young child, which may forestall attachment and other relationship difficulties.

- Work with children within a resilience framework

‘[Children] are living the experience and can give a more accurate picture of what life is like in a family than any assessment made externally by a professional’ (Bridge Childcare Consultancy Service, 1995)

Practitioners spend a lot of time being preoccupied with and worried about children but often spend little time working directly with them. Children may be in the best position to help professionals understand their situation so it is important that their views and perspectives are sought. Direct work with children will also provide an opportunity to monitor the children’s progress in relation to the work with the parents. Practitioners therefore need skills in age-appropriate communication - and the confidence to use these skills routinely as part of the assessment process.

Longer term, while work is being done with parents to bring about change, it is important that children remain at the centre of all activity. Positive work can be done with children to counter the adverse effects of neglect and promote resilience. Protective factors identified by research include: achievement at school, the opportunity to develop talents and interests, the experience of an enduring supportive relationship in which the child feels valued. Practice needs to be informed by an understanding of these protective factors and how they can be incorporated into the child’s life.

Many of these points are brought together in projects like the Family Connections scheme (mentioned above) that offer wide ranging programmes of intervention and support to families where the risk of neglect has been identified.
KEY TEXTS

RESEARCH

Bridge Childcare Consultancy (1995) Paul: Death through Neglect. London, Bridge Consultancy Services


Crowley A and Vulliamy C (2003) Listen Up – Children and Young People Talk: About Poverty, Cardiff, Save the Children Fund


www.dataunitwales.gov.uk

POLICY AND PRACTICE GUIDANCE


The original English version of this briefing was published in 2005 and was written and researched by Danielle Turney (Senior Lecturer in Social Work, Faculty of Health and Social Care, The Open University) and Karen Tanner (Senior Clinical Lecturer in Social Work, Tavistock Centre). A few amendments have been made for the Welsh/English bilingual version, 2006, advised by Andy Pithouse (Professor in Social Work, University of Cardiff) and translated into Welsh under the supervision of Eric Evans of Rhondda Cynon Taf Council Translation Unit. Thanks to: Brigid Daniel (Professor of Child Care and Protection, Department of Social Work, University of Dundee); Anna Gupta (Lecturer in Social Work, Royal Holloway College, University of London) This briefing has been independently and anonymously reviewed by an academic and a practitioner with special interest in services in child and adolescent mental health problems.

For references, further information and ordering information visit: www.rip.org.uk/publications/welsh.asp

©2006, original English version 2005 Department for Education and Skills, research in practice, Making Research Count