Action on Neglect
– a resource pack

ACTION ON NEGLECT

We had a health visitor to start with but unless we have problems early on they can't usually come out again because they have so many families. We are supposed to go to clinics but sometimes we can't get organised to go. Before our children go to nursery or school there may be no-one who comes to the house to check how we and the children are getting on

ACTION ON NEGLECT

Health professionals and neglect

Julie Taylor
Co-director. University of Edinburgh/NSPCC Child Protection Research Centre
[Professor of Family Health, University of Dundee – seconded to NSPCC]

ACTION ON NEGLECT

Common Themes in SCRs of serious and fatal maltreatment

- Family characteristics
- Minority previously known to CPS
- The invisible child
- <Service integration, co- operation, communications
- Failure to interpret the information
- Poor recording of information and decisions
- Decision making
- Relations with families
- Thresholds

Sidebotham, P. (2012) What do serious case reviews achieve? *Arch Dis Child* 97 (3): 189-192

ACTION ON NEGLECT

Health professionals

- Terrified of child protection issues
- Heterogeneous group
- Levels of connection and engagement
- Well-equipped to recognise parental characteristics associated with neglect
- Alert to signs of developmental delay
- Anxieties: resource constraints; perceptions of high thresholds
- Motivation to change (timescales for a child)

ACTION ON NEGLECT

New Themes Emerging

- **Importance of ecological frameworks and niches**
- **Heterogeneity**
- **Mirroring: families and agencies**
- **Exclusion of fathers**
- **Fixed thinking**
- **'Start again syndrome'**
- **The rule of optimism**
- **Silo practice**
- **Disguised compliance**
- **Vulnerability of older children and adolescents**

Sidebotham, P. (2012) What do serious case reviews achieve? *Arch Dis Child* 97 (3): 189-192

ACTION ON NEGLECT

High Profile Cases

High profile cases where children have died lend impetus to an escalating literature on resistance and disguised compliance within the child protection field.

Kyra Ishaq

Peter Connolly

ACTION ON NEGLECT

Adult Services

- GPs, mental health, addiction
- Even if client is adult, they are still accountable for issues in relation to child
- Data sharing isn't that complicated

ACTION ON NEGLECT

Parents who are 'hard to reach'

Particular groups of parents who consistently fail to engage with professionals are likely to be labelled as 'hard to reach'.

Hard to reach parents might be perceived as difficult, obstructive and resistant.

Adults who abuse substances or have mental health difficulties do not always demonstrate rational behaviour.

ACTION ON NEGLECT

E.g. Burns

- Average age for children burned as a result of neglect 2.7 years (2.1 physical abuse).
- Mostly scalds
- Most had been identified as at risk before accident, all were returned home after
- Neglected children – delayed seeking help; after-care
- Burns would be deeper

ACTION ON NEGLECT

Types of parents who may be defined as hard to reach:

- Resistant
- Substance misuse
- Travellers
- Some BME groups
- Home schooling
- Rural isolation
- Sectarianism
- Etc etc etc

However, some might be willing to engage if services were more accessible

ACTION ON NEGLECT

Is this child safe?

- In neglect this should be based on 'is this good enough' rather than 'is this as good as it can be'?
- Attendance at outpatients etc.
  - Reconceptualise as 'was not brought' as opposed to 'did not attend' (Appleton and Powell 2012)
- Disabled children
- Domestic abuse is always significant
- Record keeping is fundamental
- The therapeutic relationship
  - Parents can be devious. Not our job to be their friend

ACTION ON NEGLECT

E.g. School nurses

- Passive and uninvolved
- Active and firm

Active and firm school nurses were not afraid of interfering and did not wait needlessly, expecting things to out right by themselves. Many of the nurses sent a letter to the child's home or telephoned the family as problems arose. The school nurse might also ask the whole family to visit him or her; they showed interest in their clients and cared for him or her

ACTION ON NEGLECT

Solutions

- Responsive pathways
  - Eg Vulnerable Cildren's Teams – link from health services to Children's Social Care for advice on individual families
- Early Years provision
  - Family Nurse Patrnership
  - Enhanced health visitor services
  - Outreach from Children's Centres

ACTION ON NEGLECT