

## WHAT DO WE MEAN BY NEGLECT?



The Social Services and Well-being (Wales) Act 2014 includes the following definition: “neglect” (“esgeulustod”) means a failure to meet a person’s basic physical, emotional, social or psychological needs, which is likely to result in an impairment of the person’s well-being (for example, an impairment of the person’s health or, in the case of a child, an impairment of the child’s development).

Neglect is the failure to meet a child’s basic and essential needs including physical, emotional and medical needs. It can include a

failure to provide adequate food, clothing and shelter, failure to protect a child from physical and emotional harm and failure to provide adequate medical care or treatment.

It can occur during pregnancy as a result of maternal substance abuse. It can also occur before a child is born where a parent fails to prepare appropriately for the child’s birth, fail to seek ante-natal care, and/or engage in behaviours that place the baby at risk.

Neglect can take different forms, ranging from obvious physical signs such as being inadequately clothed to young children being left alone in their home or on the streets for long periods of time. Children may lack parental support to go to school, miss health appointments, and be ignored when distressed.

**Evidence base** - Neglect has the potential to compromise a child’s development significantly. While research suggests that neglect can be particularly damaging in the early years where it can affect social, emotional and neurobiological development – it can compromise development throughout childhood and adolescence. There can be long term consequences of neglect well into adulthood.

Practitioners may have fears about being considered judgemental when working with disadvantaged families and this impacts on their consideration of whether harm is being done to the child.

Neglect rarely presents as a crisis that demands immediate action, it commonly occurs alongside other forms of abuse and practitioners

may become accustomed to the chronic nature of neglect. An effective response also requires practitioners to look beyond episodes of individual parenting and understand the neglect in context.

In cases of chronic neglect (as opposed to acute singular incidents) many agencies get involved and multiple interventions are attempted over time with limited impact. Families may be subject to numerous referrals and interventions over many years, with changes in lead practitioners leading to a situation where they attempt to promote change without fully recognising a prior cycle of brief improvements and relapses by the family.<sup>13</sup> Gathering historical information and evidence about a case of possible neglect in order to inform a chronology is particularly important in

informing decisions about the risk to a child’s well-being and development.

There is also evidence of ‘false optimism’ in neglect cases where practitioners note parent engagement but do not consider if change is happening in a way that makes a real difference to the experiences of the child. Neglect cases may also be particularly vulnerable to ‘disguised compliance’.

### Learning for improved practice

- Build up a picture of cumulative experiences of neglect and assess parental capability to change
- Retain professional curiosity and respectful uncertainty
- Engage families
- Work closely with other agencies to identify concerns and plan interventions
- Provide timely and holistic early help
- Undertake robust and comprehensive assessments

Where there are concerns around neglect, all professionals should be supported to use a risk assessment toolkit. Evidence-based assessment tools recommended in reviews include:

- the Graded Care Profile (GCP) which provides a structure for assessing the type and level of neglect so it can be addressed in a timely and appropriate way