

## What Causes Neglect?

In order to be able to successfully intervene in neglect cases, there needs to be a full understanding of all of the factors to understand what prevents adequate parental capacity to respond to a child's needs. It is important that practitioners do not confuse the symptoms of neglect with the causes of neglect, as any interventions must primarily tackle the cause.

Increased risk of neglect and emotional abuse may be more likely in homes where:

- there is domestic abuse; substance misuse; unemployment or mental ill health;
- an absence or perceived absence of a helpful supportive network;
- a lack of intimate emotional support or poverty. As with all child protection assessments, factors like this should be specifically explored when assessing the child, although their absence does not mean neglect or emotional abuse will not be present.

**The parent themselves** – e.g. are they very young? Do they have a learning disability or mental health problem? Do they exhibit behaviours that can impact on their ability to care for a child e.g. do they misuse alcohol or drugs, or experience domestic violence?

Was their **own experience** of being parented damaging enough to impact on the care they give their own child?

**Are there wider environmental issues** – are they isolated in their community? Do they suffer discrimination and/or poverty?

**How is the mental health of the parents?** Depression is the most common form of mental illness affecting mothers. This is especially concerning when it is post-natal depression as it can interfere with the mother's ability to respond to her children's needs.

The NSPCC pose some specific questions on neglect:

**What might you notice in the main carer-child interaction in infants (less than 12 months old)?**

The main caregiver may not seem to be tuned in to their child's needs, or sensitive to their child's feelings. They speak little to them, and when they do it is often in the form of orders, with very little positive feedback.

They describe their babies as irritating and demanding. Even within the first few days of life, you may observe that the main caregiver fails to engage with their child emotionally during feeds.

**What might you notice in the main carer-child interaction among toddlers (1-3 years)?**

As the child becomes older, it may be obvious that the parent remains unresponsive and uninvolved with their child, or fails to respond to them appropriately (known as 'lacking attunement'). They are often critical of the child, and ignore their child's signals for help. In some

instances they even seem comfortable when their child is struggling to complete a task. When the parents are critical or verbally aggressive, the child shows more anxiety.

### **What might you notice in the main carer-child interaction among older children (age 3-6)?**

In this age group, it may be evident that the parents are not engaged in playing with the child; they show little affection and are unlikely to reach out to the child to relieve their distress. The mothers may offer less praise and show less positive contact.

They speak little to the child, which may contribute to language delay that is evident in emotionally neglected or abused children of this age. Neglectful mothers are more likely to resort to physical punishment than other mothers.

### **What might you notice in a child age 5-14?**

The impact on behaviour is often greatest when neglect starts early in a child's life, or if the child is both neglected and emotionally abused. They may present as aggressive and hostile, for example the child may be prone to angry outbursts or lashing out towards others.

They may be more impulsive than other children and may show features seen in Attention Deficit Hyperactivity Disorder (ADHD), for example poor concentration or impulsive behaviour.

Neglected children specifically, may be particularly quiet or withdrawn.

The **Graded Care Profile** is an assessment tool that allows practitioners to produce an objective measure of the quality of care given to a child by looking at four key areas: physical, safety, love and esteem, adapted from Maslow's hierarchy of human needs (Maslow 1954).

The assessment is conducted during home visits and identifies the care-givers' strengths and weaknesses and highlights areas for change.

More information on the Graded Care Profile can be found on the Suffolk CYPS Good Practice Guide or LSCB threshold document. There you will find instructions for use and further guidance and information.

The NSPCC have undertaken a national evaluation of the Graded Care Profile (GCP) as to how the GCP assessment tool helps practitioners identify when a child is at risk of neglect.

The report looks at the value of using the GCP in practice and why it was not used when it could have been. It draws on a range of perspectives including the views of practitioners and managers, parents, Local Safeguarding Children Boards (LSCBs) and GCP trainers. The Graded Care Profile (GCP) helped professionals identify risks of child neglect and potential harm more effectively and promoted positive change for families. Useful features included the scoring process which helped to quantify neglect and make neglect more visible to professionals and to parents.

The GCP encouraged practitioners to focus on the child's experience rather than focusing on the adults' needs which helped in the assessment of care.

Using the GCP contributed to a constructive working relationship between practitioners and families by:

- Identifying parenting strengths as well as weaknesses.
- Helping create a participative process that promoted parental engagement.
- Helping parents understand professionals' concerns.

Suggested improvements to the GCP were incorporated into a second version of the tool called GCP2. The NSPCC tested GCP2 for reliability and validity between September 2014 and August 2015 through NSPCC service centres.

They set out these findings in an additional report Both reports are part of the NSPCC [Impact and evidence series](#).

[National evaluation of the Graded Care ProfilePDF / 433 KB](#) - **Authors:** Robyn Johnson and Richard Cotmore. **Published:** 2015

**The Signs of Safety model** is a tool intended to help practitioners with risk assessment and safety planning in child protection cases.

More information on Signs of Safety and the full Suffolk LSCB Neglect Strategy is available on the LSCB website - [www.suffolkscb.org.uk](http://www.suffolkscb.org.uk)