



Identification of Neglect

What is Neglect?

Thanks to South Gloucestershire Children's Partnership for permission to use the information in this section which is taken from the South Gloucestershire Children's Partnership Neglect Guidance & Toolkit (2022)

Howarth (2007) identified neglect as follows:

- **Medical neglect** is where carers minimise or deny a child's illness or health needs, or neglect to administer medication or treatments. It includes neglect of all aspects of health care including dental, optical, speech and language therapy, and physiotherapy
- **Nutritional neglect** is usually associated with inadequate food for normal growth leading to "failure to thrive". Increasingly another form of nutritional neglect from an unhealthy diet and lack of exercise can lead to obesity, which increases the risks to health in adulthood
- **Emotional neglect** can be defined as the "hostile or indifferent parental behaviour which damages a child's self-esteem, degrades a sense of achievement, diminishes a sense of belonging and stands in the way of healthy, vigorous and happy development". It is the non-deliberate consequence of a carer's neglectful behavior (Iwaniec, 1995)
- **Educational neglect** includes carers failing to comply with state requirements, but also include the broader aspects of education such as providing a stimulating environment; showing an interest in the child's education and supporting their learning including that any special educational needs are met.
- **Physical neglect** refers to the dirty state of the home, lack of hygiene, lack of heating, inadequate and/or broken furniture and bedding. It may include poor or inadequate clothing, which mark a child as different from his peers resulting in isolation or bullying. It also refers to a lack of safety in the home, exposure to substances, lack of fireguard or safety gates, and exposed electric wires and sockets.
- **Failure to Provide Supervision & Guidance** refers to the carer failing to provide the level of guidance and supervision to ensure that the child is physically safe and protected from harm.

The following categorisations based upon research (Crittenden 1999, cited in NCH Action for Children, 'Action on Neglect' 2013) may help to plan and manage neglect cases. The research suggested that neglect can be grouped as follows:

	Disorder Neglect (driven by chaos and crisis)	Emotional Neglect (absence of empathy, not good at forming relationships)	Depressed Neglect (withdrawn and dulled parental characteristics, unresponsive)
Indicators	<p>Families have multi problems and are crisis ridden</p> <p>Care is unpredictable and inconsistent, there is a lack of planning, needs have to be met immediately</p> <p>Parent appears to need/want help and professionals are welcomed, but efforts by professionals are sabotaged by the parent</p> <p>Generational abuse</p> <p>Children become overly demanding to gain attention</p> <p>Families constantly recreate crisis, because feelings dominate behaviour</p> <p>Parents feel threatened by attempts to put structures and boundaries into family life</p> <p>Interpersonal relationships are based on the use of coercive strategies to meet need</p> <p>Families respond least to attempts by professionals to create order and safety</p>	<p>Opposite of disorganised families where focus is on predictable outcomes</p> <p>Family may be materially advantaged and physical needs may be met but no emotional connection made</p> <p>Children have more rules to respond to and know their role within the family</p> <p>High criticism/low warmth</p> <p>Parental approval/attention achieved through performance</p> <p>Children learn to block expression/or awareness of feelings</p> <p>They often do well at school and can appear overly resilient/competent</p> <p>mature</p> <p>They take on the role of caregiver to the parent which permits some closeness that is safer for the parent</p> <p>Children may appear falsely bright, self-reliant, but have poor social relationships due to isolation</p> <p>Parent may have inappropriate expectations in relation to the child's age/development</p>	<p>Parents love their children but do not perceive their needs or believe anything will change</p> <p>Parent is passive and helpless</p> <p>Parent is uninterested in professional support and unmotivated to change</p> <p>Parental presentation is generally dull/withdrawn</p> <p>Parents have closed down awareness of children's needs</p> <p>Parents may go through the basic functions of caring, but lack responsiveness to child's signals</p> <p>Child is likely either to give up through lack of response and become withdrawn/ sullen, or behaviour may become extreme</p>



	in the family	Parent will feel threatened by any proposed intervention	
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	Disorder Neglect	Emotional Neglect	Depressed Neglect
Possible Solutions/ Interventions	<p>Feelings must be attended to in order to develop trust, express empathy and reassurance, be predictable and provide structure in the relationship</p> <p>Mirror the feelings</p> <p>Gradually introduce alternative strategies to build coping skills</p> <p>Support will be long term</p>	<p>Parents need to learn how to express feelings/ emotionally engage with the child</p> <p>Children will benefit from socially inclusive opportunities</p> <p>Help parents to access other sources of support to reduce isolation</p> <p>Child needs support from non-abusing family member</p>	<p>Children benefit from access to outside stimulation e.g. day care</p> <p>Parents unlikely to respond to strategies which use a threatening approach that requires parents to learn new skills</p> <p>Medication may be helpful but beware side effects</p> <p>Emphasise strengths</p> <p>Parental education needs to be incremental and skills practiced and reinforced over time</p> <p>Support likely to be long term</p>
Practitioner Caution	<p>Practitioner can become easily absorbed into the family, resulting over-optimism and feeling positive about minimal change when in fact the needs of the child remain unchanged</p>	<p>Practitioners find this type of family difficult to work with because of the lack of understanding of emotional warmth by the parent. Removal of the child will reinforce their feelings of rejection</p> <p>As families may appear successful, there is less likely to be professional involvement</p>	<p>Often linked to substance misuse or mental health problem. Practitioners need to be realistic about the level of change. Easy for practitioners to get caught up in the sense of 'hopelessness'</p>



Affluent Neglect

Thanks to Merton Safeguarding Children Partnership for use of the information in this section.

Considering Affluent Neglect

Affluent neglect refers to the neglect experienced by children in wealthy families. This can be more difficult to spot, as the kind of neglect experienced by children and young people in these circumstances is often emotional.

There are a few risks that children from all walks of life face; being a child in an affluent family is often perceived to protect those children from some of these dangers. Children from wealthier, more 'stable' families are not as sheltered from neglect as is often assumed.

Emotional Neglect

In wealthy families, it can be the case that parents work long hours, leaving children in the care of paid nannies or au pairs. This can create a disconnect emotionally and leave children feeling lonely, with their emotional needs unfulfilled by their parents.

Affluent parents may also put a high amount of pressure on their children to succeed at school, which can sometimes lead to psychological and emotional problems for children.

Parental Alcohol and Substance Abuse, Domestic Violence, and Parental Mental Illness

These three factors are known as the "Toxic Trio" and are frequently considered as problems that only occur in poorer families, when, in reality, they can be found in any type of family and have lasting effects on the children in the home.

Drug Use and Sexual Activity

It can be the case that, due to a lack of parental supervision and guidance, wealthier parents may have a more relaxed attitude to the risks their children take, or in many cases aren't sufficiently present or available to know about what their children are doing. This often leads to increased risks for their children, who often have the financial access to facilitate drug abuse and the independence to engage in harmful sexual activity.

Why is Affluent Neglect often overlooked?

There are several barriers that may prevent more affluent children, who are experiencing these types of neglect, from accessing the support they need. Firstly, their symptoms may be harder to spot. The nature of emotional neglect can make it much harder to identify than other types of neglect. For example, due to the family having hired help to care for the children they may present as clean, well-dressed, and properly fed when they are, in reality, experiencing emotional neglect.

Staff training often focuses on children from poor or working-class families, so staff in educational settings may not be adequately trained to identify and intervene with cases of neglect among their wealthier families.



Wealthy families are often not 'on the radar' of protective services. There may also be increased hostility towards agencies, such as social services, from more affluent families, making it more difficult to improve outcomes for children in these circumstances.

The role of unconscious bias also needs to be considered when working with children from wealthier families. Schools and school staff may miss important pieces of the puzzle when they assume that children from wealthy families are less at risk than those from poorer backgrounds. These children may be coming in with new clothes bearing expensive brand labels. It is easy to make presumptions from these indicators that a child is being well looked-after.

Children attending boarding school are even more difficult to identify as neglected. Their parents may often live out of the area or even out of the country. This adds another layer of complexity and can prove challenging, not only for identifying issues in their home life, but also for corresponding with parents to improve child outcomes.

What is the impact?

The emotional neglect, exposure to the toxic trio, and lack of supervision sometimes faced by children from affluent families are adverse childhood experiences (ACEs). ACEs can affect brain development and change how a person's body responds to stress. They have a lasting impact on an individual and the consequences of these adverse experiences can lead to long-term mental and physical health problems, as well as substance misuse and addiction in adulthood.

Further Reading

Website: [Neglect and Affluent Neglect - Merton Safeguarding Children Partnership \(mertonscp.org.uk\)](https://mertonscp.org.uk)

Special report: [Emotional neglect in children with affluent parents \(willispalmer.com\)](https://willispalmer.com)

[Report Neglect in Affluent Families – Dr. Claudia Bernard](#)