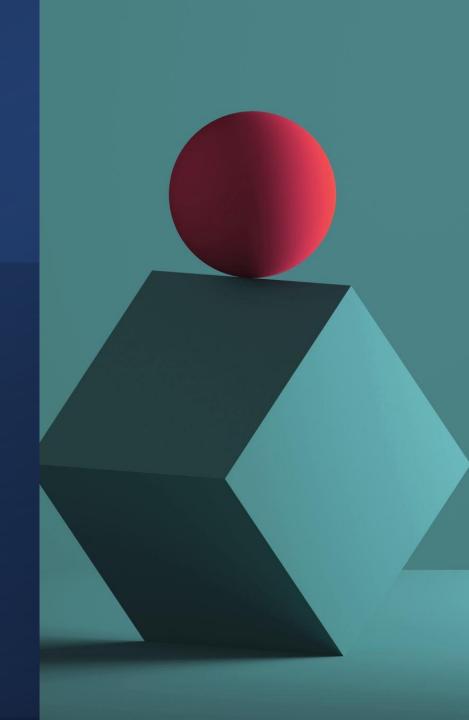
# NEGLECT and TRAUMA

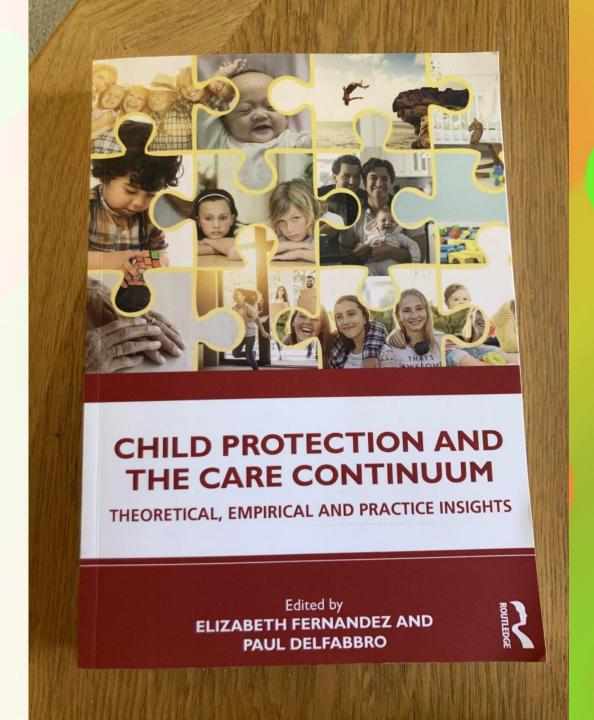
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# SOME OF THE NEXT SLIDES FROM

Loving, A. & Shemmings, D. (2021)
'Working with Cases of Neglect and
Emotional Abuse'. Chapter 4 in *Child*Protection and the Care Continuum:
Theoretical, Empirical and Practice
Insights (eds. Fernando, E. &
Delfabbro, P). Routledge.



# EXAMPLE 1 (from Alice's work)

A few years ago, I did a visit with an assistant team manager to a three-year-old boy who had been in and out of social care involvement since he was born. We were aware that in the mornings the mother would take her son out of the cot and let him roam around the flat while she went back to bed. On this particular visit, there was food, clothes and paper all over the floor, a tub of Sudocreme that he had spread across the living room and a number of nappies, one of which was heavily soiled. The family had recently got a puppy and the puppy had clearly been urinating and defecating around the flat. At one point, the little boy picked up a small clump of faeces and squished it into his palm. Proceedings for his removal from her care had been initiated, but social services had not been granted an Interim Care Order (ICO) at the initial hearing and so they had to wait for the final hearing to apply for this ... (The initial view was that an 'incident' or something more tangible – such as 'a coal fire burning in the corner' - was needed ...)

#### **DEFINITIONS**

Single definitions of neglect are rare, perhaps because neglect relates to an absence of a behaviour, unlike the other categories of abuse (physical, emotional, sexual) that focus on the presence of a specific behaviour.

The parameters of neglect therefore appear more open and varied. Even within the four countries of the United Kingdom, the definitions of neglect are not identical. However, there are shared similarities (Gardner & Cuthbert 2016).

The common areas referenced within the literature are:

- Parents persistently not meeting their child's basic needs, physically and/or emotionally.
- Not protecting a child from harm and/or providing inappropriate levels of supervision.
- Not seeking medical advice or correctly administering medication.
- Environmental neglect: the conditions in which the child is living.

#### **WORKING TOGETHER 2023 DEFINITION**

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. Neglect may occur during pregnancy as a result of maternal substance abuse. Once a child is born, neglect may involve a parent or carer failing to:

- provide adequate food, clothing, and shelter (including exclusion from home or abandonment)
- protect a child from physical and emotional harm or danger
- ensure adequate supervision (including the use of inadequate caregivers)
- ensure access to appropriate medical care or treatment
- provide suitable education (addition from the 2018 version)

It may also include neglect of, or unresponsiveness to, a child's basic emotional needs (HM Govt Dec. 2023)

**Here** is the most recent (Dec 2023) version

## EMOTIONAL ABUSE AND NEGLECT

The National Institute for Clinical Excellence (NICE 2017) guidelines list the following behaviours under their definition of emotional abuse that specifically relate to parent—child interactions:

- Negativity or hostility towards a child or young person.
- Rejection or scapegoating of a child or young person.
- Developmentally inappropriate expectations of/or interactions with a child, including inappropriate threats or methods of disciplining.
- Exposure to frightening or traumatic experiences.
- Using the child for the fulfilment of the adult's needs (for example in marital disputes).
- Failure to promote the child's appropriate socialization (for example involving children in unlawful activities, isolation, not providing stimulation or education).

The National Society for the Prevention of Cruelty to Children (NSPCC 2014) refers to emotional abuse as behaviour that causes the child to feel *worthless*, *unloved or inadequate*.

#### PREVALENCE

- In terms of prevalence, the Department for Education published statistics stating that during 2016–2017, in the UK, 48% of child protection plans detailed neglect as the main concern.
- Emotional abuse is listed as the second most common form of known abuse, featured in 33.8% of cases.
- Therefore, focusing this chapter on both forms of abuse and the potential parental mechanisms that may contribute to its presence, as well as the potential useful forms of intervention, appears both relevant and meaningful for current practice.
- Others (for example, Bilson 2018; Tickle 2018) seriously question whether the notion of 'future risk of emotional harm' can be 'justified grounds to remove children' (Bilson 2018). (Here is a PPT presentation by Andy Bilson)

#### **Adverse Childhood Experiences**

Traumatic events that can have negative, lasting effects on health and wellbeing



People with 6+ ACEs can die

Incarcerated parent

20 yrs

earlier than those who have none



1/8 of the population have more than 4 ACEs

#### 4 or more ACEs

the levels of lung disease and adult smoking and adult smoking

depression

more likely to develop



the level of intravenous drug abuse



4.5x

the number of suicide







Adverse childhood experiences are the single greatest unaddressed public health threat facing our nation today

Dr. Robert Block, the former President of the American Academy of Pediatrics



67%

of the population have at least 1 ACE

Disease, Disability, Social Problems

Disrupted Neurodevelopment

Adverse Childhood Experiences





#### RESEARCH FINDINGS

Horwath and Tarr (2015) present four themes to emerge from research that explored 'child visibility in cases of chronic neglect'.

- 1. 'Generalised assessments and the neglect of identity'. The lived experience of the child and the impact of these experiences appeared to be missing ... The internal working model of self and other refers to one's thoughts and feelings about who they are as a person and their understanding and expectations of others. This model starts to formulate in early childhood and derives from our relational interactions and experiences. The researchers question how it is possible to meet the child's individual needs without conveying a true sense of who they are.
- 2. 'Superficial engagement by ... workers with children'. They noted 'generalised comments' when it came to detailing the wishes and feelings of the child such as, 'X would like mother to stop drinking' and 'J wants dad to stop hitting mum'. Therefore, there was limited evidence of what it was like for X to experience a mother who drank heavily.

# RESEARCH FINDINGS (Horwath and Tarr cont'd)

- 3. 'A lack of awareness of the different needs of children in the family'. They stated that when there was a number of children in the family, they could be viewed more as a 'sibling group'. Despite each child having a separate report for the child protection conference, often the same statements were used in relation to descriptions of the impact of parental behaviour on the child. The example given to demonstrate this was a statement such as 'child is dirty and unkempt' under the heading of 'social presentation'. The authors discuss how this term was regularly used with all siblings and that it was then seen as the responsibility of the conference panel to reflect on how this might affect a teenager differently from (say) a two-year-old.
- 4. *'Parenting in a vacuum'*. Of participants surveyed, 50% felt that some child protection plans consisted of lists of actions for the parent to address with an absence of 'child-focused outcomes'. They note that 'generalised statements' were being used to discuss the progress of the family such as, 'everything going well; drinking at an acceptable level; no issues arising; engaged with services'. Progress indicators were predominantly based on 'measurable actions', such as 'better home conditions, improved school attendance, keeping health appointments, parents engaging with services and attending parenting course'. Therefore, there was a lack of connection with the lived experience of the child.

#### THE IMPORTANT WORK OF BRIDGET DANIEL

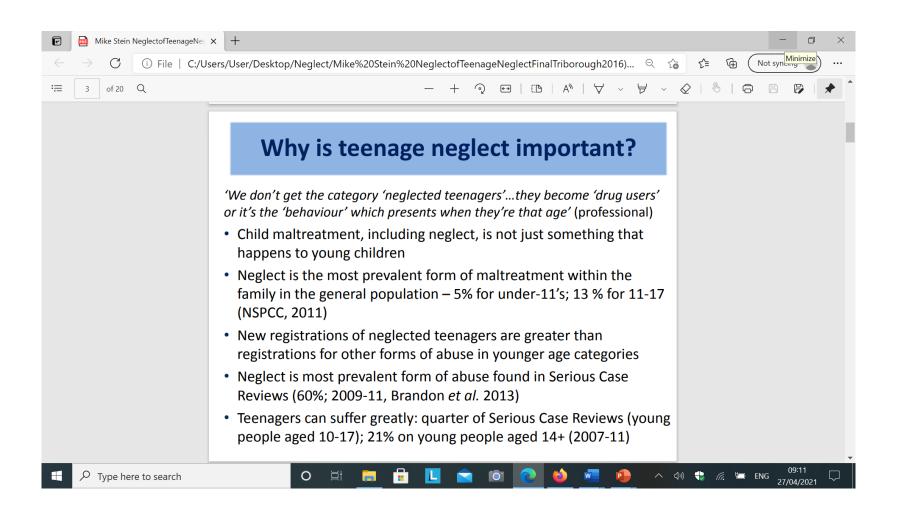
Daniel (2015) believes that the planning, assessment and intervention of neglect cases has become 'mired in bureaucracy'. She urges practitioners to first simply consider these questions:

- What does this child need?
- What does this child need me to think?
- What does this child need me to do?

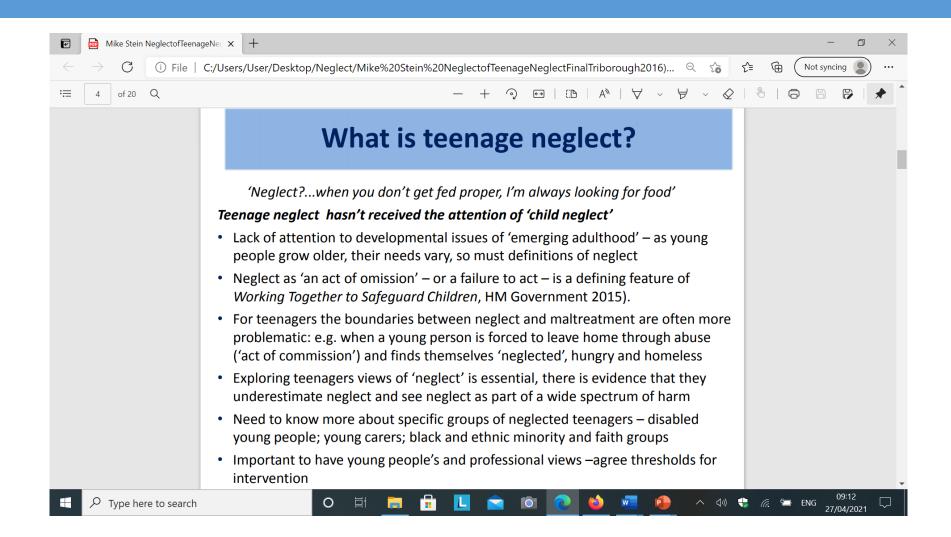
The article has an interesting title ... 'Why Have We Made Neglect So Complicated? Taking a Fresh Look at Noticing and Helping the Neglected Child. Child Abuse Rev., 24:82–94.

# NEGLECT AND ADOLESCENCE (Prof Mike Stein – see also

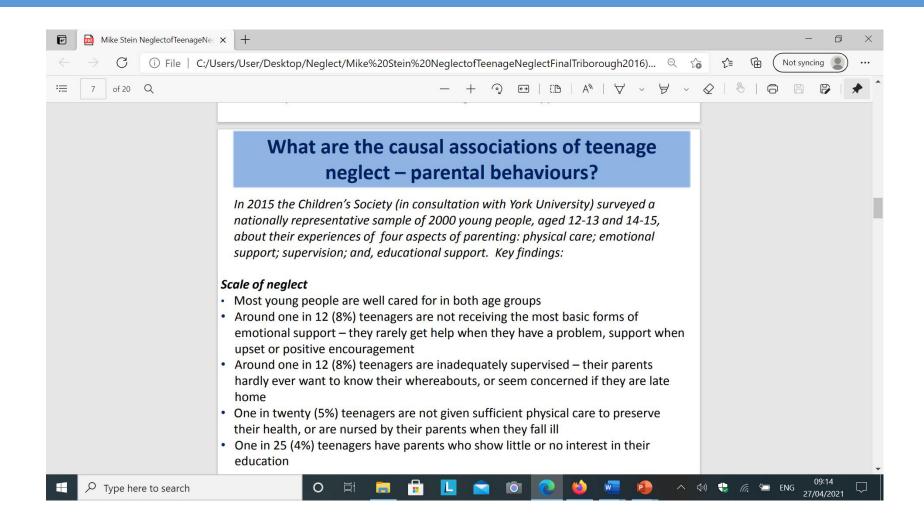
https://www.saferchildrenyork.org.uk/Downloads/thinking\_about\_adolescent\_neglect\_report-ChildrenSociety.pdf)



## NEGLECT AND ADOLESCENCE (Prof Mike Stein)

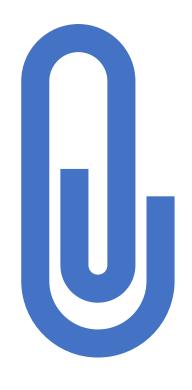


## NEGLECT AND ADOLESCENCE (Prof Mike Stein)



# RECENT FINDINGS ON TEENAGERS

- Millennium Study Feb 2021 (interviewed when 17)
  - 1 in 14 had deliberately hurt themselves with the aim of taking their own life
  - 24% had self harmed
    - 1 in 3 females
    - 1 in 5 males
- <u>Study in Finland</u> (n=1750) found that teenage loneliness was associated with compulsive internet use
- Connection with gangs, trafficking, CSE ... (but consider Prof Carlene Firmin's ideas on Contextual Safeguarding)

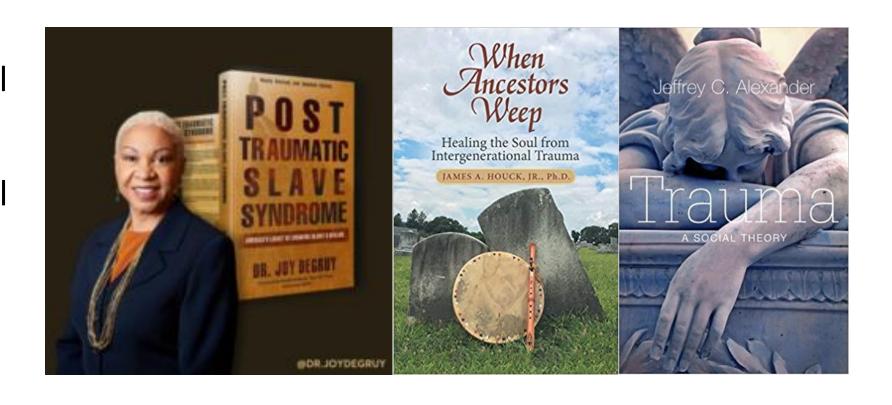


# Two types of trauma

- 1. Event-based trauma
- 2. Relationship-based
  - And now Betrayal
     Trauma

### Oppression, Racism and Trauma

- Intergenerational consequences of racism
- Intergenerational trauma from slavery
- Cultural trauma and Collective Identity



# Also look at the work of Dr Taiwo Afuape

"Mental health services are still largely about managing and/or reducing psychiatric symptoms, rather than challenging the root causes of emotional, mental and spiritual distress. You could even call it medicating away protest. It is normal and adaptive to respond to adversity, harm and oppression by being sad, angry, disoriented, hyper-vigilant, disconnected, anxious and/or suspicious."

• For the full text of the interview visit <a href="http://airforafrica.org/2015/11/17/air-interview-dr-taiwo-afuape/">http://airforafrica.org/2015/11/17/air-interview-dr-taiwo-afuape/</a>



Remember

'Trauma is an ordered reaction to a disordered environment' (Rosenthal, Reinhardt and Birrel, 2016)



## Overall approach

- Several studies have reported that survivors find professional input unhelpful if they:
  - avoid addressing the trauma
  - ask for too much detail
  - encourage expression of feelings when it is not appropriate
  - minimise the significance of the trauma in the client's current life.