**<u>1. BACKGROUND</u>** Neglect is the ongoing failure to meet a child's basic needs. In Glasgow it is the main reason for a child to be the subject of a child protection plan and on the child protection register (Scottish Government 2019). It is a significant factor within serious case reviews (Vincent 2010). Neglect takes many forms and can be tricky to define as it can be subjective compared to other forms of abuse. Professionals from all agencies must be able to recognise both physical and emotional neglect with a realization of the impact on the child.

**2. WHY IT MATTERS** Neglect is a serious form of harm. It is classed as an Adverse Childhood Experience (ACE) often causing lifelong physical and/or mental health consequences (Bellis et al 2019). It is potentially fatal. Neglect affects the ability to form relationships not only with the child's caregiver as it interferes with the attachment process but with others throughout life. The type of neglect along with the severity, frequency affects the impact. The child's resilience which is defined as normal development under difficult circumstances (Fonagy et al, 1994) coupled with any other protective factors may buffer some of the effect.

**3. INFORMATON** Neglect is not a singular dramatic event but an accumulation of issues over time. The ongoing failure to meet a child's physical and/or psychological needs are likely to result in impairment of the child's health or development. It can occur in pregnancy if a mother has drug/alcohol issues. After birth the neglect may involve the parent(s) /carer(s) failing to provide adequate food, clothing, shelter, failing to protect from physical and emotional damage or harm. Also not ensuring adequate supervision, access to medical care and/or being unresponsive to child's basic emotional needs (Sidebotham et al 2016).

<u>4. CAUSES OF NEGLECT</u> In its broadest terms compromised parental capacity can be considered as the cause. Capacity can be compromised by issues such as poor mental health, addiction, learning difficulties. Sometimes neglect is 'hidden' by the more obvious parental issues. It is highly unlikely to be a 'quick fix' situation.

5. PROFESSIONAL CURIOSITY The significant case review into the death of Child B (Glasgow CPC 2019)



highlighted a need for workers to have more professional curiosity and have confidence in their concerns about a child. Child B died aged two years five months malnourished, filthy with a severe lice infestation. Child B's mother and partner are now serving a custodial sentence for her neglect. We need to take neglect seriously, understand that children and adults speak about it differently and listen to the child. Think about what a day in the life of this child may be like? Professional curiosity can unveil signs of abuse/neglect when looking at seemingly unrelated incidents. When visiting a family instills a feeling of dread, think how it must feel to be a young child in that environment.

**<u>6. WHAT TO DO</u>** Be vigilant to the potential or presence of neglect. Low level concerns can be indicators of later neglect. Further investigation and information gathering is always warranted. We know that early intervention is often the key to enhancing positive futures. A detailed chronology will help build a picture of disguised compliance, medical neglect through missed appointments and non-engagement with agencies.

**7. QUESTIONS TO CONSIDER/ACTIONS What** would you expect to see in a child who was neglected, what might they tell you? What would you observe in the parents behaviours? I.e. what would they say? do? Constructively challenge by asking probing questions that can often clarify/expose gaps in information. Listen to what the child is saying both verbally and often non-verbally. Referral to social work. Use of tools available to gather information e.g. 'Care Toolkit'. The toolkit helps agencies assess circumstances where neglect is evident but can also help evidence where families are improving.