



# Information sheet 2a

## Assessing for Neglect: Points to consider

Identifying any form of child vulnerability is not an easy task and assessing for possible neglect is particularly complex. Unlike the other forms of maltreatment; when examination of a single event can sometimes be enough to indicate the need to take action to protect a child; assessing for neglect often requires considering patterns of care over time. It also requires a focus on what is absent (a lack of care) rather than on what is present (a purposeful act to harm). More than for other forms of abuse the identification of neglect relies on the subjective determination by the health worker that there is a deficit in child rearing practices that could realistically be predicted to result in current or future harm to the child.

Determining whether child neglect has occurred is based on the answers to two primary questions:

1. Do the conditions or circumstances indicate that a child's basic physical and/or psychological needs are consistently unmet?
2. Is this failure likely to have significant detrimental consequences for the child's physical and/or psychological development?

To gather information to answer these questions, the focus needs to be on examining the pattern of how the child's basic needs are met, or not met, and on identifying situations that may indicate specific omissions in care that have resulted in harm or the risk of harm to the child.

Affirmative answers to any of the following questions can contribute to the building up of a picture that a child's physical, medical or emotional needs are not being met such that current or potential neglect needs to be considered and acted on.

### Unmet Physical and Medical Needs

1. Have the parents or caregivers consistently or acutely failed to provide the child with needed care for a physical injury, acute illness, physical disability, or chronic condition?
2. Have the parents or caregivers consistently failed to provide the child with regular and ample meals that meet basic nutritional requirements or have they failed to provide the necessary rehabilitative diet to a child with particular health problems?
3. Have the parents or caregivers consistently failed to provide the child with appropriate and/or clean clothing? Have they consistently failed to attend to the cleanliness of the child's hair, skin, teeth, and clothes? As it can be difficult to determine the difference between marginal hygiene and neglect, any pattern of chronicity, as well as the impact on the child needs to be taken into account.
4. Does the home have obviously hazardous physical conditions (e.g. exposed wiring or easily accessible toxic substances) or unsanitary conditions (e.g. faeces-or trash-covered flooring or furniture)?
5. Does the child experience consistently unstable living conditions (frequent changes of residence, caretaker's mental illness, domestic violence, substance abuse, or extreme poverty)?

6. Do the parents or caregivers consistently fail to arrange for a safe substitute caregiver for the child and/or expect younger children to be cared for by older primary school-age children/siblings?

### Unmet Emotional, Nurturance Needs

1. Have the parents or caregivers consistently failed to provide the child with positive attention and affirmation?
2. Have the parents or caregivers consistently failed to respond appropriately to the child's emotional state (e.g. provided comfort when the child is distressed or frightened)?
3. Do the parents or caregivers have expectations about the child's behaviour which are markedly inconsistent with the child's age and/or developmental level?
4. Have the parents or caregivers consistently withheld loving touch, gestures and/or words?
5. Do the parents or caregivers consistently appear to fail to 'tune into' the emotional state of the child and respond accordingly?
6. Do the parents or caregivers consistently treat one child in markedly different ways to his or her siblings - outside expected differences due to that child's age and/or developmental level?
7. Have the parents or caregivers consistently failed to provide and/or support opportunities for the child to interact with other children of a similar age?

Some of the characteristics mentioned above can be seen as stemming from environmental neglect, which is characterised by a lack of environmental or neighbourhood safety, opportunities, or resources. A broad view of neglect incorporates environmental conditions linking neighbourhood factors with family and individual functioning.

**There is an increasing recognition that emotional neglect can occur even when physical needs are met whereas physical neglect always has some emotional impact on the child.**

### Hints to help facilitate good practice in assessing for neglect

- **Keep your focus on the child, over and above focusing on possible causes behind the behaviour of the caregiver.**

Assessing patterns of behaviour inevitably means that the health worker will be developing some degree of relationship with the family. Within this relationship possible underlying causes of inadequate care: - what would explain a very dirty house? Is the parent in poor physical or mental health? Does this new mum have post natal depression? Is he or she overwhelmed by too many young children? can be questioned and explored in order to suggest appropriate supports. However, the focus throughout must be on the child, and the potential impact of neglect caregiver behaviours, rather than focusing on any intent or lack of intent by the caregiver to cause harm. Working to assist the parents to improve their capacity to parent effectively must be done alongside, not in place of, taking action to protect children from current or future neglect.

- **Prioritise the physical and emotional needs of all children over and above the cultural differences.**

Diverse cultural values should be taken into account but not prioritised or used as explanations, by the family and/or the worker, to explain standards of care that fall below the necessary levels to support healthy child development.

- **Categorise and summarise concerns**

For health practitioners the [Child Wellbeing Guide](#) will assist to identify and summarise concerns about possible child neglect, clarify what aspects of parental care are of concern and track any changes over time.

**Whenever a health professional has clear concerns of physical, emotional, sexual abuse and/or neglect happening to the child they are seeing, or any other child in the family, they have a responsibility to take action to ensure that protective measures are put in place.**

**Refer to *Guidelines for Protecting Children 2015* and *Child Wellbeing Guide* for further information and guidance.**