

Can we help children who have already experienced serious neglect?

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Introduction

PhD study with La Trobe University

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Ethics approval:
La Trobe University [HEC17-098]
DFFH [HHSD/18/154030]
Alfred Health [HREC 759/19]

Thanks to the many organisations and individuals who participated in this study!

The study's aim was to build a foundational **theory of change** to **inform interventions** for children who have experienced neglect.

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What is neglect?

Neglect

When a child has not had their essential needs met by those in a position to do so.

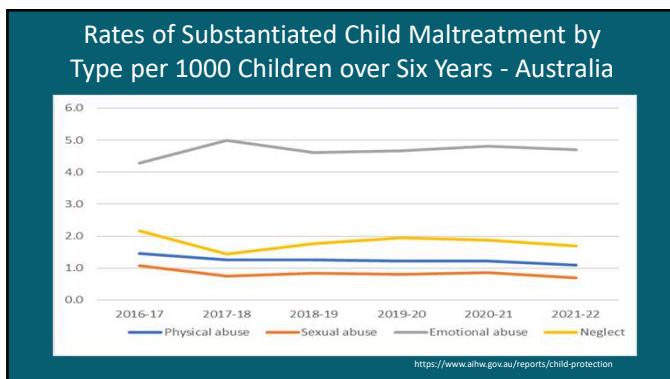
Serious neglect

When a child's essential needs - such as developmental, emotional, social, cultural, physical, and/or medical needs - have not been met to the extent where it is likely to lead to significant harm.

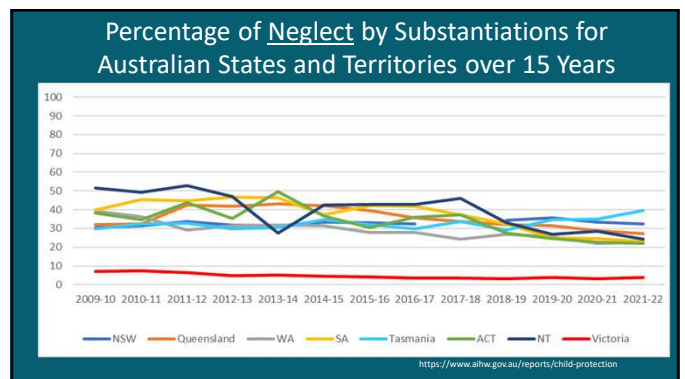
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What % of children and young people in your caseload, program or service have experienced neglect?

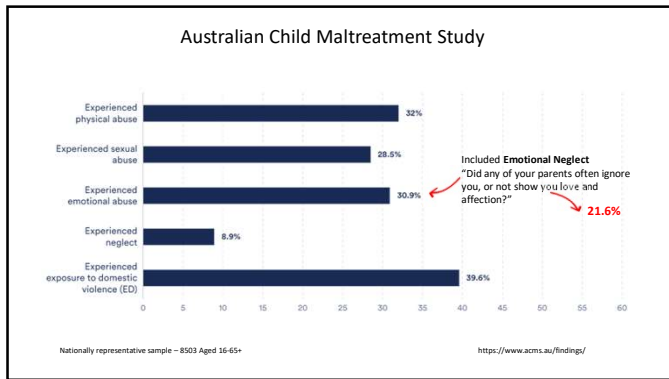
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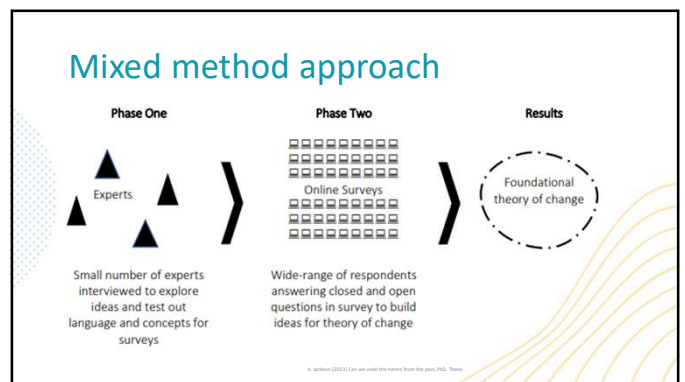
Authors	Location	Participants	Definition of neglect	Prevalence of neglect%
Delfabbro, Fernandez, McCormick, & Kettler (2013)	Tasmania	468 children entering out-of-home care for 1 st time. Mean age 6 years (0-17 years). Case file analysis	Any serious acts of omission or commission by guardian that jeopardised or impaired child's physical, psychological or intellectual development. (e.g., failure to provide food, water, clothing, housing, supervision, safety, or personal relationships and interactions)	Severe neglect (82.5%); Rejection/abandonment (29.1%)
Frederico, Jackson, & Black (2010)	Victoria	1034 children who were clients of Child Protection and the Berry Street Take Two program Referral document analysis	According to Child Protection at time of referral to Take Two (e.g., inadequate basic care, inconsistently sending child to school, inadequate stimulation, inadequate medical care, lack of supervision, abandonment)	96% had one or more types of neglect

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Rationale for this study

HIGH FREQUENCY + HIGH IMPACT = What else do we need to know?
 How to help children recovery from neglect?

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Survey design

The survey asked professionals and carers to describe a child they had worked with or cared for who experienced physical, emotional, medical, supervisory, developmental, cultural, or global/multiple neglect.

216 children who experienced serious neglect

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Serious neglect

When a child's essential needs have not been met to the extent where it is likely to lead to significant harm.

Essential needs: Medical, Emotional, Cultural, Developmental, Physical.

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Medical neglect Emotional neglect Cultural neglect

Serious neglect
When a child's essential needs have not been met to the extent where it is likely to lead to significant harm.

Developmental neglect Physical neglect

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Cultural neglect

Neglect is about a child's essential needs not being met. (Dubowitz, 2009; Frederico et al., 2006).

Children having access to their own culture and what it represents is an essential need and a human right (Shankoff & Phillips, 2000; United Nations, 1989, 2007).

"Cultural safety is ... an environment which is safe for people; where there is no assault, challenge or denial of their identity, of who they are and what they need."
(Riencken & Wiehakarumhaus, 1990 cited by Williams 1999)

"Cultural and/or spiritual neglect is likely to be a particular risk for children forcibly removed from their parent(s) unless deliberate provisions are made to ensure a child's continuing connection to culture"
(Parkinson et al. 2017, p. 13).

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"Culture is as necessary to a sense of meaning and identity as air is to living. Culture is the air our minds breathe. Culture is our eyes onto the world. And when you lose your air you suffocate and when you lose your eyes you stumble blindly and lose your way."
(Bamblett cited in Frankland, R., Bamblett, M., Lewis, P., & Trotter, R. (2010). This is 'forever business': A framework for maintaining and restoring cultural safety in Aboriginal Victoria. VACCA, p. 36)

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Global neglect

"This child was locked in a bedroom with a bowl of water and cat food and was not paid any attention by his mother. The child did not attend day care or other schooling, no play groups or other social activities. This child was significantly deprived of the opportunity to engage with others in social play, learning, speaking, learning social cues, using utensils while eating, understanding how to behave in social settings and with strangers."
(Professional survey about a 4-year-old non-Indigenous boy)

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System neglect

"He has been let down by a social worker who repeatedly neglected him and his previous carer causing immense distress which led to placement breakdown. He has also been neglected by a system which is full of empty promises and doesn't support kids adequately in care to give them the help and [therapeutic] care they need. This is to say nothing of the neglect previous to foster care - in kinship care. This child has been in the system since birth and is still floating around constantly being abandoned and neglected."
(Carer survey about a 7-year-old boy)

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Neglect experienced

Physical neglect	89.4
Emotional neglect	94.4
Developmental neglect	86.6
Supervisory neglect	83.3
Medical neglect	63.9
Cultural neglect	33.3
Global or multiple neglect	82.9

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Physical health problems frequently associated with neglect

- Sleep problems – 62.4%
- Atypical weight (over or underweight) – 41.6%
- Requiring medication for physical health – 29.2%
- Growth problems – 29.2%
- Dental health problems – 22.8%
- Frequent infections – 21.8%
- Toileting problems – 19.8%

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Developmental problems frequently associated with neglect

- Impulsivity – 72.7%
- Attention and/or concentration – 71.8%
- Problem-solving – 68.5%
- Not doing as well at school as capable – 65.3%
- Short-term or working memory – 57.9%
- Self-care – 54.2%
- Language – 53.3%
- Sensory processing – 51.9%

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Relational problems frequently associated with neglect

- Poor social skills – 68.1%
- Few friendships – 67.1%
- Trusting others – 66.2%
- Understanding others' emotions – 65.7%
- Tries to control others – 60.2%
- Superficial in interactions – 59.3%
- Interacts with peers in antisocial activities – 44.9%
- Isolates self – 44.9%

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Emotional problems frequently associated with neglect

- Regulating emotions – 79.2%
- Not coping with stress – 75%
- Self-esteem – 71.8%
- Expressing emotions – 74.5%
- Self-efficacy – 64.4%
- Difficult to comfort – 56.5%
- Feeling deprived – 46.3%
- Hopelessness – 43.5%

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Mental health problems frequently associated with neglect

- Anxiety symptoms – 68.1%
- Posttraumatic stress symptoms – 58.3%
- Dissociation – 50.5%
- Depression symptoms – 43.6%
- Self-harming behaviours – 30.6%
- Medication for mental health – 30.6%
- Suicidal ideation – 17.6%
- Alcohol and/or other drug usage – 13%

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Behavioural problems frequently associated with neglect

- Defiance – 63.9%
- Aggression or violence – 54.6%
- Severe tantrums – 45.8%
- Risk-taking, sensation seeking – 43.1%
- Running away – 33.3%
- Sexual behaviours: self at risk – 17.1%
- Criminal activities – 16.2%
- Sexual behaviours: others at risk – 14.4%
- Lighting fires – 7.9%

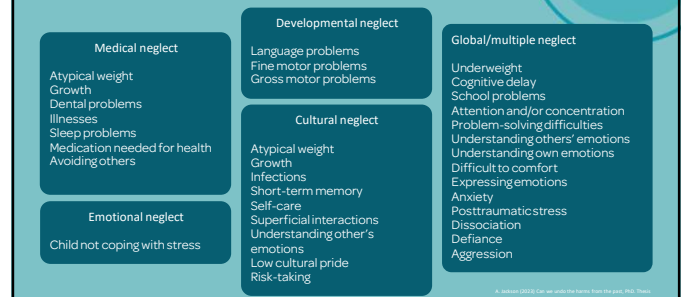
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Different types of neglect predicted different problems.

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What type of neglect predicted what type of problem



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Frequencies and percentages of 216 children within each class (LCA)

Class 1	Fewest problems	39	18.1%
Class 2	Many problems – especially social-emotional	58	26.9%
Class 3	Most problems	60	27.8%
Class 4	Many problems – especially developmental	59	27.3%

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Predictors for each Class

- Older children were more likely to be in Class 2 (many) and Class 3. (most)
- Aboriginal children were more likely to be in Class 3 (most).
- Children who experienced global/multiple neglect were more likely to be in Class 3 (most) or Class 4 (many).
- Children who experienced cultural neglect were more likely to be in Class 3 (most).
- An interaction effect between children being Aboriginal and experiencing cultural neglect was significant, rather than either variable on its own.

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How do these types of neglect cause or contribute to these problems?

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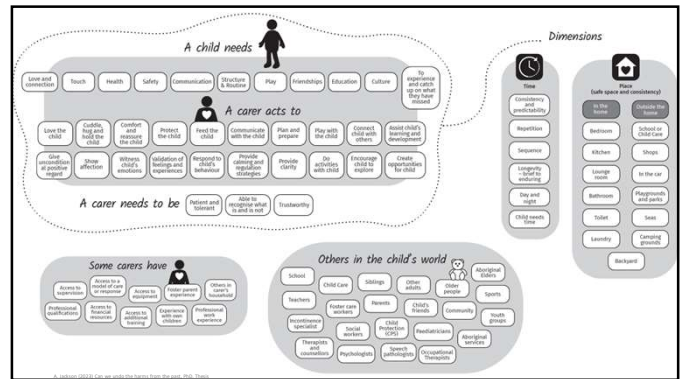
- How does a child learn to love and be loved?
- How does a child learn to play?
- How does a child learn to walk and talk?
- How does a child learn to learn?
- How does a child learn who they are and where they belong?

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“The very same neurodevelopmental sensitivity that allows amazing developmental advances in response to predictable, nurturing, repetitive and enriching experiences make the developing child vulnerable to adverse experiences”

(Perry, Bruce, D. 2002, Childhood experience and the expression of genetic potential: What childhood neglect tells us about nature and nurture. Brain and Mind, 3(1), p. 88)

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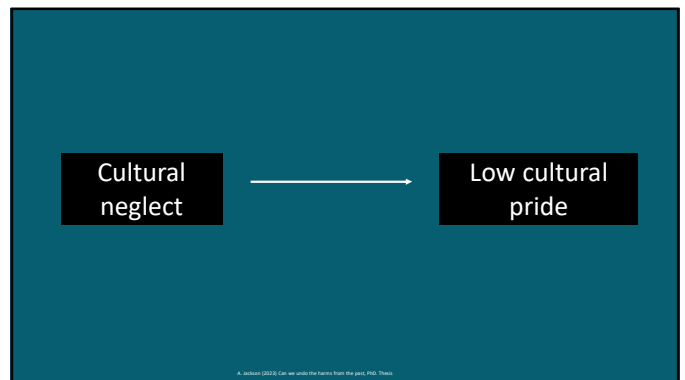


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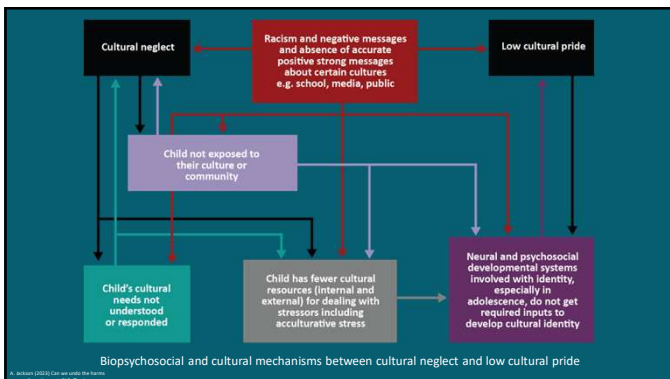
Making the absent present

The first stage of recovery is the child's ordinary and extraordinary day-to-day needs are being met, i.e., the child is no longer subject to neglect.

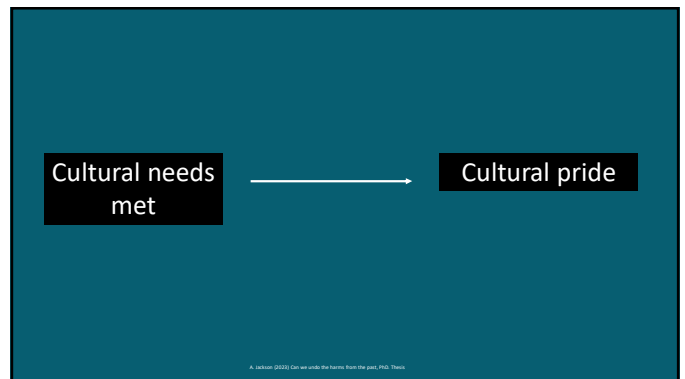
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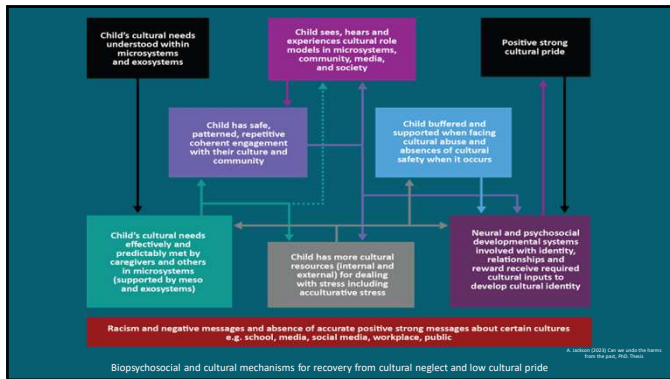
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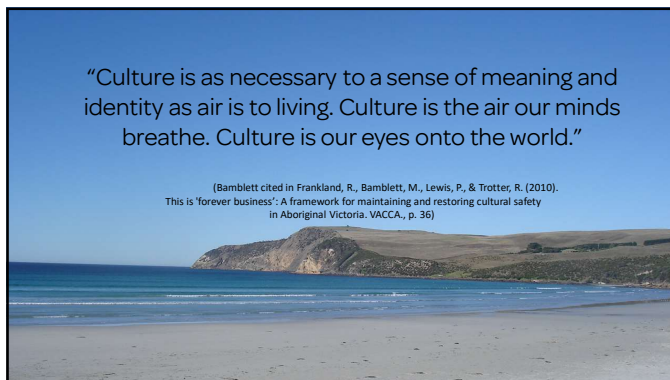
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- ### Key Findings include
- ❑ Recognising neglect when it's part of child's experience – and when did it begin
 - ❑ Recognising cultural neglect as a type of neglect.....
 - ❑ Recognising neglect's likely and possibly continuing impacts
 - ❑ Making sense of what was absent or chaotically present for the child – How can we make it present?
 - ❑ The central role of carers/parents and others in child's daily life – in their recovery process
 - ❑ Meeting the ordinary and extraordinary needs – who, how, how often, when, where ...

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