

# **MAKING SENSE OF NEGLECT THROUGH YOUNG CHILDREN'S EXPERIENCES**

---

**JAN HORWATH  
PROFESSOR EMERITUS & INDEPENDENT  
CONSULTANT**

**[janhorwathconsultancy@yahoo.co.uk](mailto:janhorwathconsultancy@yahoo.co.uk)**

# WHAT DO WE SEE?



# WHAT DO WE SEE?



# BEYOND 'SEEING' TO EXPERIENCING

***'WHEN PEOPLE LOOKED AT ME ALL THEY SAW WAS AN UNKEMPT, POORLY DRESSED CHILD: NO DIFFERENT FROM MANY ON MY ESTATE. THAT WAS BAD ENOUGH BUT NO-ONE SAW BEYOND THAT AND SAW THE SAD, MISERABLE CHILD WHO DREADED GETTING UP EACH MORNING AFRAID OF WHAT THE DAY WOULD BRING FOR ME AND MY SISTERS'.***

**(a young adult)**

# NEGLECTED CAUSES OF NEGLECT?

- Children left unsupervised
- The alternative life-style
- Cotton wool parenting
- 'Helicopter' parenting
- Pushy parenting
- Lack of emotional availability
- Dependence on alternative carers
- Too posh to push

# THE IMPACT OF NEGLECT

Physical

Cognitive

Socio-emotional



# IMPACT OF CHILD NEGLECT

‘Children subjected to poverty, violence, or neglect during early years without a supportive network of adults can end up with faulty “wiring” that has long-term consequences well into adulthood.

Experiences during the first few years of life – good and bad — literally shape the architecture of the developing brain. Stable, positive relationships with adults and growth-promoting experiences are key to the development of the architecture that forms the foundation for all future learning, behavior, and health’.

<http://developingchild.harvard.edu/initiatives/council/>

***In order to develop normally, a child requires progressively more complex joint activity with one or more adults who have an irrational emotional relationship with the child. Somebody's got to be crazy about that kid. That's number one. First, last, and always'***

(Bronfenbrenner [www.developingchild.NET](http://www.developingchild.NET) Young Children Develop in an Environment of Relationships p1)



# THE UNBORN BABY AND THE FOUR 'Ds'

## **Drugs and alcohol**

- Prem low birth weight (smoking)
- Foetal alcohol syndrome/drug addiction
- Neurological damage
- Born with HIV, hep B or C virus

## **DV**

- Foetal fracture, neurological issues, brain injury and organ damage

## **Disease**

Childhood malformations

## **Diet**

Excessive weight gain linked to childhood obesity

Poor nutrition and low birth weight

# THE GOODWIN FAMILY

<b>Kelly, 30 years</b>	<b>mother</b>
<b>Rob, 22 years</b>	<b>partner</b>
<b>Darren, 14 years</b>	<b>father unknown</b>
<b>Ian, 11 years</b>	<b>father Dave</b>
<b>Chloe, 8 years</b>	<b>father Dave</b>
<b>RUBY, 4 YEARS</b>	<b>father unknown</b>
<b>MYLA 9 MONTHS</b>	<b>father Rob</b>

Family live in deprived area in social housing

Mother on benefits

Issues of drugs, alcohol, depression and DV

Schools concerned about physical neglect and poor school attendance

Past contact with agencies CAF, S17

# THE GODDARD FAMILY

Laura 42 years mother

Phillip 46 years father

FREDDIE 4 YEARS

JESSICA 9 MTHS

Family live in 4 bed apartment in very affluent part of the city

Parents asset fund managers on joint salary £500,000 plus and work away from home frequently

Employ live-in au-pair

Freddie attends private prep school

# WHAT DO INFANTS NEED?

- Regular feeding and appropriate food
- To be kept warm, dry in a clean place
- Regular changing, washing and bathing
- Calm, peaceful and nurturing environment
- Attention and stimulation to develop basic skills
- Close nurturing physical contact with carer
- To feel safe and secure

(Adapted from Iwaniec 2006; Horwath, 2013)

# WHAT DO UNDER 5s NEED?

- Stimulation and opportunities to experiment
- Interaction with others through play etc
- Sensitive and supportive conditions to promote abilities
- Warm, nurturing relationship with carer/s
- Encouragement, praise and security

# **INFANTS AND PRE-SCHOOL: PHYSICAL DEVELOPMENT**

- Height, weight and head circumference below average**
- Severe nappy rash and other skin infections**
- Vulnerable to persistent or repeated infections**
- Physical manifestation of behavioural problems such as tics, soiling, self-abuse**
- Poor gross and finer motor development**
- Lack of mobility: late crawling and walking**
- Late control of bladder and bowels**

# **INFANTS AND PRE-SCHOOL: COGNITIVE DEVELOPMENT**

- **Intellectual functioning below average**
- **Language delay, difficulty using expressive and receptive language**
- **Unable to articulate feelings**
- **Poor vocabulary**
- **Issues of comprehension and expression**

# **INFANTS AND PRE-SCHOOL: SOCIO-EMOTIONAL DEVELOPMENT**

- **Anxious**
- **Clingy**
- **Behaviourally impulsive, hyperactive, attention-seeking, non-compliant**

**or**

- **Undemanding and self-sufficient**
- **Freezing and motionless, shut down affect; do not respond to comings and goings of carer**
- **Difficulty participating in co-operative play, marginalised by peers**
- **Poor self esteem**



# PRIMARY SCHOOL: PHYSICAL DEVELOPMENT

- Growth retardation or excessively over weight
- Enuresis and encopresis
- Lethargy
- Vitamin deficiencies
- Persistent or repeated infections
- Suffers bouts of gastro-enteritis
- Dental and optical problems
- Hearing difficulties through continual failure to obtain treatment for ear infections

# PRIMARY SCHOOL: COGNITIVE DEVELOPMENT

- Intellectual functioning below average
- Reluctant to engage in exploration of the world
- Poor academic performance/special educational needs
- Problems being task-focused, following instructions and being attentive
- Difficulty working independently and engaging in learning
- Limited attention span

# PRIMARY SCHOOL: SOCIO-EMOTIONAL DEVELOPMENT

- Little display of affect and to seek emotional support from carers
- Streetwise: appears mature, self-reliant and independent
- Lack of intimacy may appear gauche and awkward
- Isolated by and awkward with peers
- Comfortable in environments with clear standards
- May want to please, therefore co-operative and compliant
- May exhibit hostility and anti-social behaviour
- Has short outbursts of anger
- Child may take on care giving role vis-a vis carer
- Present as helpless, passive and vulnerable

# THE IMPACT ON ADULTS

*‘Some people even when they grow up into their 40-50s remember their childhood and it makes them sad and depressed, people carry things with them, feel the effect for a long time. (They may) do things to their children – neglect their own children, not consciously repeat the same pattern.’* (Raina in Rees et al., 2013)