

National Institute for Health and Care Excellence

Child abuse and neglect: recognising, assessing and responding to abuse and neglect of children and young people

Stakeholder Comments – Draft scope

<p>Please enter the name of your registered stakeholder organisation below.</p> <p>NICE is unable to accept comments from non-registered organisations or individuals. If you wish your comments to be considered please register via the NICE website or contact the registered stakeholder organisation that most closely represents your interests and pass your comments to them.</p>		
Stakeholder organisation:		The Children's Society
Name of commentator:		Euan Holloway (Policy Officer)
Comment No.	Section number <small>Indicate number or 'general' if your comment relates to the whole document</small>	Comments Please insert each new comment in a new row. Please do not paste other tables into this table, as your comments could get lost – type directly into this table
Topic specific question:	This is a large scope covering all areas of the pathway, are there particular areas that are more or less important to include?	<p>Our comments on the guideline scope focus on the issue of neglect of older children (11-17). Research and evidence from our practice shows that neglect of adolescents is widespread and has a serious long term impact.</p> <p>However, the prevalence and impact are routinely underestimated by professionals. There is evidence that assessments underestimate risk to older children and that the safeguarding system is more focused towards young children, partly driven by mistaken attitudes that older children face less risk, are in need of less support, are more 'resilient' to abuse or even responsible for their maltreatment.</p> <p>Recommendation: The guidelines should include specific information and guidance on maltreatment of adolescents, including raising awareness of the prevalence and impact of neglect (as distinct from other forms of maltreatment), professional attitudes to adolescents and appropriate interventions.</p>

1	3.1.1/3.1.2	<p>Prevalence – Neglect is the most commonly-used category in Child Protection Plans for all ages of children in the UK.</p> <p>In the year to March 2013, 4,720 older children (10-17) who became subject to a child protection plan had neglect as the main category of maltreatment. This represents 39% of all child protection plans for that age group. However, due to issues with risk assessment and identification, it is likely that the true level of neglect of adolescents is underestimated.</p> <p>For example, our Safeguarding Young People report (2010) asked professionals to rate the risk in a number of scenarios, with age as one variable. We found that professionals are significantly less likely to perceive older children as being at longer-term risk. Professionals perceived the risk to be lower in particular for young people aged 16-17 and there are significant age patterns in particular for two types of maltreatment: supervisory neglect and emotional abuse.</p> <p>Based on interviews with secondary school children, the NSPCC estimates the number of 11-17 year olds who have suffered neglect at 13% (or around 696,000 11-17 year olds), with 10% severely neglected (around 523,000).</p> <p>Recommendation: As we believe it is regularly underestimated, the guideline should specifically reference the prevalence of neglect among other forms of maltreatment of adolescents.</p>
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2	3.1.5	<p>Impact – Neglect during adolescence can have serious long term impact on children, lasting into adulthood. This is despite a commonly-held but ill-informed perception that older children are more resilient to the effects of maltreatment and that neglect has a lesser impact than other forms of maltreatment.</p> <p>There is evidence that maltreatment at an older age is <i>more</i> likely to be associated with a wider range of negative outcomes than maltreatment which took place only in early childhood.</p> <p>As part of the Rochester Youth Development Study, which closely followed the lives of 1,000 adolescents in a deprived district of New York through to early middle age, Thornberry <i>et al</i> (2010) found that persistent maltreatment during adolescence has ‘stronger and more consistent negative consequences...than maltreatment experienced only in childhood.’ These effects include criminal behaviour, mental health problems, substance misuse and health-risking behaviours.</p> <p>Neglect during adolescence is as damaging as other forms of maltreatment, increasing the risk of arrest, offending, violent crime and drug use, as well as direct impacts (Smith <i>et al</i> 2005).</p> <p>And systematic studies of Serious Case Reviews have shown that neglect is more prevalent among the most extreme examples of child maltreatment than has been acknowledged, and that adolescents feature equally in these cases - <i>Neglect with the most serious outcomes is not confined to the youngest children, and occurs across all ages.</i> (Brandon <i>et al</i> 2013).</p> <p>Recommendation: To help tackle perceptions that neglect and maltreatment during adolescence have less impact on children, the guidelines should specifically reference the impact of neglect and maltreatment during adolescence.</p>
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3	General	<p>Disclosing maltreatment - Older children face a particular set of issues when it comes to disclosing maltreatment. Interviews with professionals as part of our Safeguarding Young People report (2010) found that professionals and social workers believed it was easier for older children to disclose abuse. But while older children may have better communication skills, they face another set of barriers.</p> <p>Our Safeguarding Young People research (2010) found that older children are more likely to be aware of the potential traumatic impacts of disclosure upon themselves, their families and their abuser – such as a belief that they may be automatically taken into care or their family split up. And many are unclear about which professionals they could approach or they may not trust professionals such as the police.</p> <p>The report also found that most often young people disclose to a friend, but where they did describe approaching professionals for help, this was usually a school teacher – and, rather than a specific safeguarding lead, they were more likely to turn to a teacher with whom they had an existing relationship and whom they felt they could trust.</p> <p>It is important that the guideline is suitable for all professionals working with children, particularly teachers, and not just those with specific safeguarding roles. This could be achieved through safeguarding forums and mentors in schools.</p> <p>Given the likely audience for this guideline, it is also important that it is appropriate for non-safeguarding lead in health settings - particularly GPs, school nurses and practice nurses – and they are aware of the signs of neglect.</p> <p>Recommendation: The guideline should address how young people should be educated on where to find support (both if they are suffering maltreatment themselves, as well as how to support their peers to disclose abuse or neglect).</p>
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4	General	<p>Thresholds - How the child protection system responds to 16 and 17 years olds is a particular issue, affecting risk assessments and thresholds for services. There is also some confusion over the legal position of 16 and 17 year olds among some professionals (Safeguarding Young People 2010).</p> <p>Professionals felt that there was a lack of consistency of age thresholds for services, with some services and placements for children and young people having an age limit at 16. There are also inconsistencies with how the criminal law and civil child protection law treat 16-17 year olds, which make it important for guidance aimed at a range of professionals to address this issue.</p> <p>For example, the Serious Case Review of ‘Child S’ in Manchester – where a 17 year old was abandoned by his father without support – found that “there was an underpinning issue across a range of agencies that at aged 17 years, Child S was not always perceived to be, and therefore treated as, a child.” This included not being recognised as a child by the police and mental health services, and despite being recognised as a child by children’s social care, a failure to assess him as a child in need.</p> <p>Recommendation: To avoid confusion among professionals and ensure vulnerable older children have access to support from appropriate services, the guidelines should overtly address the legal status of 16 and 17 year olds.</p>
5	4.4	<p>The scope lists among the main desired outcomes of the guideline: ‘avoiding removal to alternative care’ and ‘avoiding long-term or repeated child protection plans’.</p> <p>However, given evidence - from our Safeguarding Young People report and from the Education Select Committee (Children First: The Child Protection System In England (2012)) – that professionals are less likely to take older children into care or make them subject to a child protection plan even where that may be appropriate, we believe the guidelines should avoid making this a specific desired outcome.</p> <p>Although alternatives to care may be the best option for some older children in some circumstances, the avoidance of reception into care as an ‘informing principle’ has also jeopardised the well-being and safety of older children – due to failure to remove them from harmful situations.</p> <p>Recommendation: To avoid the risk of reinforcing an existing issue with safeguarding older children, we believe this should be removed or modified as a desired outcome of the guideline.</p>

Please add extra rows as needed

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Closing date: 5pm on 20th August 2014

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