



# Neglect: Key intervention strategies



NSW Department of  
Community Services

## Introduction

This Research to Practice Note has been developed to provide practitioners with an overview of the key intervention strategies and issues that have been found to be effective in cases of child neglect.

It complements the existing Research to Practice Note, *Neglect: Key issues* (November 2005), which provides a detailed discussion about what constitutes neglect, its definition and causes.

## Background

Neglect refers to the persistent failure to meet a child's basic developmental needs.

It is strongly linked to poverty and is more likely in families where the mother is a young, single parent with little social support and where there are also mental health and/or substance abuse issues.

Despite being the most common form of maltreatment, neglect is more likely to be overlooked than other forms of maltreatment as each incident may appear too trivial to report. Consequently, it is likely that neglect has reached chronic levels by the time the family is referred to statutory child protection services.

## Intervention programs

There has been little or no research aimed at specifically identifying effective programs for neglected children. However, the strong association between disadvantage and neglect suggests that programs which have positive effects for disadvantaged children may also hold benefits for neglected children.

These programs include:

### High quality child care

Given the lack of stimulation and nurturing in neglectful families, the most effective way of improving outcomes for these children may be to target them directly in the form of high quality child care and education.

Providing physical care, nourishing food, stimulating programs and emotional nurturing directly to disadvantaged children has a more positive impact on child outcomes than if the intervention is aimed at parents.<sup>1</sup>

### Home visiting programs

Although the evidence that home visiting reduces the rate of child abuse and neglect is still not conclusive, home visiting can act as an early detection mechanism prior to cases entering the statutory child protection system.<sup>2</sup>

### Co-located multi-component programs

Greatest gains are made when programs offer co-located services for both parents and children. For example, where services such as high quality child care and pre-school are co-located and there are strong links to health care services (eg baby immunisation), and parent education and support, developmental outcomes for children are improved.

Ideally, multi-component programs should be extended to cover the toddler period through to school age to achieve the greatest results.

### Key messages from research

- Through support it may be possible to enhance parental confidence and child resilience so that the harmful effects of neglect may be reduced.
- Where parents are unable to provide a nurturing and stimulating environment, interventions need to target the child directly.
- The most intensive support needs to be provided when there is a child under 12 months, particularly if the child has a disability.
- For maximum effectiveness services should be offered long-term, that is, at least two to three years.
- When dealing with neglectful families it is important to treat them with respect, target their strengths, be culturally sensitive and set clear and achievable goals that require only small incremental change.

## Implications for caseworkers

The literature has identified a number of techniques to help caseworkers engage and treat families successfully. Caseworkers should:

### Meet the family's immediate needs

Neglecting families often face many barriers to engagement, including inadequate housing, poverty, unemployment, lack of childcare and lack of transport.

Families with children must be able to provide for their basic needs before other strategies can be implemented.

Providing simple and effective services such as, food, nappies and other essential items, at the beginning of treatment are also more likely to help build and maintain a relationship with the caseworker.

### Interim brokerage guidelines for early intervention caseworkers

Under the Early Intervention Program (EIP), dedicated brokerage funds are used to purchase child care, parenting programs, home visiting and material aid to meet the needs of children and families who are participating in the EIP.

To purchase services, the family and the DoCS EIP Case Manager should first agree on:

- the nature of the problem, casework goals, strategies and the desired outcomes in accordance with the family's case plan
- whether existing government-provided and/or funded services, benefits or subsidies can be accessed
- the nature of the service, service provider, frequency and duration of the service and monitoring arrangements
- other support or resources needed to assist the child or family.

The need for this assistance must be determined through the family strengths and needs assessment and reviewed every six months.

## Focus on the family

The family should be viewed in its entirety, rather than just the parents or the child. However, as the neglect becomes more severe (especially where the mother is hostile and reluctant to change) the focus of the intervention needs to be directed more towards the child.

### Let the families set the priorities for assistance first

Allowing families to set the priorities helps remove barriers to seeking and participating in treatment. Assistance may include such things as providing transport, household repairs and maintenance, before and after-school programs, respite and child care, and acquiring furniture and white goods.

### Refer to mental health services where appropriate

Maternal depression is a prime contributor to child neglect. Referring the mother for medication or counselling rather than focusing on her parenting efforts may be more beneficial. Establishing a stronger more supportive social network for the mother or reconnecting her with supportive family and friends may also assist.

### Treat substance abuse

Services should meet the needs of the caregivers as well as children. A study in the United States found that 46% of parents with substance abuse problems who are also involved in the child welfare system were neither offered nor provided with any substance abuse services.<sup>3</sup>

### Facilitate participation in early intervention programs

Children whose parents take an active role in an early intervention program show improved developmental outcomes compared with those who do not take part. For example, there is a marked improvement in disadvantaged and maltreated children if they attend high quality child care, with significant social and motor improvements reported.

### Establish community supports and social networks

Programs are more effective when workers establish warm and empathetic relationships with clients.

If the neglect is not very severe and is in response to an immediate crisis, such as a death in the family, the support needed may be as little as providing some emotional support for the parent and practical support to ensure that meals are provided and the house cleaned until the crisis is resolved.<sup>4</sup>

## Conclusion

Given the high prevalence of neglect and the associated negative developmental outcomes for these children, a more concerted effort needs to be made to understand and provide assistance for neglecting families. Where parents just lack sufficient knowledge about child development, and are easily overwhelmed, providing emotional and practical support may be sufficient. However, where neglect arises through indifference and offers of help are greeted with hostility, interventions directly targeting the child may be more effective.

## Further reading

- *Child neglect: A review of the literature*. NSW Department of Community Services, 2005. Copies are available on DoCS' intranet and website – [www.community.nsw.gov.au](http://www.community.nsw.gov.au)
- *Active engagement: Strategies to increase service participation by vulnerable families*. Discussion paper. NSW Department of Community Services, 2005. Copies are available on DoCS' intranet and website – [www.community.nsw.gov.au](http://www.community.nsw.gov.au)

## Endnotes\*

- 1 Marshall, J. & Watt, P. (1999). *Child Behaviour Problems. A Literature Review of the Size and Nature of the Problem and Prevention Interventions in Childhood*. Perth: Interagency Committee on Children's Futures.
  - 2 Tomison, A.M. (1995). *Spotlight on child neglect*. National Child Protection Clearinghouse Issues Paper no.4, Winter. Melbourne: Australian Institute of Family Studies.
  - 3 Berry, M., Charlson, R. & Dawson, K. (2003). Promising practices in understanding and treating child neglect. *Child and Family Social Work*, 8, 13-24.
  - 4 Hildyard, K.L. & Wolfe, D.A. (2002). Child Neglect: Developmental Issues and Outcomes. *Child Abuse & Neglect*, 26, 679-695.
  - 4 James, M. (2000). Child Abuse and Neglect: Part II - Practical Intervention and Prevention Activities. *Australian Institute of Criminology – Trends & Issues in Crime and Criminal Justice*, October.
- \* Additional references available on request.

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