

**An Exploration of How Social Workers Engage Neglectful Parents from  
Affluent Backgrounds in the Child Protection System**

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## **Introduction**

This exploratory research was commissioned by the City of London and was developed out of a scoping review, which sought to find out what is known about child neglect in affluent families. The scoping review identified that there is a paucity of research in the UK looking at how social workers engage parents from affluent backgrounds in the child protection system to address the issue of child neglect. This study therefore investigated what factors arise for social workers in responding to this type of child maltreatment in affluent families.

## **Background**

Child neglect is the most prevalent type of maltreatment in the UK, and is the largest category of abuse for children subject to a child protection plan (Action for Children 2014; Brandon *et al.* 2014a; Daniel *et al.* 2010; NSPCC 2014; Ofsted 2014; Taylor *et al.* 2012). There is strong evidence that children living in environments of deprivation and social inequalities are at higher risk for neglect than children from more privileged backgrounds (Burgess *et al.* 2014; Bywaters *et al.* 2014; Bywaters *et al.* 2016; Daniel *et al.* 2011; May-Chahal and Cawson 2005; Sidebotham *et al.* 2002; Sidebotham *et al.* 2016). It is important to note that social class as a category is not routinely recorded when collecting child abuse and neglect data for the Department for Education's children in need census in the UK, which tells us little about the specific demographic characteristics of children. Additionally, there is currently little empirical research focusing directly on the experiences of children in affluent families, with the great majority of research having largely focused on

the relationship between childhood neglect and poverty. It would seem, therefore, that when socio-economic factors are addressed in the research literature, the focus is almost exclusively on neglect in poor families. One obvious reason for this is that the majority of studies examining neglect have used samples that are largely drawn from families that are known to the authorities, and by and large these families tend to be from lower socio-economic backgrounds (Burgess *et al.* 2014; Bywaters *et al.* 2014; Daniel *et al.* 2011; May-Chahal and Cawson 2005). Furthermore, most studies generally show that neglect is more likely to come to the attention of the authorities when it involves families from lower socio-economic groups, and that middleclass and affluent families are not subjected to the same amount of state scrutiny (Corby 2006; Radford *et al.* 2011). The literature thus suggests that there may be biases in the reporting of maltreatment by higher social classes (Sidebotham *et al.* 2002). There are therefore biases inherent in using samples largely drawn from official records.

While recognising the significance of poverty and disadvantage, there is growing evidence to show that child neglect also occurs in significant amounts in families from the highest social class (Bellis *et al.* 2014). Other research has found that neglectful parents in affluent circumstances rarely come under the radar of child protection services, so they do not show up in official reported statistics (Watson, 2005). Thus, it has been suggested that socio-economic biases play a crucial role in determining which families come under the scrutiny of the child protection services (Burgess *et al.* 2014; Daniel *et al.* 2011). Even so, there are preliminary suggestions that child abuse and

neglect in affluent families may be much more widespread than is currently thought and that recognising neglect and its impacts for affluent children is a significant challenge (Asthon *et al.* 2016; Bellis *et al.* 2014a; Hughes *et al.* 2014).

Research on neglect in affluent families in the USA and Australia has pointed to the particular risks and problems facing children in affluent families (Felitti *et al.* 1998; Luthar *et al.* 2002; Watson 2005). Luthar and Becker (2003) maintain that parental emotional neglect is often the cause of psychological problems suffered throughout adulthood by children from affluent families. For example, the UK Adverse Childhood Experiences (ACE) research (Bellis *et al.* 2014b) and retrospective studies on childhood experiences of abuse and neglect (Bifulco and Moran 1998), highlight that children from middleclass and affluent families suffer childhood neglect in less visible ways. Additionally, researchers in the USA have commented on the disconnect between some affluent parents and their children (Luthar and Becker, 2002; Luthar and Crossman 2013). The claim is made that many affluent parents do not spend enough quality time with their children, and put excessive pressure on their children to be high achievers, and that such factors create psychological and emotional problems for the children in adulthood (Luthar and Becker 2002).

It has been suggested that the issue of neglect in affluent families is made more complex because of differing values. For example, Luthar and Crossman (2013) noted that affluent parents have a more relaxed attitude to drug use, sexual activity and sexuality, and as a consequence their children

are exposed to more risks. Furthermore, although children may be living in affluent households, they may also be affected by parental alcohol and substance abuse, and domestic violence. It tends to be assumed that such problems only occur in poor families. However, there is a growing body of evidence that these same issues are also found in affluent families. Typically, it is thought that some affluent parents are often emotionally disconnected from their children because they work very long hours, which means that their children are often left alone, or with a range of paid carers (Luthar and Latendresse 2006). Such situations raise complex questions about how to assess the psychological and emotional availability of parents. Furthermore, the notion is supported by evidence from ACE studies, which drew their sample from the general population to look at associations between childhood trauma and long-term health consequences (Bellis *et al.* 2014; Hughes *et al.* 2016). Adverse childhood experiences refer to physical and emotional abuse, sexual abuse and neglect, being exposed to domestic violence, substance abuse, and other early life stressors (Felitti *et al.* 1998). While many ACEs are disproportionately found in economically disadvantaged communities, it is important to note that research has identified that ACEs are far from absent in more affluent families (Bellis *et al.* 2014). For example, data from ACE cross-sectional studies, which draws on a representative sample of the population to look at associations between childhood trauma and long-term health consequences, reports evidence of abuse and neglect in the higher socio-economic strata (Bellis *et al.* 2013; Bellis *et al.* 2014a; Bellis *et al.* 2014b). Additionally, Watson (2005) asserts that wealthier families may have the material resources to hide physical and supervisory neglect while being

psychologically or emotionally neglectful. This point is key to understanding why neglect may go undetected in affluent families.

### **Defining Neglect**

The definition of neglect used in this study was the *Working Together to Safeguard Children* (2015) definition of neglect is used:

*“The persistent failure to meet a child’s basic physical and/or psychological needs, likely to result in the serious impairment of the child’s health and development”* (DfE 2015).

It is important to note that there are variations in how neglect is defined across the different jurisdictions in the UK. For example, the devolved governments of Wales and Northern Ireland have removed any reference to persistence in their definitions of neglect (Flood and Holmes 2016).

It is also important to note that there are different sub-categories of neglect (**see appendix 1**); these include educational, emotional, medical, nutritional, physical, and supervisory neglect (Flood and Holmes 2016). Additionally, there are, major challenges in quantifying psychological and emotional neglect. As Daniel (2015) observes, the range of ways that neglect can be defined contributes to confusion about what actually constitutes neglect.

### **Aims**

The main purpose of this study is to understand the issues that arise for social workers around discovering and confronting parental neglect in affluent families and to identify and develop intervention practice that is successful.

Three specific research questions guided this inquiry: (1) How do social workers identify risk factors for vulnerable children in affluent circumstances? (2) Which factors inhibit or enable social workers' engagement with affluent parents when there are child protection concerns? (3) What kind of skills, knowledge and experience is necessary for frontline social workers to effectively assert their professional authority with affluent parents when there are concerns about abuse and neglect?

## **Methodology**

Participants were recruited from twelve local authorities, county councils and unitary authorities in England. The research sites were selected using The Department for Communities and Local Government, *Open Data Communities* data platform. Indices of deprivation (*Income, Health, Education, Housing, Crime etc.*) by geographical areas were used to select five Counties and seven local authorities, which represented a geographical mix and a range of socioeconomic divisions. Therefore, some of the authorities in the sample were characterised by extremes of wealth and deprivation. The sample consisted of professional stakeholders from across children services and included frontline social workers, team managers, an Early Help team manager; principal social workers; designated safeguarding leads; service managers; a Head of Service for Safeguarding Standards and a Local

Authority Designated Officer. The goal was to include a diverse representation of professionals with particular experiences of child protection who were either active in frontline practice, and/or learning and development in the same organisation. A semi-structured topic guide was used in interviews and focus groups with a total of 30 participants. Focus groups in each research site afforded the opportunity to gather a group of practitioners situated at different levels in their organisation to reflect on neglect from their particular vantage point. Overall, a very diverse group of children services practitioners were interviewed. The interview questions explored aspects of the practitioners' experiences of how they engage affluent parents when there were safeguarding concerns. The interviews and focus groups lasted on average one hour and were audio-recorded, transcribed in full, and anonymised. The Research Ethics and Integrity Committee, Goldsmiths, University of London, granted ethical approval for the study.

A thematic analysis approach was used to analyse the data (Braun and Clark 2006). The central research questions were used as a guide to an initial reading of the transcripts to generate a coding scheme. Each interview was carefully read and re-read and a line-by-line coding of the interview transcripts was conducted. During this stage, new codes were added and initial codes were merged or removed. The final stage of analysis involved more detailed selective coding and breaking down the codes into several subthemes, which were then placed into broad categories, to analyse the relationships between them (Braun and Clark 2006). NVivo, the qualitative data analysis software program, was used to organise and group segments of the data. NVivo

supported searching for themes and identifying common patterns that were consistent in the data. To establish a degree of coding reliability, the research assistant audited the documentation for four interviews as a validity check on the analysis.

## Key Messages from the Research

- *The findings revealed that thresholds for neglect are not always understood, which posed challenges for effectively safeguarding children at risk of significant harm in privileged families.*
- *The vast majority of the cases described by the participants concerned emotional neglect, although other forms of maltreatment, such as sexual abuse, child sexual exploitation and emotional abuse, were also identified.*
- *Commonly-encountered cases involved struggling teenagers in private fee-paying and boarding schools, who were often isolated from their parents physically and emotionally, and had complex safeguarding needs.*
- *Participants gave many examples to show how parents had the financial resources to access psychological support through private care providers to address their children's emotional and behavioural problems; some practitioners viewed this as a positive outcome for the child, but some saw this as a way for the parents to opt out of the statutory child protection system, and to thus slip under the radar of children's services.*
- *All of the participants described difficulties in maintaining focus on the child because of the way that parents used their status and social capital to resist child protection intervention, and many also displayed a sense of entitlement to do as they pleased and that they know best.*
- *Participants consistently cited that highly resistant parents were more likely to use legal advocates or the complaints procedures to challenge social workers.*
- *All of the participants also experienced the challenges of inter-agency working with private fee-paying and boarding schools when child protection concerns were raised.*
- *Considerable experience, practice wisdom and knowledge of neglect were essential in relation to working with highly resistant parents who had the resources to challenge social workers' decision-making.*
- *Skills, knowledge and competence: all of the participants highlighted the important role that supportive managers and good supervision played in helping them to effectively intervene in affluent families.*

- ***Participants cite the organisational cultures of support, purposeful informal conversations about the case with colleagues, good supervision, knowledge and confidence and responsive managers, themed learning activities, as key to their ability to work in this complex field.***

Four overarching themes emerged from the data analysis: Recognising and addressing neglect, the parents' sense of privilege and entitlement, barriers to escalating concerns, and factors that make a difference for authoritative practice.

### **THEME 1: Recognising and Addressing Neglect**

All of the participants described the challenges in recognising and naming neglect in affluent families, and the factors that might indicate that emotional neglect is not well understood by practitioners. Participants stressed that the vague and ambiguous nature of emotional neglect was one possible factor making it difficult to interpret and assess indicators of emotional neglect. They also reported that because of preconceived ideas that stereotypically associate neglect with poverty, the parents' (and indeed, some professionals in public schools') perceptions were, that neglect is about the failure to provide for a child's basic physical needs.

One participant remarked:

*“Those children are quite hidden, because parents know their rights, they are articulate, and they can be quite avoiding. I would say that social workers are quite often concerned that working with affluent parents rather than with other parents because they are educated and they are very challenging”.*

Because the children who come to their attention have affluent home environments including: excellent housing, a nutritious diet, first-class educational opportunities and access to a range of enrichment opportunities, it was often difficult to differentiate when their home environment lacked emotionally-nurturing parenting behaviours. The families were often involved with private providers, such as GPs, therapists, nurseries, and schools, and there are often difficulties in getting private health care providers to understand emotional neglect. These children largely experienced inadequate parenting from emotionally unavailable parents, as their mothers and fathers were not investing parental time in them. It was clear in some cases children experienced the majority of their “parenting” came from carers who were paid to look after them. Some participants expressed that the parents’ detachment from their children were often a contributory factor in the emotional and behavioural difficulties that brought them to the attention of children social care, and that parents were often affronted that the quality of their parenting were being questioned, or that they were being accused of neglecting their children. What remained consistent in participants’ accounts is that it is a challenge to get these parents to understand the issues pertaining to their children’s relational attachments and their emotional experiences of care. Thus, any questions about their parenting and the emotional home environment were often met with hostility and conflict, and parents strongly resisted any intervention, in some cases, their obstruction towards social workers manifested in formal complaints to senior managers and elected councillors and the threat of legal action.

A key finding concerned the high levels of domestic violence, drug and alcohol abuse, and parental mental ill-health issues, that were a feature of a number of cases of neglect that social workers interviewed dealt with. Often these issues were hidden and only came to light when parents were going through acrimonious separations and needed a Section 7 Report. Getting parents to understand the adverse effects on the children was often very difficult when they did not acknowledge that the negative family dynamics placed their children in a vulnerable position.

One participant made the following point:

*“Yes especially with domestic violence we have had some cases where parents have said they are having couples therapy which means the risks are higher but they have been able to pay for that, and if we can't influence the impact on that child right now, we can't be involved and that's really difficult”.*

A number of participants reported that an obvious advantage of affluent parents is that they could purchase goods and services such as nannies, and other forms of help to “do their parenting for them” – and the hired help was doing a lot of the day-to-day interacting with children’s private health care providers and public schools, and nurseries, so it is easier for parenting-capacity problems to be masked and for issues of neglect to not be picked up by practitioners.

A team manager commented:

*“Actually when we are talking about affluent families they are not the people who can't afford to clothe their children, they're not the people who can't afford to feed their children, so quite often those basic care needs are being met even if*

*you've got an alcoholic parent, for example. Um, they may be quite high functioning, may be still be working, and childcare comes into that quite a bit too. The children are picked up from school, their attendance is still good, it might be somebody else actually meeting the child's needs, so it might be more difficult to find out what's really going on in the family, but that child's needs are being met”.*

Some of the cases described in the interviews indicated that parents had the financial resources to purchase private substance or alcohol abuse services to address their problems if it was flagged up as an issue by practitioners, so they therefore removed themselves from the spotlight of social services through private means.

As this participant noted:

*“The child had been seriously neglected because of alcohol misuse. That's another area which is hidden in a different way because sometimes in affluent families misuse of alcohol there is an acceptance of its a thing that they do, and if it becomes a problem they refer themselves to a clinic and deal with it and then come out and then the cycle starts again. And then the children may well be in private schools or boarding schools and then maybe some sort of positive figure out there that keeps it ticking over but the neglect that the child is suffering remains, and it almost comes out by the second time they came to our attention”.*

All of the children’s social care departments that participated in the research had high numbers of fee-paying and independent boarding schools in their geographical area attended by children whose family homes were out of the authority areas, and in some cases, the parents lived overseas. This added to the complexity of safeguarding children when concerns about child abuse and neglect were flagged up. Practitioners describe the difficulties in getting

schools to acknowledge and take seriously their safeguarding responsibilities to ensure that all safeguarding allegations were handled appropriately.

Participants consistently reported that the independent boarding schools struggled to see these children as being in need or at risk of significant harm as a consequence of neglect. Participants described that, in their dealings with boarding schools, staff were not always clear about signs and symptoms of neglect, and their awareness that neglect may be an indicator that other forms of abuse may be taking place was very limited.

For example, one participant had this to say:

*“The school nurse would have a conversation and say 'look there's no physical evidence she was sexually abused', and this is 6 months down the line when these parents have really been difficult with us, avoiding, making several complaints and change of social workers because they refuse to work with people. You feel, how many times do I need to explain what their basic techniques are, to close the door to us. And they are still saying 'look there's no physical evidence' and school says 'look she is a great Mum, there is no way she would ignore the child being abused'. And you have to keep repeating that 'this is the disclosure that this child made', she is a very articulate lovely little girl, she has not retracted anything, those are harsh cases for the social worker because you feel like you are holding, umm not managing the risk because that is what we do but emotionally you are really feeling that this is not good enough for this child and it really helps when you've got other people around the table that are on the same page and it's really hard when they're not”.*

Participants reported that, in some cases, the designated safeguarding leads in fee-paying and boarding schools were often very reluctant to raise concerns with parents and to report safeguarding concerns about neglect to children's social care. They were also resistant to joint-working. A number of

participants also stated that some schools' reluctance to report signs of abuse stemmed from the parents' transactional arrangements with the schools, thus there is hesitancy from schools to pass judgement on parenting behaviours and confront the problem of child neglect. Interview participants raised questions about whether the schools prioritised their relationship with the parents over the needs of the child as a consequence. Some participants expressed the view that boarding schools foster what they refer to as "normalised parental deprivation" and that this idea is not widely talked about. Thus, a number of public schools dealt with any safeguarding concerns in-house and participants stated that developing a shared understanding of neglect was often very challenging and highlighted that effective joint work to build a picture of children's experiences were often very difficult.

## **THEME 2: Privilege and Entitlement**

All of the participants recounted that affluent parents' social class placed them at an advantage over the social workers and formed a major barrier to the level and depth of potential intervention. The common view expressed was that socially-privileged parents had access to powerful social networks, which some used to resist social work interventions.

*"They know where to go with complaints, they know people within the council because the place is so small as well, they'll get on to their local councillor, someone who they go hunting or shooting with or playing golf, that's the reality of working in a very small place like this (and affluent) they know people in high places and they threaten you with people as well. So you've got to be confident when you arrive and know what you're talking about".*

For example, in one of the smaller counties in the sample one of the cases that came to child protection workers' attention involved a child whose parents were well established members of the community with high status in the county, the parents therefore called on various members in the community to give personal testimonies attesting to how upstanding they were and therefore good parents. On the other hand, the main concern of other parents were to do with shame and the stigma associated with social work involvement, and were therefore fearful that knowledge or suspicion of neglect of the children might spread to their social networks. Participants elaborated the ways that the parents' class backgrounds gave them an unspoken advantage, which meant that they were generally knowledgeable about the workings of organisations such as children's social care and the safeguarding process; perhaps more crucially, their sense of entitlement, brought a greater confidence to challenge the child protection decision-making processes. A number of participants expressed that because of parents' social status, income, and educational backgrounds they looked down on social workers, who they considered were beneath them, thus their intervention was often seen as an unwarranted intrusion. Such class elements formed a major barrier to developing constructive relationships with parents. Some participants also gave detailed examples of the various ways parents exercised class-based privilege to deliberately undermine their professional authority. For example, some participants spoke of being belittled and humiliated by parents in meetings, leaving them feeling as if they had to prove themselves and establish their credibility. Some reflected the view that, from the perspective of affluent parents, being told what is in their children's best

interests by social workers was not an experience they welcomed, resulting in the wishes and feelings of the parents taking precedence over the needs of the children. Some also pointed out that certain parents felt that, if they had to have any social work involvement at all, they should only have to deal with managers.

The following observation was made:

*“You will get affluent families who will come and stand in reception and even though the social worker has gone down, they will demand to see the team manager or they will ring the director and it's not just an empty threat, they will ring the director. Whereas with our less affluent families they may standing reception and shout and get kicked out, and they might make threats to go to the newspaper but actually it's not going to happen. With affluent families what they want they want the manager and then they want the director and then they go to the MP. I have had a number of letters from MPs saying 'what are we doing with these certain cases?', certain low level cases, why we haven't responded to somebody as they would want you to. With our usual families that doesn't happen, once they have got the assistant manager there, they are quite happy to work with them”.*

One of the biggest challenges described by participants was that parents with abundant financial resources used their privileged position to hire legal advocates to help them resist social work interventions, and were therefore more likely to either make threats to complain, and/or unjustified complaints, thus attempting to dilute the assessment of risk that social workers undertook.

In one research site the participant had this to say:

*“When you go into an affluent area what you find is that was asking people who are more articulate and better educated you find that they are more likely to use the complaints processes. So a lot of time and energy is spent trying to unpick what has and what has not happened. and it makes*

*social workers worried about actually getting to the hub of the issue, because they know a complaint will follow”.*

According to participants power is exercised through their use of solicitors and lawyers and they described what they referred to as the “scattergun approach”: affluent parents were more likely to write long letters or emails quoting the relevant passages from The Children Act (1989), Working Together to Safeguard Children, or to directly contact senior managers, elected council members and MPs, with their vexatious complaints.

*“I had found that families who are more affluent, we communicate with them in a different way. They send emails, they write to us formally, whereas the other families that we work with, they don't. Do they? They come in the office, or they phone. But the affluent families we get a long list, almost to the point where it becomes almost harassing, you know I don't want to be seen as if we don't communicate with families, but it is almost like they want a response and they want it immediately. They have sent you an email half an hour ago and they want a response to it. They are much more articulate, they are much more able to challenge, which is not a bad thing. And because of that, I sometimes wonder whether they do get a different service than a family who are less articulate”.*

All participants felt that the parents' socio-economic status privileged them to subject their practice to a level of scrutiny in a way that families from lower-socio-economic backgrounds did not. In part, responding to the demands that were made meant it was sometimes difficult to retain a focus on the child's needs. Participants spoke of the extra effort, skill, and time they had to dedicate to cases involving affluent parents, due to this extra scrutiny from parents' which raises questions about fairness and quality of provision to non-affluent families.

Put briefly, affluent families who came to children's social care's notice were more likely to have the resources and capabilities to resist social workers' intervention. There was often a great concern that the parents would make a formal complaint; thus, the subtleties and nuances of class privilege had a key role to play in parents' ability to resist child protection investigations.

### **Theme 3: Barriers to Escalating Concerns**

A recurring theme that permeated through the participants' accounts was the challenging behaviours they encountered when attempting to escalate concerns for a section 47 investigation. Specific barriers included difficulties engaging parents, and the gathering of information to build up a picture for the assessment of the safety needs of children. Participants noted it was a considerable challenge to gain knowledge of families' histories and functioning for assessing emotional neglect, or its severity and its chronicity.

Participants also discussed the ways that parents resisted the level of probing and questioning that is required, and in some cases their non-compliance made it significantly more challenging to make the children the subject of a child protection plan. Other factors influencing this process included the parents' use of lawyers and solicitors to challenge the decisions of social workers, or to avoid social work intervention. Overall, participants consistently cited that highly resistant parents were more likely to use legal advocates or the complaints procedures to challenge social workers when they attempted to escalate their concerns to child protection, which could have considerable influence on the outcomes of the case. Some practitioners reported being put

under a lot of pressure to respond to the demands of the parents which made it difficult to maintain a child-focus approach. Some participants reported feeling intimidated by parents and needing good support from their managers in order to carry out a robust risk assessment as parents did not often engage with social workers and actively resisted their intervention. They expressed the importance of being able to focus on the child but highlighted that there were very few opportunities for direct observation of the child's relationship with the parents; particularly, in situations where children were in schools that were failing to recognise child neglect, leaving the children at risk of significant harm.

One participant said:

*"I think it is very important to build that rapport with the child because once they trust you they will tell you about the daily routine. What they don't like Mum and Dad doing. In that particular case we got lots of evidence from the older brother who just reached a point where he had had enough and told the social worker everything. And on that occasion they had both been neglected, it was emotional neglect and they were both very overweight. Mum had an argument with every professional involved so it was constant drama. Relatives were cut off from them, so the neglect in that case was overwhelming but pulling the evidence together was very difficult to reach the threshold. But actually when he reached and said he had had enough the evidence was brilliant because although he was raised in an environment with two parents with massive egos and limited emotional intelligence, he was one of the most emotionally articulate children I have ever met, and he could put himself in his brother's shoes and he saved him and his brother really and they went to live with his granny".*

In one site it was highlighted that there were some differences in how social workers engaged with affluent families from minority ethnic backgrounds. For

example, it was noted that social workers were much more likely to draw on cultural explanations to make sense of risks to the children concerned, which resulted added difficulties in keeping a focus on the child.

A participant commented:

*“What happens is that social workers get worn down by these cases, and we let go of them without actually achieving the outcomes we want to. With affluent families from minority ethnic backgrounds, social workers can react the other way because they are different, they are constantly looking for other things which are not always rooted in the cause. So it plays out in a different way. You have perhaps got English as a second language and the interplay can be different. And you know you could swing the other way and not let go when you should”.*

More often than not, parents prevented practitioners from seeing and listening to the child. Therefore, practitioners were often left with insufficient evidence to progress to a section 47 investigation, resulting in drift and delay in some cases. Findings suggest that when the social workers were able to get good outcomes for the children this stemmed from their direct contact with them especially with older children who, had a greater ability to express themselves and discuss what it is like for them living in that household.

Here is what one practitioner had to say:

*On the surface there was nothing wrong with the care, the presentation of these children, but it was more about their experience of being in a very hostile home and it impacted on them and the parents' ability to understand how their behaviour impacted on the children. Because you know they had a holiday twice a year, they had their iPhones, they had this, and also I think the hardest bit was for Mum to accept that actually the relationship between her and her husband was causing the*

*children more damage than if she separated and they lost all that materialistic side of things. And actually that's what the children wanted. It was easier in that particular case too, because if you've got a good social worker, the social worker was able to get the voice of the child in that, and that's something we really do focus on in about, what does the child want? These children were very able because they were older, to express what it was like living in that home, how the tension in the home changes as soon as Dad walked in the door, and actually living with two parents that actually didn't communicate with each other. You know, so in that respect I think it is about social worker skills in actually engaging that child, but they were teenagers so when you've got a younger one I think it is much harder".*

There was widespread agreement among participants about the tensions inherent in having to devote a great deal of time to responding to the demands and complaints of affluent parents while keeping focus on the safeguarding needs of the child. In order to persevere and not be intimidated by the parents, the social workers needed to have good knowledge of child neglect, good communication skills and confidence in their ability to navigate the complexities and dynamics that arise in such cases.

#### **Theme 4: Factors that make a difference for Authoritative Practice**

Being skilled and knowledgeable in relation to working with neglect was identified by all participants as critically important. For timely and skilled intervention, participants stressed that skills such as assertiveness, confidence, and being self-assured were key as well as the personal qualities and relational approach of the worker. Considerable experience, practice wisdom and knowledge of neglect were essential in relation to working with highly resistant parents who had the resources to challenge social work decisions. Knowledge about child development was necessary in order to understand the impact of child neglect, but a very good understanding of the

threshold for emotional neglect was also considered as essential as a high level of judgment and assessment ability is needed. Participants spoke of the spectrum of skills that social workers need to have because affluent parents are highly litigious, and have the material resources and the machinery behind them. Practitioners thus needed to be skilled in communicating with difficult-to-engage and highly-resistant parents from affluent backgrounds.

A participant made this observation:

*“I think it takes a really skilled practitioner, because you have to acknowledge, hear and listen to what parents are saying. You need to give them sufficient attention so they feel what they have said has been heard, whilst at the same time just keep bringing it back to the child and the impact on the child”.*

Another participant had this to say

*“I say a clarity of understanding about thresholds, a focus about what is good enough, a very clear knowledge and understanding of the different categories of abuse and how they can intertwine and present as something different. Somebody with good organisation skills because if you don't get back to someone who is constantly writing to you or you don't respond to their phone calls then that becomes a reason to deflect at a meeting.”*

Participants emphasised that they also needed to pay much more attention to how they presented themselves as an expert and authority figure; this included paying attention to how they dressed and spoke, as they perceived such elements form barriers to engagement with affluent families. There were two examples given of practitioners being removed from cases by their managers due to complaints by the parents that they could not understand the social workers' accents.

As one manager puts it:

*“You need to be articulate because you have lost them if you have got an accent or English is not your first language and that's not on at all but that's how it is”.*

This raises uncomfortable questions about whether evaluative judgments are being made about the individual social worker's communication skills. Most notably, negative attitudes towards certain foreign accents are left unchallenged, so the prejudicial assumptions that these attitudes rest upon are not unpicked in order to better support minority ethnic social workers more effectively.

There was a general consensus that the stakes were higher, and in order to perform effectively and to be taken seriously, practitioners also needed to be very clear about their professional authority, and to have a very good working knowledge of the relevant legislation and statutory guidance that informs practice decisions when assessing affluent families, because these families were often very well-informed of the legal and statutory framework and were therefore much more likely to counteract their claims, than do poorer parents.

All of the participants stressed that having good supervision and a supportive manager was vitally important.

As one participant noted:

*“You need line managers who are completely behind you all the way, and won't undermine you. You need a confident but child centred approach from line managers as well”.*

The importance of good supervision, which can help to mediate the impact of parents' attempt to undermine the social workers, was emphasised. Practitioners named key elements, such as, organisational cultures of support, purposeful informal conversations about the case with colleagues, good supervision, knowledge and confidence and responsive managers, and themed learning activities, as key to their ability to work in this complex field. In some of the research sites, reflective supervision forums enabled analytical thinking that was process-orientated as an aid to understanding and analysing risk in a context where covert and nuanced class privilege operated to undermine the social workers. In one site they utilised an action-learning method to periodically focus on a particular theme or issue to do with child abuse and neglect as a way of developing practice. A consistent message from participants is that a reflective space provided a sounding board to help them to disentangle the professional practice dilemmas, and to find new approaches to solve challenges, as well as to question their values, beliefs and assumptions for dealing with what some referred to as "the affluent family effect".

In some of the local authorities, frameworks for practice, such as Signs of Safety and a problem-solving approach, were named as tools for practice that enabled practitioners to analyse all risk factors. Being solution-focused, they provided a structure for analysing complex and often highly emotional situations with affluent families. In many of the authorities, the role of the principal social workers were critical in helping to develop a culture of learning

and improvement, where practitioners were sufficiently supported to develop their practice in this complex field.

## **Discussion and Conclusions**

The purpose of the research was to find out how social workers engaged parents from affluent backgrounds when there were safeguarding concerns of neglect. The challenges of working with affluent parents in the child protection system are multi-faceted and resource-intensive. In particular, neglect in affluent families can be difficult to recognise and address. Some of the problems concern parents' attempts to minimise the significance of emotional neglect as well as the difficulties for practitioners in assessing emotional neglect. Families may be materially advantaged, and the children's physical needs are being met, but there may be little or no emotional connection with the children, and the parents may not be psychologically available (Howarth, 2014). Other problems concern the communication between the designated safeguarding lead in private fee-paying and boarding schools and the relevant local authority children's social care department.

The research has emphasised the need for raising awareness of definitional issues of emotional neglect, in order to promote more effective responses to the needs of children and young people from affluent backgrounds who may attend schools away from their home authority. In terms of early help, the findings also suggest that younger children, and children with disabilities who are at risk of neglect, are probably more hidden from children's social care services than other children.

While working with involuntary and highly-resistant parents is a common occurrence in child protection work, there are some distinctive factors when working with resistant affluent parents. The particular challenge posed is that, while social workers were cognisant of their power as professionals, they also face hierarchical power relations between themselves and affluent parents, which meant that the parents were often very knowledgeable about the workings of the system, and socially well-placed to question decisions. As described above, the findings suggest that affluent families resented having to deal with social workers and were much more likely to oppose their decisions, thus using status and privilege to undermine and disempower practitioners. One of the most frequently discussed issues was that affluent parents' confidence and sense of entitlement meant that they felt they could diagnose their own needs, expected children's social care to accommodate them, and felt that they had a right to challenge those in authority. Practitioners reported that active engagement techniques, such as having a formal signed agreement and goal setting, often did not work with affluent parents; the parents essentially used formal complaints as a strategy to deflect attention away from doing a robust assessment, a finding also identified in other research (Laird 2013). Most participants, however, indicated that, because this group of parents are more likely to use the complaints procedures, which can deflect attention away from their parenting behaviour, it concentrated their thinking on the importance on holding the child as a central focus of the assessment, so that the parents' interests did not outweigh consideration of what was in the child's best interest. Arguably, the social workers were challenged to develop strategies to speak directly to the children whilst still

respecting and acknowledging the status of the parents. Where the practitioners were able to engage directly with the children and were not intimidated by the parents, they were much more likely to achieve better outcomes for the children involved. In such situations, what made a difference was that the social workers had the self-confidence, practice wisdom, professional curiosity and most importantly, the support of their managers, which enabled a focus to be kept on the child without letting the complaints from the parents cloud the risk assessment. The participants' narratives offer key insights into the ways in which the threats of complaints instill fear and operate to deescalate concerns in some cases. It would suggest that one factor concerns how supported some social workers felt by their managers. Whilst there has to be a degree of confidence to not be deterred by the threats of complaints, notwithstanding, practitioners also need to have supportive managers behind them. This is an important consideration, given that a key role that managers have in supervision is to help social workers process the complex emotional demands of the work, and since the view of managers significantly influenced the direction that the investigation would take in some cases.

Participants in the research consistently stated that engaging affluent parents to address specific parenting behaviour to make robust risk assessments of children's needs was often time-consuming and resource-heavy, as well as frustrating and stressful. Arguably, given the considerable number of children's social care personnel that tend to be involved in a single case (including social workers, team managers, and service managers to respond to the demands of parents), it is important to consider whether the

practitioners offered a different level of service to affluent families because they expected to be questioned more. The research also challenged participants to reflect on whether in some cases professional judgements were particularly susceptible to unconscious bias as a result of the families' socio-economic status. This particular issue has been highlighted in a number of serious case reviews (Brabbs 2011; Carmi and Walker-Hall 2015).

In terms of knowledge and skills, all participants in the study frequently emphasised the importance of having a good understanding of the threshold for neglect in order to take authoritative action. Also critical were practice wisdom and confidence, coupled with child-focused communication skills, an ability to manage conflict and challenges, as well as good problem-solving and procedural skills (Keys 2009); these tools were essential for frontline social workers to effectively assert their professional authority with affluent parents when there were concerns about abuse and neglect. With regards to interventions that are effective for families that are highly resistant to social work intervention, some practitioners found that risk assessment tools such as the neglect toolkit were useful in helping them to stay focused on the child to assess levels of risk and in evidencing assessments in order to escalate concerns when there was a need to do so. However, it is important to recognise that whilst standardised assessment tools such as the neglect toolkit is a necessity for assessing risk, social workers also need to be confident and assertive in their professional judgements to identify and name deficits and neglectful caregiving in affluent families. Thus, if practitioners are to engage with the complexity of safeguarding children in affluent families, they also need to be able to acknowledge and discuss the power of social

class and how it impacts the child protection processes. As a number of serious case reviews point out, class does get in the way of child protection work (Brabbs 2011; Nicolas 2014).

The study has implications for how social workers understand and work with affluent families when there are safeguarding concerns. Though class pervades much of social work with families, the stratification of class is not explicitly named or explored in training events in working with resistant families, for instance. A striking example from this study is that even in those local authorities where a good proportion of their interventions involved affluent families, training events on working with difficult or resistant parents only used case scenarios depicting poor and working class families, thus reinforcing the idea of neglect as a social and economic disadvantage phenomenon. In effect, social class as it frames the lens through which neglect is analysed needs to be a central issue in practitioners' discussions and reflections on child neglect. Essentially, the nuances of class division as it impacts interpretation of and responses to neglect in affluent families need to be unpacked. The findings from this study thus highlight the need to have more critical dialogue about social class and privilege as it frames understanding of risk factors for children in affluent families.

## **Limitations**

It is worth noting some of the limitations of this study. The small-scale, exploratory nature of this study, means that it was not trying to elicit statistical or generalisable data. Caution is needed before generalising to all affluent parents.

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## Appendix 1.

### *Types of Neglect*

Neglect type	Features associated with type of neglect
<b>Educational neglect</b>	Where a parent/carer fails to provide a stimulating environment or show interest in their child's education. They may fail to respond to any special needs and fail to comply with school requirements.
<b>Emotional neglect</b>	Where a parent/carer is unresponsive to a child's basic emotional needs, leading to a child's self-esteem and sense of identity being undermined. (Most experts agree that emotional neglect is the most common and most harmful type of neglect.)

	emotional abuse by intention; emotional abuse is intentionally <i>inflicted</i> ,
<b>Medical neglect</b>	Where a parent/carer minimises or denies a child's illness or health needs, or fails to seek attention or administer medication and treatment.
<b>Nutritional neglect</b>	Where a child does not receive adequate calories or nutritional intake to 'thrive'). At its most extreme, nutritional neglect can take the form of malnutrition.
<b>Physical neglect</b>	Where a parent/carer does not provide appropriate clothing, food, clean and safe living conditions.
<b>Supervisory neglect</b>	Where a parent/carer fails to provide an adequate level of supervision and protection from harm. For example, a child may be left alone or with inappropriate peers. Risky behaviours (for example, under-age sex or alcohol use) may not be appropriately monitored or prevented.

(Flood & Holmes 2016)