

THE NEGLECTED CHILD

How to
Recognize,
Respond,
and Prevent

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DEDICATION

For Addy Grace—GW

For Mike, Joseph, and Allyn—LHW

For Matt and Tatum—HJJ

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If 20 million people were infected by a virus that caused anxiety, impulsivity, aggression, sleep problems, depression, respiratory and heart problems, vulnerability to substance abuse, antisocial and criminal behavior, retardation, and school failure, we would consider it an urgent public health crisis. Yet, in the United States alone, there are more than 20 million abused, neglected, and traumatized children vulnerable to these problems. Our society has yet to recognize this epidemic, let alone develop an immunization strategy.—B. D. Perry

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Introduction

The Neglected Child: How to Recognize, Respond, and Prevent was born out of a presentation on child neglect at the National Association for the Education of Young Children (NAEYC) Annual Conference & Expo, which itself emerged out of a need to collect the relatively limited amount of information on child neglect and assemble it into an applied package useful to early childhood professionals, administrators, and students. As this book developed, we could scarcely help but notice that the nightly news seemed to underscore the need for information on child neglect. As we wrote, we heard about the starvation death of a 3-month-old baby, born weighing 6 pounds only to die at 3 pounds. Her parents admitted to sometimes forgetting to feed her. We remembered the newborn who was mauled to death by the family puppy as his mother slept in the next room. We worked harder as we heard of the child left in a car at a casino so his father could gamble, the 4-year-old who had to go begging neighbors for food because she had been left home alone, and the mother who, without intervening, allowed her boyfriend to beat her child to death. We questioned whether we could write enough to matter for the 6-month-old infant who was suffocated by his father in a drug-induced sleep, the toddler whose parents beat him and then denied him lifesaving medical care, and the children who were killed in a fire while locked away in a room. We grieved for these children, and then we wrote more.

The reason that we found ourselves so motivated by these cases, and the many like them, was that while these children were not killed on purpose, they weren't victims of accidents, either. Although each death was tragic and heartrending, none had to happen. These children died because they needed an adult to take care of them, and the person who was supposed to do that, did not. A baby must be offered food and a safe place to sleep. A parent must do his or her best to have a safe babysitter for an infant. A toddler who has severe injuries must be taken to a doctor. When a person, whether a parent, a grandparent, or a paid provider, is responsible for taking care of a child and does not do what he or she should to keep the child safe and healthy, that is neglect. These are the types of neglect that result in behavior problems, learning problems, poor growth, and even death. This is the neglect of which we write.

How to Use This Book

Our goal for this book is to make as many caregivers as possible aware of just how pervasive neglect is, how deadly it can be, and, perhaps most importantly, that it can be prevented. No child should ever have to suffer neglect if there are adults to intervene. We believe that early childhood professionals are perfectly positioned to identify, intervene in, and prevent neglectful situations, and we have endeavored to give teachers the tools they need to allow more children to grow up safe, happy, and loved. When it comes to neglect, teachers literally can be lifesavers.

A secondary goal for this book is to ensure that no child experiences neglect in an early childhood classroom. Sadly, there are more than a few stories of children who have been neglected and even killed by the people put in place to protect them: child care providers, teachers, and foster parents. As you read this book, think not only of preventing neglect in the home but of how caregivers can provide a safe, nurturing, and protected environment for the children in their care. The relationships children have with the people who care for them will nourish their brains, bodies, and spirits and can contribute to their healthy and productive development.

The first section of this book provides information about neglect, including different types and levels of severity, establishing suspicion, reporting, and intervening. Each chapter includes a brief quiz that can be used to assess chapter learning or as staff development or continuing education. As you read, you will also see text boxes called “Notes From the Field.” These stories, disguised for confidentiality, represent real-life stories that we encountered during the creation of this book. We hope that these will inspire discussion and a creative way to apply the material in the chapters.

The second half of this book contains applied materials for teachers/care providers to use for professional development, in staff training, and for parent education. Reproducible and customizable, these include parent handouts on child neglect; sample statements for a parent handbook; self-assessments for teachers, care providers, and directors; and contact numbers for each state and Puerto Rico

for reporting suspected neglect. We hope that this will prove to be a useful tool kit as you become aware of neglect, and that this information will enable you to create the safest possible classroom environments for the children in your care and to support families to do the same at home.





What Is Neglect?

When someone says “child neglect,” what image springs to mind? A hungry child? A child without a winter coat or decent shoes? Families served at soup kitchens, children with matted hair, or those who are unbathed? Do you think poverty and neglect are one and the same? While these images may indeed represent some neglected children, neglect itself is a varied and misunderstood form of child maltreatment.

Many people, even professionals, may see neglected children as the less fortunate or simply “the poor,” but not of the same caliber as children who are physically or sexually abused. Images of the “poor but proud” family that suffers with dignity are found everywhere from “The Little Match Girl” of children’s literature to *The Grapes of Wrath*, in which they depict the struggle to survive in noble and heartrending ways. These images are incredibly powerful, yet they show only one face of child neglect.

One of the reasons that there can be confusion about neglect is that, unlike sexual abuse or withholding of medical treatment, neglect is not explicitly or formally defined at a national level. The Child Abuse Prevention and Treatment Act (CAPTA) was amended in 2003 to include the definition of child abuse and neglect as, “at a minimum, any recent act or failure to act on the part of a parent or caretaker which results in death, serious physical or emotional harm, sexual abuse or exploitation, or an act or failure to act which presents an imminent risk of serious harm” (U.S. Department of Health and Human Services, 2008). The more specific definitions of neglect, as well as the definition of physical abuse, are left up to each state. There is no overarching federal guideline for the age at which children may be left alone, and no dictum that caregivers must hold children while they feed them; nor is there any golden rule for how dirty a child must be (or why) to be considered neglected. The details have been left to state government and to the researchers who study child neglect.

A second widely accepted definition of child neglect comes from the U.S. Department of Health and Human Services:

“A condition in which a caretaker responsible for the child, either deliberately or by extraordinary inattentiveness, permits the child to experience avoidable present suffering and/or fails to provide one or more of the ingredients generally deemed essential for developing a person’s physical, intellectual, and emotional capacities” (Dubowitz & Black, 2001).

This second definition adds a new element to assessing neglect in that the behavior creates or contributes to a lack of something “deemed essential” for the child’s development and well-being. Essential elements can be defined both culturally and regionally, and can vary from state to state. It is important for teachers to understand the basics of child development, health, and safety, as well as local standards for child care. This means that your personal beliefs, feelings, history, and values, and even where you live, can shape what you see as neglect.

Types of Neglect

Even among researchers who study child abuse and neglect, more study abuse. Some have even commented that the study of neglect is, itself, a neglected area (Dubowitz, 2007). The relatively few people who have studied neglect have created a number of categories by which neglect can be identified. We have consolidated those categories for you here, but be aware that if you read much about neglect, you will see these called by several different names. The concepts, we believe, remain very similar. In addition to these discrete categories, there are degrees of neglectful behavior, such as chronic (occurring as part of a pattern) or acute (neglectful behavior occurs just one time).

When all of the components of child neglect are examined, we can discern six different kinds of neglect that affect children and their families. (See Table 2.1, page 21.) The type in which children lack clothing, food, or shelter is generally termed physical neglect or “deprivation of needs” neglect. This means that children’s basic physical needs aren’t being met. This type of neglect is generally chronic, meaning that it occurs in a persistent pattern in which a child is not cared for appropriately. We all know that young children are prone to refuse a meal or throw a tantrum over wearing a coat; however, it is not the isolated skipped meal that creates neglect. It is a pattern of a child being denied adequate nutrition that defines this type of neglect. Deprivation, like all forms of neglect, is perpetrated by a person responsible for the child, sometimes called the PRC. Parents are responsible, but so are child caregivers, babysitters, and other adults left to care for a child. If you are in charge of providing a

child with a safe and healthy environment, you can neglect a child in the failure to do so.

Another type of neglect is medical neglect. In this type of neglect, children are denied needed medical care to treat a condition or prevent the worsening of a condition or a life-threatening event or illness. This type of neglect may be either chronic, as when a child is repeatedly refused medical care for an ongoing condition, or acute. It may also take the form of a family member or caregiver failing to heed obvious signs of illness or trauma. Acute medical neglect means that a child is in need of, but is denied, one-time or emergency medical care. Debate within the field of medical neglect includes discussion of religious exceptions to obtaining life-sustaining medical care. The Supreme Court ruled in 1944 in *Prince v. Massachusetts* that, regardless of religious beliefs, parents do not have the right to withhold necessary medical care from a child. Caregivers need to be aware that their responsibility is to always protect the child by making a report of medical neglect or by alerting medical personnel in an emergency situation. No caregiver should ever fail to make a report based on either his or her own or the family's religious beliefs.

A third type of neglect is supervisory neglect. Supervisory neglect occurs when a person responsible for a child (the PRC) either fails to supervise that child to keep him or her from harm or fails to have someone responsible and able to care for the child do so. Examples of this type of neglect include a parent who sends a toddler outside to play and fails to watch the child to keep him or her safe, a parent who leaves a child in the care of someone who is using or passed out from drugs or alcohol, or a home child care provider who leaves a child alone near a water source in which he or she could fall in or drown. This type of neglect, too, can be chronic and acute. Chronic supervisory neglect might entail a parent who routinely leaves a toddler alone in a house while he or she goes to work. An example of an acute supervision problem might be a parent who, on only one occasion, fails to put away a loaded gun and leaves it where a child might access it. Environmental neglect is a fourth type, although it may appear to be related to both deprivation of needs and supervisory



neglect. Children who suffer environmental neglect may come from filthy homes. This can include circumstances like dirty dishes, rotting food left out, or infestations of rats or cockroaches. Children who come from such environments may, themselves, present to school regularly in unwashed clothing or without having been bathed recently. This is why some professionals group environmental and needs neglect together.

"We Should Have Sued"

When my son was 18 months old, he attended a home day care center. One day, my husband went to pick him up, and the provider couldn't find him. The house was searched frantically, and the police were called. Fortunately, our 911 call was connected to a lost child who had been found two hours earlier wandering in a busy intersection. He had been taken home by a stranger who, thankfully, called the police. The provider had no idea my child had wandered out her unlocked front door until pickup time. He could have been killed or kidnapped, or met with any number of horrible things. To this day, I don't know why I didn't sue the provider for everything she was worth. I suppose I was just so glad that my child was alive I didn't care about her.

Educational neglect, by definition, may be difficult to assess because not only may children neglected in this manner miss school, but their parents may have failed to register them at all. For school-age children who are required to attend school, parents may create a neglectful environment by avoiding the school because they don't like it, because they can't find the electric bill or birth certificate to register the child, or to prevent a child from reporting abuse or other family secrets. Parents may also be unable or uninterested in engaging in efforts to enroll their child in, help their child get ready for, or transport their child to school. For infants and preschool children who have been registered for group care, teachers may notice a pattern of absences that may be due to parents keeping children at home to let abuse injuries heal. Children are also sometimes kept from school to care for younger children in the absence of a parent, or perhaps even to care for an incapacitated parent. However, there are many reasons that a parent may hide a child from the educational system at any age.

The final category we use to describe neglect is emotional neglect. Some researchers do not use this classification by itself because they think it fits better with other categories. However, we feel strongly that it is a unique form of neglect. Emotional neglect is like deprivation of needs neglect except, instead of physical needs, it is the child's emotional needs that go unmet or inappropriately met. For instance, child care professionals acknowledge that the most important goal of the first year of life is to establish the attachment relationship between the infant and his or her caregivers. Unpredictable parents who love one minute and punish the next, parents who regularly ignore children's needs and cries, and families that are chaotic or violent can all disrupt the development of secure attachment. Although there are many reasons for a parent to not meet a child's emotional needs, such as maternal depression, drug or alcohol abuse, or simply not knowing how to react to a baby, all of these behaviors can be classified as neglectful, regardless of the root cause. The consequences of emotional neglect are serious and far-reaching, including nonorganic failure to thrive (which can lead to a child's death), social problems with same-age peers, attention problems, aggression, and an impaired ability to form satisfying relationships.

Remember, if it SEEMED like neglect, report it!

Admittedly, remembering these six categories of neglect can be confusing. A simple mnemonic to assist with memory is "If it SEEMED like neglect, report it." Each letter in SEEMED represents one area of neglect, listed below with some examples.

S: Supervisory neglect

- Failing to supervise a young child around water, weapons, or other dangerous circumstances
- Supervising a child while impaired on drugs, prescription drugs, or alcohol
- Leaving a child with an impaired caregiver
- Leaving unsupervised a child who cannot be expected to handle a crisis adequately



E: Environmental neglect

- Rotten food, cockroaches or vermin in the home
- Feces on the floor
- Piles of soiled diapers or clothing
- Children covered in insect or rodent bites
- Infants with feces, blood, or rotten food stuck to them
- Children with cockroaches in their diapers
- Children kept in a home with dangerous and available weapons or drugs

E: Educational neglect

- Not taking a school-age child to school for any reason
- Not taking a child to school to hide abuse or illicit family activities
- Not taking a child to school because of a lack of resources or proof of residence

M: Medical neglect

- Withholding care from an impaired infant with the intent to cause death
- Failing to secure care for a child's chronic condition
- Failing to secure medical attention for an injured child

E: Emotional neglect

- Humiliating a child
- Engaging in bizarre forms of punishment
- Rejecting a child
- Blaming a child for the family's problems (scapegoating)

D: Deprivation of needs neglect

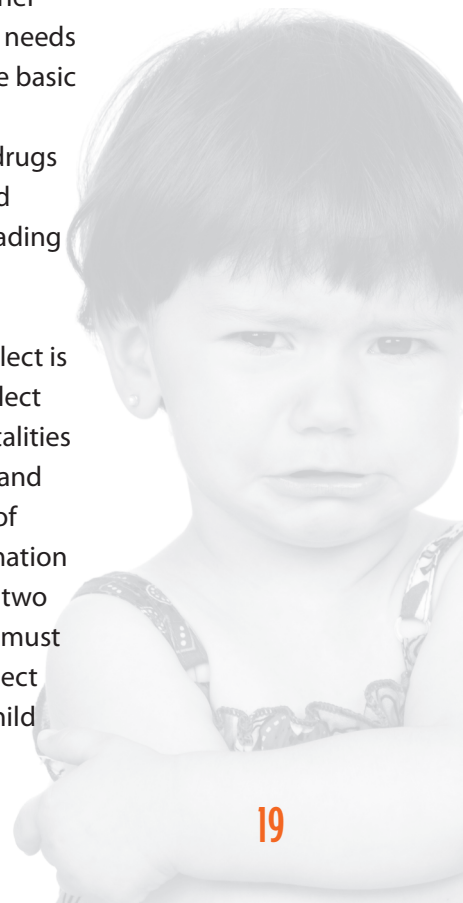
- Withholding food or water
- Abandoning a baby or child to the elements
- Failing to protect a baby from the elements (because of inadequate shelter or clothing, as opposed to abandonment)

Risk Factors

For all of the above forms of child neglect, there are certain environmental conditions that researchers have associated with nonfatal neglect. (For a discussion on the unique risks for fatal neglect, please see Chapter 2). Barth (2009) found that substance abuse, mental illness, domestic violence, and child conduct problems alone or in combination are associated with child maltreatment. Stagner and Lansing (2009) also included small sparse social networks, community disorganization, and violence as risk factors. Risk factors such as poverty, isolation, and depression rarely happen independently, and each factor can magnify the effects of other factors. Substance abuse, lower economic status, depression and other mental health conditions, a history of neglect, membership in a cultural minority, and rural or urban locations may indicate higher risk of abuse and neglect; however, child neglect can occur in any family or any classroom without regard to family income level or circumstance.

Substance abuse: Drug use can lead caregivers to place a higher priority on obtaining the drug than on providing for children's needs for food, clothing, hygiene, and medical care. Failing to provide basic needs is the most common type of neglect associated with substance abuse (Barth, 2009). When parents are addicted to drugs or alcohol, they are not intellectually available to practice good parenting. Emotional maturity may be stunted by drug use, leading to poor choices.

Economic factors: The relationship between poverty and neglect is complex; while poverty is associated with certain kinds of neglect (deprivation of needs), it is not associated with other kinds (fatalities or emotional neglect). Additionally, the definitions of poverty and certain types of neglect share the overlapping characteristics of deprivation of clothing, shelter, food, and/or care (Child Information Gateway, 2007). Thus, it can be difficult to fully distinguish the two concepts. When caregivers suspect neglect, however, a report must be made to child protection regardless of the reason why neglect may be occurring. To clarify, the determination of whether a child lacks necessary care or resources due to neglect, poverty, or a



combination of the two is made after a report is initiated with child protection.

Mental health factors: One of the most frequently examined mental health factors is maternal depression. Maternal depression has been linked to emotional and behavioral problems in children, which can lead to further difficulties in parenting; likewise, studies have found that when a mother's depression and stress decreased, her nurturing increased. Other parental mental health conditions, when untreated, can also contribute to chaotic or unpredictable parenting styles, to difficulties getting children to school, and to potential decreases in a parent's ability to hold a steady job and provide basic needs. Parents' stress level can be decreased by having someone to talk to, and feeling that they have someone who understands what they are going through. Their children's caregivers can provide these things just by listening, reserving judgment, and providing social opportunities for parents to connect with each other.

Maternal Depression.

According to the American Academy of Pediatrics (2010), 400,000 infants are born to depressed mothers each year; additionally, the American Psychological Association (2012) estimates 9%–16% of all postpartum women will experience postpartum depression. Younger women, those who receive Medicaid, and those with lower levels of formal education have been found to have increased incidence of postpartum depression when compared to their peers (Centers for Disease Control and Prevention, 2008).

Family history: Some researchers have explored an intergenerational cycle of neglect in which parents repeat the adverse experiences that they experienced as children (Wilson & Mullin, 2010). Parents make a choice to parent as they were parented, or may simply revert to a pattern of what they remember when other techniques do not seem to work as they expected.

Social groups: Children from ethnic minority groups are overrepresented in the child protection system when compared to base rates in the population; however, it is unclear if differences are due to income level, reporting and system bias, or true cultural differences (Self-Brown et al., 2011).

Geographic location: Family isolation can occur in both rural and urban settings. A lack of connection to friends, family, and the community means a lack of support networks in stressful times. Families may intentionally isolate themselves due to social anxiety, but often the demands of raising children, especially for single parents, can leave little time or energy for meeting people or maintaining social relationships, causing unintentional separation from support systems. The more people a child interacts with, the greater chance someone will be aware of mistreatment.

Table 2.1 Summary of Neglect Types

Type of Neglect	May Be Chronic	May Be Acute	Potentially Fatal
Deprivation of Needs	X		
Medical	X	X	Yes
Supervisory	X	X	Yes
Educational	X	X	Potentially (absences can be used as a cover for abuse.)
Emotional	X		Yes (Failure to thrive)
Environmental	X	X	Yes

Quiz Me!

This quiz can be used as a self-assessment for Chapter 1.

1. A parent often has no food in the house and, because of her work schedule, has to leave her 6-year-old son home alone with her 4-year-old and 2-year-old. What types of neglect should you suspect?
 - a. educational and supervisory
 - b. emotional and deprivation of needs
 - c. deprivation of needs and supervisory
 - d. medical and supervisory
2. Who is considered to be a person responsible for a child (PRC)?
 - a. a parent
 - b. a child care provider
 - c. a babysitter
 - d. all of the above
3. Which type of neglect is characterized by a filthy or rodent-infested home, a chronically dirty child, or a home filled with rotting food?
 - a. deprivation of needs
 - b. environmental neglect
 - c. medical neglect
 - d. supervisory neglect
4. A child who is unpredictably shuffled between homes, often left with caregivers he or she doesn't know, and often supervised overnight by individuals who are incapacitated by drugs may be experiencing what types of neglect (choose all that apply)?
 - a. medical
 - b. emotional
 - c. environmental
 - d. supervisory
 - e. deprivation of needs
 - f. educational
5. Fill in the blank: Some risk factors for emotional neglect include parental substance abuse, a lack of knowledge about child development, and _____, which can cause parents to be unresponsive to infants' needs.

Answers: c; d; b; b and d; depression

THE NEGLECTED CHILD

Neglect is the most common type of abuse children experience. For teachers and care providers, recognizing and responding to the signs of neglect often can mean the difference between life and death for a child. Unfortunately, although neglect often causes more pervasive damage and detrimental long-term concerns than physical abuse, many caregivers are unable to recognize the signs of neglect and respond to them in an effective, appropriate manner.

The Neglected Child shares everything educators and caregivers need to know to identify and intervene in neglectful situations while also creating a safe, nurturing, and protective environment for young children. Filled with helpful information from expert psychologists and educators in the field, this book defines the different types and levels of severity of neglect, as well as provides tips on establishing suspicion and reporting neglectful situations.

Each chapter in **The Neglected Child** includes a brief quiz to assess learning, along with "Notes from the Field" that represent real-life stories the authors have encountered in their work. The appendices at the end of the book include reproducible handouts, sample statements for parent handbooks, self-assessments for teachers, and important contact information to use when reporting neglect.



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