



## Scope of the Problem

Neglect is by far the most common form of maltreatment. More than 538,000 children were neglected in 2010, accounting for about 78 percent of all unique victims of child maltreatment. In addition, neglect was either the sole cause or one of the contributors to over 68 percent of the 1,560 child maltreatment-related deaths in 2010 (U.S. Department of Health and Human Services, 2011).

These statistics include only children who came to the attention of State child protective services (CPS) agencies. The National Incidence Study (NIS) of Child Abuse and Neglect, which generates broader estimates by gathering data from multiple sources, generally shows higher numbers of maltreatment. The NIS-4, which is the most recent version, uses data from 2005–2006 to show that more than 770,000 children were neglected, accounting for about 77 percent of all children harmed or endangered by maltreatment (Sedlak et al., 2010). While the incidence of other maltreatment types has declined in recent years, the persistently high rates of neglect point to the need for more effective prevention and intervention in cases of neglect.

## Defining Child Neglect

Both Federal and State laws provide basic definitions of child abuse and neglect. The Federal Child Abuse Prevention and Treatment Act (CAPTA) (42 U.S.C.A. §5106g), as amended by the CAPTA Reauthorization

Act of 2010, defines child abuse and neglect as, at 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.

Neglect is commonly defined in State law as the failure of a parent or other person with responsibility for the child to provide needed food, clothing, shelter, medical care, or supervision to the degree that the child's health, safety, and well-being are threatened with harm. Some States specifically mention types of neglect in their statutes, such as educational neglect, medical neglect, and abandonment; in addition, some States include exceptions for determining neglect, such as religious exemptions for medical neglect and financial considerations for physical neglect (Child Welfare Information Gateway, 2011b).

To see how your State addresses neglect definitions in law, see Information Gateway's State statute publication *Definitions of Child Abuse and Neglect*: [http://www.childwelfare.gov/systemwide/laws\\_policies/statutes/define.cfm](http://www.childwelfare.gov/systemwide/laws_policies/statutes/define.cfm)

Most States publish policy or procedure manuals to help professionals apply legal definitions of child abuse and neglect in practice. Use Information Gateway's State Guides and Manuals Search to find your State's resources online: <http://www.childwelfare.gov/systemwide/sgm>

Neglect definitions are impacted by the accepted standards of care for children and the role of communities in families' lives. Some issues that are taken into account when defining neglect and standards of care include:

- Harm to the child
- Parent's ability or intent
- Family's concrete resources
- Community norms
- Availability of community resources (Grayson, 2001)

Difficulties in creating specific definitions of neglect contribute to the lack of consistency in research on neglect as well as CPS responses to neglect. The different ways children may be neglected, addressed below, also make it difficult to define such a complex issue.

## Types of Neglect

Although State laws vary regarding the types of neglect included in definitions, summarized below are the most commonly recognized categories of neglect:

- **Physical neglect:** Abandoning the child or refusing to accept custody; not providing for basic needs like nutrition, hygiene, or appropriate clothing
- **Medical neglect:** Delaying or denying recommended health care for the child
- **Inadequate supervision:** Leaving the child unsupervised (depending on length of time and child's age/maturity); not protecting the child from safety hazards, providing

inadequate caregivers, or engaging in harmful behavior

- **Emotional neglect:** Isolating the child; not providing affection or emotional support; exposing the child to domestic violence or substance abuse
- **Educational neglect:** Failing to enroll the child in school or homeschool; ignoring special education needs; permitting chronic absenteeism from school

For more information on types of neglect, visit Information Gateway's webpage on the Identification of Neglect:

<http://www.childwelfare.gov/can/identifying/neglect.cfm>

## Consequences of Neglect

Although the initial impact may not be as obvious as physical or sexual abuse, the consequences of child neglect are just as serious. Because the effects of neglect are cumulative, long-term research like that being performed by the Longitudinal Studies of Child Abuse and Neglect (<http://www.iprc.unc.edu/longscan>), funded by the Children's Bureau, helps us better understand outcomes for children affected by neglect.

Research shows child neglect can have a negative impact in the following areas:

- Health and physical development—malnourishment, impaired brain development, delays in growth or failure to thrive



The next section discusses the most common family, parent, and child factors that place children at risk for neglect as well as factors that can protect children from neglect.

## Risk Factors

While the presence of a risk factor does not mean a child will be neglected, multiple risk factors are a cause for concern. Research indicates that the following factors place children at greater risk of being harmed or endangered by neglect:

- Poverty

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## Special Considerations

Neglect rarely occurs in isolation; commonly related issues include poverty, substance abuse, and domestic violence. There are special considerations for addressing these issues with at-risk or neglected children and their families.

### Poverty

Poverty is frequently linked to child neglect, but it is important to note that most poor families do not neglect their children. Poverty likely increases the risk of neglect by interacting with and worsening related risks like “parental stress, inadequate housing and homelessness, lack of basic needs, inadequate supervision, substance abuse, and domestic violence” (Duva & Metzger, 2010).

**Substance-exposed newborns.** When a woman abuses drugs or alcohol during her pregnancy, the unborn child is at greater risk for developmental delays. In addition, some substance-exposed newborns are left at the hospital by their parents; these infants, sometimes referred to as “boarder babies,” usually require CPS intervention to place them in out-of-home care. Child welfare caseworkers and health-care providers must work together to identify, assess, and develop a plan to care for affected infants and their families. For more information, visit the National Abandoned Infants Assistance Center’s website: <http://aia.berkeley.edu/>

For more information, visit the National Center on Substance Abuse and Child Welfare, which is co-sponsored by the Children’s Bureau and the Substance Abuse and Mental Health Services Administration: <http://www.ncsacw.samhsa.gov/>

**Family Reclaim**, a child neglect demonstration project funded by the Children’s Bureau, helped families affected by substance abuse and child neglect by involving them in the design of their service plan; key services included substance abuse treatment, intensive case management, life skills training, and respite care. Family Reclaim provided services collaboratively with the family’s support network, community leaders, and other agencies; program staff found that long-term intensive services were necessary to address the family’s multiple stressors (Chambers, 2002).

## Domestic Violence

Some States include exposure to domestic violence in their legal definitions of child abuse or neglect due to its potential effects on children (Child Welfare Information Gateway, 2011c). An unintended consequence of these policies is that parents who are domestic violence victims sometimes are charged with a type of neglect termed “failure to protect,” despite circumstances that may have impacted the victim’s ability to prevent the child’s exposure to violence. Child welfare caseworkers, in collaboration with domestic violence professionals, should consider the victim’s access to resources or services outside the home as well as the victim’s reasonable efforts to ensure the child had basic necessities and lived in the least detrimental environment possible.

A strong relationship with the victim parent is a protective factor that can increase the child’s resilience, and research indicates one of the most effective ways to protect the child is to keep the victim safe (Clarke, 2006; Bandy, Andrews, & Moore, 2012; Nicholson v. Williams, 2002). To address domestic violence cases involving children, workers should keep the victim parent and child together whenever possible; enhance the safety, stability, and well-being of all victims; and hold perpetrators of violence accountable through mechanisms such as batterer intervention programs. For more information, visit the websites of the Greenbook Initiative (<http://www.thegreenbook.info>) or the National Resource Center on Domestic Violence: Child Protection and Custody (<http://www.ncjfcj.org/our-work/domestic-violence>).

## Educational Neglect

Many States struggle to respond efficiently to reports of educational neglect due to overlapping responsibilities and lack of coordination between the departments of social services and education. A national review by Kelly (2010) found that nearly half of States neither define educational neglect in law nor hold one agency responsible for reporting it. There is inconsistency among the remaining States regarding which agency is responsible for enforcing neglect provisions, including the court, the school or school district, and the department of education.

Kelly (2010) recommends that the State's department of social services be primarily responsible for addressing educational neglect because it is better equipped to address the co-occurring problems families often face. He also cites promising programs in Missouri and Idaho that offer coordinated and flexible services through the department of social services to respond quickly to families in crisis and at risk of educational neglect

## Investigation and Assessment

Identifying child neglect may seem more difficult than identifying other forms of maltreatment because neglect usually involves the absence of a certain behavior, rather than the presence. A thorough investigation of the child's safety and risk followed by a comprehensive family assessment can help determine what kinds of services and supports the family may need.

Consider the possibility of neglect when the child:

- Is frequently absent from school
- Begs or steals food or money
- Lacks needed medical or dental care, immunizations, or glasses
- Is consistently dirty and has severe body odor
- Lacks sufficient clothing for the weather
- Abuses alcohol or other drugs
- States that there is no one at home to provide care

Consider the possibility of neglect when the parent or other adult caregiver:

- Appears to be indifferent to the child
- Seems apathetic or depressed
- Behaves irrationally or in a bizarre manner
- Is abusing alcohol or other drugs

Find these and other indicators in Child Welfare Information Gateway's *Recognizing Child Abuse and Neglect: Signs and Symptoms* (<http://www.childwelfare.gov/pubs/factsheets/signs.cfm>)

## Investigation

The initial investigation should determine if neglect occurred and examine the child's safety and risk. Two of the most important factors to consider are (1) whether the child has any unmet cognitive, physical, or emotional needs and (2) whether the child receives adequate supervision (DePanfilis, 2006).

Straus and Kaufman (2005) offer the following tips to assess neglect in families:



- Gather information from multiple sources (child and parent self-reports; caseworker and neighbor observations)
  - Ensure confidentiality to collect more honest and accurate reports
  - Use nonjudgmental, open-ended questions that encourage diverse viewpoints on the situation
  - Probe for signs of different types of neglect
  - Consider contexts like the child's age, the home environment, and community resources
  - Note the severity and frequency of neglect incidents and the length of time since the last incident and between multiple incidents
- | Exhibits self-destructive behavior or serious emotional symptoms requiring immediate help
  - | Has exceptional needs that can result in severe consequences to the child
  - | Has serious physical injuries or symptoms from maltreatment

The results of the investigation will inform whether the family requires additional assessment and intervention. A low-risk family may be referred for differential response (see box), while the most severe cases may require placement in out-of-home care, preferably with relatives, to ensure the child's immediate safety while the family is assessed and a safety and service plan is developed.

**Safety.** Determining the child's safety is as critical in the decision-making process in cases of possible neglect as it is in physical or sexual abuse cases. The determination should consider threats of danger in the family, the child's vulnerability, and the family's protective capacity. Lund and Renne (2009) encourage caseworkers to investigate the following key threats of danger:

- No adult in the home routinely performs basic and essential parenting duties and responsibilities
- The parent lacks sufficient resources, such as food and shelter, or parenting knowledge, skills, and motivation to meet the child's basic needs
- Living arrangements seriously endanger the child's physical health
- The parent refuses and/or fails to meet the child's needs or arrange care when the child:

## DIFFERENTIAL RESPONSE

Although one report or incident of neglect may not require CPS response, many families could still benefit from services. Particularly in cases of neglect, by the time the situation becomes serious enough for the child welfare system to respond, the family's issues are likely more complex and require intensive intervention (DePanfilis, 2006).

To address this service gap, many States use differential response systems in which families with low risk are redirected to voluntary, often community-based, services to receive the supports they need.

For more information:

- Read Information Gateway's *Differential Response to Reports of Child Abuse and Neglect*: [http://www.childwelfare.gov/pubs/issue\\_briefs/differential\\_response](http://www.childwelfare.gov/pubs/issue_briefs/differential_response)
- Visit the Children's Bureau's National Quality Improvement Center on Differential Response in Child Protective Services at <http://www.differentialresponseqic.org/>

## Assessment

A comprehensive family assessment should help uncover the potential causes of neglect and underlying factors affecting the family's ability to care for the child. Because neglected children and their families often face complex issues, it is critical to use a holistic approach that looks at the child, family, and community context to identify strengths and the most

effective ways to reduce risks and to engage

- Social and emotional competence of children

The assessment process ultimately informs the level of intervention necessary for the family. Assessment should continue throughout the family's case to ensure progress toward goals.

For assessment tools and references, see Information Gateway's webpage on Assessing Child Neglect: [http://www.childwelfare.gov/systemwide/assessment/family\\_assess/id\\_can/neglect.cfm](http://www.childwelfare.gov/systemwide/assessment/family_assess/id_can/neglect.cfm)

## Prevention and Intervention

The services and supports that at-risk or neglected children and their families need vary greatly depending on the type of neglect they experienced, the severity of their situation, underlying risks, strengths, and many other factors. Analyzing the information gathered during the investigation and assessment is essential to developing an effective case plan in collaboration with the family, their support network, and related service providers.

### CHILDREN'S BUREAU PROJECTS

Many of the strategies discussed below are informed by the results of the child neglect demonstration projects funded by the Children's Bureau from 1996 to 2002 to address the prevention, intervention, and treatment needs of neglected children and their families. For more on these projects, see Information Gateway's *Child Neglect Demonstration Projects: Synthesis of Lessons Learned* (<http://www.childwelfare.gov/pubs/candemo>) and the companion piece, *Program Evaluation: A Synthesis of Lessons Learned by Child Neglect Demonstration Projects* (<http://www.childwelfare.gov/pubs/focus/evaldemo>).

**Begin early.** Children are more likely to be harmed by neglect the earlier they experience it. Although it can be difficult to prevent neglect and identify it in its early stages, you can have a greater impact on families the earlier you intervene. At this stage, assess the parent's readiness to enhance their parenting abilities and help the family focus on meeting the child's developmental needs. Assume that parents want to improve the quality of their children's care—they just need support to identify and build on their strengths.

For more on early intervention with families, read Information Gateway's *Addressing the Needs of Young Children in Child Welfare: Part C -- Early Intervention Services* (<http://www.childwelfare.gov/pubs/partc>).

As with all child protection practice, cultural issues must be taken into consideration both when assessing and intervening with families at risk of neglect. For example, a culture in which shared caregiving is the norm may see no problem with allowing young children to care for their siblings, perhaps in a way that does not conform to cultural norms in

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child neglect demonstration project grantees included:

- Parent education and support
- Home visits
- Referrals or links to community resources
- Mental health services
- Concrete assistance and crisis intervention (Child Welfare Information Gateway, 2004)

Home visiting programs, which provide in-home services to families with young children, show promise in engaging parents to reduce risks related to child abuse and neglect. Professional or paraprofessional home visitors can build relationships with parents and tailor their visits to address the family's needs and strengths. Some of the topics home visitors may address include:

- The mother's personal health and life choices
- Child health and development
- Environmental concerns such as income, housing, and domestic or community violence
- Family functioning, including adult and child relationships
- Access to services (Child Welfare Information Gateway, 2011a)

Supporting Evidence-Based Home Visiting is a Federal initiative to generate knowledge of home visiting practices and models; find more information on the initiative's website: <http://www.supportingebhv.org>

**Encourage incremental change.** Most changes don't happen overnight. Especially with families that are stressed by the demands of caring for their child, parents may feel overwhelmed if you expect them to accomplish too many goals too quickly. In collaboration with the family, establish a contract with a timeline for accomplishing specific goals as well as obligations for both you and the parents to meet (McSherry, 2007).

Remember to start with the most basic needs (e.g., food, housing, safety), then address critical underlying issues (e.g., substance abuse, mental health). Once those supports are in place, there will be fewer obstacles to improving higher family functioning. Many programs have found that working with families affected by neglect requires intensive, long-term services to help them achieve changes over time.

**The Family Connections (FC) program** in Baltimore, MD, began as a demonstration project, funded by the Children's Bureau, to prevent neglect in at-risk families. Core program components include emergency assistance, home-visiting family intervention, advocacy and service coordination, and multifamily supportive and recreational activities. FC results were so promising in reducing risk factors and increasing protective factors that replication demonstration grants at eight additional sites were funded by the Children's Bureau. For more information about the program and its replication, visit the Family Connections website: [http://www.family.umaryland.edu/ryc\\_best\\_practice\\_services/family\\_connections.htm](http://www.family.umaryland.edu/ryc_best_practice_services/family_connections.htm)



To locate sources of training on child neglect in your State, refer to Information Gateway's related organizations list of *State Child Welfare Training Resources* ([http://www.childwelfare.gov/pubs/reslist/rl\\_dsp\\_scwt.cfm?typeID=144&rate\\_chno=19-00082](http://www.childwelfare.gov/pubs/reslist/rl_dsp_scwt.cfm?typeID=144&rate_chno=19-00082))

For additional practice tips and an in-depth exploration of the topics addressed in this bulletin, read the Children's Bureau's User Manual, *Child Neglect: A Guide for Prevention, Assessment, and Intervention* (<http://www.childwelfare.gov/pubs/usermanuals/neglect>)

Investigating and assessing neglect involves a thorough examination of the child's safety and risk as well as the larger family and community context. To understand neglect, caseworkers should know how to address related problems such as poverty, substance abuse, and domestic violence. Interventions for children and families affected by neglect require customized and coordinated services. Defining, preventing, identifying, and treating child neglect is a significant challenge but one that researchers, professionals, child welfare workers, and child advocates can address.

## Conclusion

Child neglect is the most prevalent type of child maltreatment but has historically received the least attention from researchers and others. While there appears to be growing interest, child neglect continues to be a complex problem that is difficult to define, prevent, identify, and treat.

Neglect is a term used to encompass many situations, but their commonality is a lack of action—an act of omission—regarding a child's needs. Neglect most commonly involves physical, medical, educational, or emotional neglect or inadequate supervision. Neglect can range from a caregiver's momentary inattention to chronic or willful deprivation. Single incidents can have no harmful effects or, in some cases, they can result in trauma or death.

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