safeguarding BEGINSAT

In the second of a series of articles, **Stephanie Mathivet** turns the spotlight on those family issues that can render children disadvantaged and increase their vulnerability to abuse...

S taff working in early years settings often come across complex family issues that affect the children they care for. Many parents live in circumstances that stretch their capacity to care for their children, and they may require support to maintain and improve their parenting and to protect children from harm.

It's apparent from Serious Case Reviews that certain factors seem to crop up time and time again in connection with the circumstances surrounding the extensive abuse of a child and sometimes their tragic death. The latest version of the Government guidance 'Working Together to Safeguard Children: A guide to inter-agency working to safeguard and promote the welfare of children' (HMG March 2010) provides research-based information on six additional stress factors that render children vulnerable to abuse or neglect.

Categories of abuse

The four categories of abuse have remained constant and will be familiar to those working with children. They include physical, emotional and sexual abuse, and neglect. Abuse often reflects aspects of more than one category, although the effects of abuse in any category can have moderate to serious implications for children, depending on the nature, extent and duration, across all areas of their development.

Identifying the six key stressors

'Working Together', referred to above, identifies the six key stressors that may predispose to abuse as follows:

Social exclusion

This term refers to extreme poverty, characterised in terms of multiple aspects that tend to be part of the whole picture. The effect of a lack of money is compounded where a

child is also growing up in poor housing where there is overcrowding or damp conditions. Living in a disadvantaged neighbourhood may mean that there's high unemployment, few shops nearby that sell good food, or that there are problems with vandalism, crime, racism or other kinds of intimidation, and very few safe leisure amenities.

These factors compound the stress that the adults are already dealing with such as mental or long term physical illness, drug addiction or learning disability. All of these factors impact on the child's health, wellbeing and learning

opportunities, as well as the capacity of the child's parent/s to care for them adequately and improve their circumstances.

2 Domestic violence

The analysis of Serious Case Reviews found that domestic violence was a factor in 53% of the cases. Lord Laming showed that at least 200,000 children grow up in the midst of domestic violence, and its impact cannot be underestimated. Children may be directly affected by the violence, either by 'getting in the way' or through violence being perpetrated towards them; they may experience the terror of witnessing the violence and constantly live in fear of the next episode. They may have to cope with the effects on the abused parent, whose capacity to parent suffers as a result of the violence.

Mothers are at greatest risk of domestic violence during pregnancy when it often becomes more frequent and more severe, putting the developing foetus at risk. The abused parent (usually, but not exclusively, the mother) may go to great lengths to hide abuse from Early Years Practitioners, offering excuses for bruises, asking friends to accompany the child, or keeping the child at home - their injuries may also make it hard for them to come out of the house. Domestic violence may also be accompanied by other stressors such as poverty, drug/alcohol abuse or mental illness, but it's important to remember that it can happen in all social classes.

> Par pro dru

Parental problem drug use

Many people use illegal drugs and some people have problematic usage of prescribed drugs; however, what is of most concern are those who use illegal drugs such as heroin or crack cocaine. Now referred to as 'problem drug users', this group constitutes less than 1% of the population in England, and while it's hard to say how many of this group are parents, it's known that 1% of babies are born to women with problem drug use and 2–3% of children under 16 have parents with problem drug use.

Not all parents with drug problems are unsafe parents; with good support the risks to children can be minimised. However, problematic drug use that's chaotic, or is heavily steeped in crime, puts children at risk of neglect and emotional abuse, as well as increasing the risk of physical and sexual abuse. Certainly, use of drugs during pregnancy puts the developing foetus at risk. Parents may lack money for essentials, be focused on obtaining drugs rather than their children's needs, and have unsafe lifestyles. The analysis of Serious Case Reviews found that problem drug use came up as a factor in up to 30% of cases. In early years settings parents may openly talk about their issues with drugs after they've sought help, but prior to that they may act secretly and deny drug use for fear of what might happen to their children.

Mental illness of a parent/carer

Across the adult population about one in six adults could be affected by mental illness, most commonly depression or anxiety, with a much smaller number

affected by psychotic illnesses such as schizophrenia or bipolar disorder. However, at least 30% of adults with mental illness have dependent children, and many of these are mothers. While there's the potential for parental mental illness to affect children's wellbeing and development, with good support this can be minimised. Nevertheless, it's important to bear in mind that severe psychosis can put children's lives at risk.

Many mothers experience post-natal depression, and while this may be relatively short-lived, the episode can lead to physical and emotional neglect of the child. A place in an early years setting may be offered to a parent who has a mental illness as a support for the parent and to promote the development of the child, or it may become apparent that there is a problem after the child has started.



overtoyou

If you have any thoughts or questions about issues raised in Stephanie's first two articles, you can email them to her at info@teachnursery.com. Any addressed in her forthcoming features will be anonymous.

While there are many

similarities with problem drug use, there's less risk of associated criminal activity with alcohol as it is legally available. However, the problem is more widespread with up to 1.3million children affected by parental alcohol problems. Alcohol affects a parent's state of mind, their self-control and ability to meet their child's needs, and is often associated with violent behaviour. Heavy drinking in pregnancy can lead to Foetal Alcohol Syndrome characterised by growth deficiency and central nervous system dysfunction. Chronic alcohol problems can affect the way that a mother responds to her baby or young child; these effects can be lessened if one parent does not have an alcohol problem.

The duty of the **Local Authority**

The Local Authority's social care teams have a duty to safeguard and promote children's welfare. This means they must investigate referrals made to them on the basis of concerns about children's welfare, not just concerns about significant harm. Many Local Safeguarding Children's Boards have procedures and template forms for making referrals that help the designated person in settings to make sure that all staff are able to identify where a child may be vulnerable and act appropriately to ensure their welfare. Appropriate record keeping is vital, as this provides information and evidence about the extent of the risk to a child that practitioners perceive to warrant intervention.

Many of the vulnerabilities discussed can affect children from all social classes and in all sectors of provision; practitioners need to be well-informed and confident to act effectively, and managers, especially owner/managers, shouldn't be afraid to act even in the face of threats from an irate parent. Doing what's right for a child must always be the first consideration.



Parents with a learning disability

It's important not to assume that parents affected by a learning disability lack the capacity to provide adequate care for their child. Child abuse or wilful neglect are less of a concern than neglect by omission where a parent is not having the support needed. In most cases of physical or sexual abuse of a child whose mother has a learning disability, it's the mother's male partner who is the abuser. Parents with learning disabilities need support of services that are welcoming and non-judgemental. Early Years Practitioners have an important role to play in helping parents to understand and support children's care, learning and developmental needs. Parents need the support of practitioners, but practitioners also need to work in conjunction with other professionals to meet the needs of the whole family.

The role of the EYP

Abuse can be difficult to detect. Practitioners often refer to having a feeling that something's wrong – but they can't quite put their finger on it. The role of Early Years Practitioners is vital as they see families every day, have a close up view of their day-to-day situations, form relationships with parents – sometimes to quite deep levels of trust – and are well-placed to observe where something is not right.

However, Early Years Practitioners require the skills to not just identify possible abuse but to articulate their concerns, act on them appropriately in line with procedures, and take part in multidisciplinary professional teams to address the situation, with a role that's set out for them, agreed and put into practice.