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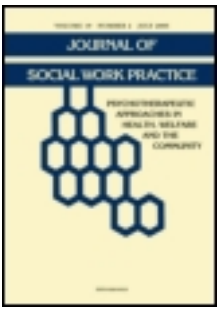

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Working with neglected children and their families

DANIELLE TURNEY & KAREN TANNER

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Summary *Child neglect has proved a particularly difficult area for social work to address. In the first part of the paper a number of reasons for this are discussed. We go on to suggest that chronic child neglect characteristically involves the breakdown or absence of a relationship of care. Therefore, the social work response needs to include a focus on the relationship difficulties between parent and child which manifest as either an unwillingness or inability on the part of the primary carer to offer reliable, adequate care, and on broader relationship difficulties within the family. In arguing for an approach that pays attention to the intra-personal and relational dynamics of neglect, we draw specifically on attachment theory and consider how Ainsworth's (1978) typology of attachment patterns can shed light on parenting styles and patterns of family functioning associated with chronic neglect. We use the concept of the 'internal working model' to develop an understanding of the ways in which family members understand and live out their relationships—with each other and with the worker. We conclude by suggesting that this relational approach requires an ability on the part of the social worker to work both with and within relationships, and look at the contribution that a critically informed relationship-based approach can make to work with families where child neglect occurs.*

Understanding neglect

This paper examines the effects of physical and emotional neglect on children and considers effective social work intervention strategies for working with them and their families. We consider that children who experience systematic neglect should be thought of as children in need, although on a continuum of need, some of these children will clearly require protection in view of the severity of the neglect. It has been seen that in cases of severe and lasting neglect, failure to provide adequate protection and have fatal consequences (Reder *et al.*, 1993; Bridge Child Care Consultancy, 1995), but before this point is reached, there are many children whose experiences of neglect make it likely that they will not achieve optimal outcomes.

A body of research exists strongly suggesting that persistent neglect does long-term, serious damage to children's emotional, physical and cognitive development (Bifulco & Moran, 1998; Crittenden, 1996; Erickson & Egeland, 1996; Gauthier *et al.*, 1996; Kendall-Tackett & Eckenrode, 1996); and the number of children included on Child Protection Registers for neglect attests to the fact that social workers are certainly well aware of the harm that it can cause (Thoburn *et al.*, 2001, p. 182). Current research (Fonagy *et al.*, 1994; Gilligan, 1997;

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Howe *et al.*, 1999; Reder & Lucey, 1995) suggests that there are constitutional and environmental factors that promote either vulnerability or resilience in children and their carer(s). At the same time, the government initiative around Children in Need—advocating a balance between child protection and family support services (DoH, 1995)—makes a strong argument for targeted intervention at an early stage on the need continuum. But despite this, practice knowledge, the findings of enquiries into the death of children (Reder *et al.*, 1995; Reder & Duncan, 1999; Bridge Childcare Consultancy, 1995) and other research evidence (Killen, 1996; Moore, 1992; Tomison, 1995) suggest that neglect remains particularly difficult for social work to address effectively. There appear to be a number of reasons why this may be so.

(i) Actually defining neglect can be problematic. Definitions exist (Minty & Pattinson, 1994; Iwaniec, 1995; Erickson & Egeland, 1996; DoH, 1999; Thoburn *et al.*, 2000, 15ff) but it remains a matter of personal and professional judgment whether a particular circumstance is described as 'neglect' or not. This is a complex affair because judgments about neglect are typically value laden in terms of standards about adequate care, a position compounded by social workers unwillingness to pathologise families who may already be disadvantaged by poverty. In addition, the 'rule of optimism' may discourage a social worker from defining a situation as neglectful.

(ii) Chronic neglect of the sort we are concerned with here is more a process or way of life, than a single event. This can have a paralysing effect on the workers involved with the family. They may become desensitised to the effects of unremitting low-level care on children or come to share the pervading sense of hopelessness that is often associated with chronically neglecting families. This inability to act may be compounded by an ideology of partnership and a legal framework within the Children Act 1989 of keeping children within their birth families wherever possible. Unless something 'new' happens, social workers and other professional may continue to have contact with the family on a regular basis, without the situation changing fundamentally—perhaps for years (see Bridge Child Care Consultancy, 1995).

(iii) Until at least the mid-1990s, childcare social work was dominated by child protection and safety issues. And the child protection system was, in turn, influenced by a 'forensic' or socio-legal approach to investigation. Such an approach tends to be incident-based and to operate with a narrow focus on the abusive episode and the assessment of the risk of significant harm. It reduces attention to the child's developmental needs and to broader social and environmental factors that can impact on parenting capacity (Horwath, 2000), promoting a partial rather than a more holistic response to the family's difficulties. 'It is widely acknowledged that professionals may feel a sense of relief when there is an "incident" or a "happening" in a particular family (whether of sexual or physical abuse), which is seen to legitimate action for children about whom neglect has long been a primary concern' (Stevenson, 1998a, p. 1).

But as neglect frequently manifests over time and, as noted above, often fails to provide a suitable 'trigger' incident, it is possible that the forensic approach could militate against involvement in such cases and leave these families unsupported. This view is recognised by Jones and Gupta (1998) and also confirmed by the study undertaken by Brandon *et al.* (1999), who noted that 'when individual workers and conferences concentrated on the particular incident that had preceded the [Child Protection] conference or planning meeting, the resultant protection plan often failed to tackle important problems contributing to the child's distress or likely to contribute to future harm' (Brandon *et al.*, 1999, p. 199).

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(iv) The long-term and chronic nature of neglect can also contribute to the growth of defensive practice in social work; by this we mean a climate where individual thought and initiative is stifled, responses become routinised and thresholds of response increase. Stevenson highlights how the combination of an incident-based approach and a misapplication of some basic social work values has impacted on work with families where neglect is a problem: 'It seems likely, then, that workers have been caught in a kind of pincer movement: from one side, guilt and anxiety about "blaming" and unease about the use of "pathological" descriptors; from the other, an organisational context which has discouraged systematic reflections about people, rather than events' (Stevenson, 1998a, p. 11).

As noted above, any discussion of neglect is complicated by the lack of a clear definition of the problem. From the literature, however, we suggest that neglect is typically identified by one or a combination of three key factors: firstly there may be *physical neglect*, i.e. neglect of the physical environment of the home and the practical care of the children. This form of neglect is often associated with poverty, but is not synonymous with it. Secondly, lack of parental *knowledge* about and/or skill in caring for their children may be a feature. This form of neglect is often associated with young or disadvantaged parents or parents with learning difficulties. And thirdly, neglect of either the physical or the knowledge types can be intensified by significant social isolation and lack of effective support network. A focus on the absence of appropriate support emphasises the *social* context of neglect.

Each characteristic form of neglect is likely to respond to a different type of intervention. So, for example, the first approach, which concentrates on the absence of satisfactory physical care and maintenance, leads to a response based on practical, 'common sense' interventions which target hygiene and domestic order. The second approach, which understands neglect in terms of a lack of parental knowledge about and/or skill in caring for their children, calls for an educative response designed to develop effective parenting. The third approach, emphasising structural disadvantage and the social context of neglect, looks to remedy social isolation by linking parents and children into formal and informal social networks.

It is clear that effective intervention may require a skilful synthesis of these different approaches; they are not 'either/or' options, and the choice of intervention strategy will depend on accurate, evidence-based assessment of the kind of neglect involved in each case. So far, so straightforward. But there seem to be a number of cases where these kinds of responses do not work, or may seem to work for a time before the situation gradually deteriorates again—families who have been 'worked with', sometimes for many years, but who are still offering, at best, only minimally acceptable care. These are what we may call the cases of chronic neglect, and intervention has typically been more problematic.

We suggest here that those cases of chronic neglect, which may show any or all of the three previous aspects, also share one further feature: the *breakdown or absence of a relationship of care*. In these situations, understanding relationships of attachment or care is central to the assessment; the social work response, in turn, needs to include a focus on relationship difficulties between parent and child which manifest as either an unwillingness or inability on the part of the child's primary carer to offer reliable and adequate care and on relationship difficulties within the family more broadly.

It may well be that absence of a relationship of care can be found without any of the other features identified above; we designate these cases as emotional neglect and consider them in the course of this paper. However, we would distinguish these cases from emotional or psychological abuse which involves behaviours that systematically attack or undermine a child's psychological well-being (see, for example, Glaser, 1995).

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Attachment and neglect

In arguing for an approach that pays attention to the intra-personal and relational dynamics of neglect, we are not proposing to return to the parodied notion of the social worker sitting in a darkened room with the client who is being asked how she feels about the electricity disconnection. Rather the argument is for an integrated theoretical position that carefully considers the contribution of attachment and care difficulties to the problem of neglect.

We are conscious that attachment theory comes with a history—it was developed within the particular social and political context of Britain in the 1940s and 1950s—and has been subject to arguments about its universality and continuing relevance (Rustin, 1996). We suggest that whilst there may be a universal need for attachment, contemporary theory and practice need to exercise some caution to take account of the different ways in which healthy attachments can be fostered. This is particularly pertinent in work with black and ethnic minority communities and families of 'non-traditional' constitution, where it is necessary to consider the cultural context in which the family operates.

The caution we urge also includes a recognition that examination of the care giver and child relationship can often lead to an explicit or implicit blaming of mothers due to their socially constructed role as primary carer, and a concomitant erasure of fathers and their significance. We have suggested elsewhere (Tanner & Turney, 2000) that such a position can contribute to a partial and flawed understanding of child neglect. In developing an integrated approach, we need to hold in mind societal attitudes towards mothers and fathers as well as the complex realities of people's intimate lives. So with these reservations in mind, attachment theory can offer a useful framework within which to consider the problem of child neglect.

In developing a relational perspective on neglect we are drawing upon the body of knowledge associated with attachment theory (Bowlby, 1979, 1988; Ainsworth, 1969; Ainsworth *et al.*, 1978; Main *et al.*, 1985; Fonagy *et al.*, 1994),[1] and looking at the contribution it can make specifically to social work understanding. There is a growing literature, particularly in the USA, that explores relationship disorders and different forms of child abuse (Crittenden, 1993, 1996). To date this material has been primarily located in the fields of mental health and psychology and only to a limited extent in social work. More recently social work has started to integrate ideas drawn from attachment theory into mainstream practice. For example Howe *et al.* (1995, 1999) have drawn attention to the value of attachment theory in understanding the dynamics of child abuse and its significance can also be seen in the new National Assessment Framework, which we consider later. Here we want to continue this process of integration, using attachment theory to make sense of social work concerns, in this case with child neglect.

For the purposes of this paper, we will be presenting a necessarily brief account of attachment theory, drawing out the key points for our argument. Attachment theory recognises the instinctive drive of infants to seek proximity and comfort from their care-giver when they feel vulnerable. It accords significance to the responses of the care-giver to the infant and the qualities of the relationship that develops between them. Further, it suggests that the experience of this relationship establishes a pattern that structures the infant's ability to form new relationships and, significantly, that this has the potential to endure across the lifespan (Howe *et al.*, 1999). Central to understanding the psychological and social consequences of an individual's attachment experiences is the concept of the internal working model.

The internal working model is a mental representation of self, other people and the relationships between self and others, and is constructed through and by an individual's experiences of the care-giver–child relationship. Critically, internal working models shape

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expectations and beliefs about relationships and inform the strategies that infants develop to ensure their needs are met. Ainsworth *et al.* (1978) devised a typology of attachment patterns that has been widely used and can be seen to have informed current child care policy (DoH, 2000a, b). This framework identifies secure and insecure attachments, the latter being subdivided into three types—avoidant, ambivalent and disorganised—and catalogues a rich and compelling picture of the behaviours associated with each category. Research evidence also points to generational correlations, with patterns identified in infants being paralleled in adults (Main *et al.*, 1985). This does not imply an automatic causal relationship, as research into resilience and vulnerability factors indicates that new experiences can modify attachment models (Fonagy *et al.*, 1994; Gilligan, 1997; Werner, 1990), an important point to which we will return.

The link between attachment difficulties and neglect lies in the parenting styles and patterns of family functioning identified in cases of chronic neglect. Gaudin *et al.* (1996), Polansky *et al.* (1981) and Crittenden (1996) in the US, and Howe *et al.* (1999) and Stevenson (1998b) in the UK have identified some common themes in neglectful families which include:

- neglectful parents often grew up in uncaring hostile homes where nurturing was at a low premium;
- parents' self esteem is low and they perceive themselves to be and frequently are ineffective and helpless. There is a pervading sense of powerlessness in both the parents and children;
- family functioning is characterised by a poverty of meaningful and positive communication with associated difficulties in conflict resolution. Family structure and roles are usually problematic.

Attachment theory offers one framework for thinking about/making sense of the behaviours noted above, as they bear a striking comparison with the characteristics of insecurely attached individuals. Howe *et al.* (1999) have done a lot to draw out the implications for parenting of faculty attachment patterns. Applying such ideas specifically to situations of neglect we can look at how avoidant, ambivalent and disorganised attachment styles can result in children's needs not being met.

Our suggestion is that the needs of children activate the adult's internal working model of attachment and provoke a response in the parent which, in these cases, is effectively a 'non-response' to the expressed need. For example, a parent with an avoidant attachment style may respond to emotional and practical demands by failing to acknowledge their legitimacy and by becoming psychologically unavailable. 'Their defensive response is to back off and withdraw from or control the source of emotional need and dependence' (Howe *et al.*, 1999, p. 80). Ambivalent attachment can result in the parent being preoccupied with their own emotional needs to the extent that they are unable to respond adequately and/or sensitively to the child's. Parenting can be unpredictable and uncertain, with the parent finding it difficult to reliably hold the child in mind when they are themselves under pressure. Similarly, disorganised patterns of attachment evoke feelings of helplessness in the adult when confronted with the needs of their child.

The task for the social worker, through the assessment process, is to understand the specific nature of the attachment issues that may be at play in this family, because without an accurate understanding of these, intervention potentially remains with the symptom rather than the cause of the neglect. Guesswork rather than social work. A full response will aim to work with these issues while making connections with poverty, lack of knowledge, social isolation etc., and strategies for working with these areas are well documented. Linking back

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to our earlier point, while the research suggests that internal working models are very powerful influences on behaviour, they are nonetheless amenable to change, so this becomes a legitimate—indeed necessary—focus for social work intervention. In the next part of the paper, we will consider some of the implications of the approach we have outlined.

A context for practice

Firstly, although the focus of this paper is on intervention, we work with the assumption that any intervention needs to be based on structured and evidence-based assessment. We have suggested elsewhere (Tanner & Turney, 2000) that the quality and accuracy of assessment is critical in reaching an understanding of the meaning of neglect in any particular case. So now, we would like to briefly consider the possible impact of the *Framework for the Assessment of Children in Need and their Families* (DoH, 2000a, b). It is here that a more positive picture may begin to emerge in relation to social work responses to neglect.

To set the context for this discussion, it is perhaps helpful to draw on Thoburn *et al.*'s (2000) study of 555 families referred to social services departments because of concerns about maltreatment or with a request for service provision. The researchers noted that '[a]ssessments of needs, family strengths and problems were recorded on less than half of the files, and family support plans were even less likely to be spelled out' (Thoburn *et al.*, 2000, p. 123). However, without a clear understanding of the nature of the problem—that is, the form of neglect involved—intervention runs the risk of being at best inappropriate and at worst either oppressive or dangerous. So full and reliable assessment, clearly recorded and available on file, would seem to be a necessary precursor to and component of successful intervention.

Does the new *Framework* help social workers in this task? The national *Framework for the Assessment of Children in Need and their Families* (DoH, 2000a) is an attempt to establish a theoretically grounded, consistent and systematic approach to gathering information about children in need. While the guidelines have only recently been introduced into general child-care practice, there are nonetheless indicators that they may offer a way forward. If, as we suggest above, neglect may be understood in terms of an absence or limitation in one or a combination of areas—physical care/resources; knowledge or parenting skill; social connection and support; and relationship of care—then assessment will need to be sensitive to each of these possible areas of difficulty. By focussing attention equally on three key dimensions or 'domains' [children's developmental needs, parenting capacity, and family and environmental factors (DoH, 2000a, b)], the assessment framework invites the social worker to explore the child's needs with the family, but also to gather information about their understanding of their situation at an intra-personal level, an inter-personal or family level, and a broader social level.

So the second implication of our approach is that assessment needs to be theoretically informed. By this we mean that the use of theory and research evidence to inform policy and practice is necessary at both individual and organisational levels. It will be important that practitioners are able to make links with theory and research which demonstrates how 'faulty' attachments (in the parent's past or present relationships) can manifest as child neglect. A full assessment will also need to consider how such intra- or inter-personal dynamics are influenced or exacerbated by a range of other stressors—poverty, racial discrimination or abuse, poor health, lone parenthood, etc. By depicting the assessment domains as the three connected arms of a triangle, the *Framework* document encourages 'joined up' thinking, and may facilitate reflection on the links between the different elements of the family members' experiences.

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The assessment framework is certainly not a panacea. However good the assessment framework, there will still need to be a decision taken to initiate a comprehensive or core assessment in any given case. Just as importantly, having acquired information, the social worker needs to be able to synthesise it and make necessary judgements about action (Adcock, 2000). Clearly there is a risk—noted in relation to the previous comprehensive assessment structure, the so-called Orange Book (DoH, 1988)—that a mechanistic approach to the use of the *Framework* could result in a narrow and rather formulaic set of responses. Nonetheless, it may be that some frameworks offer greater possibility of holistic assessment that more accurately reflect the complexity of neglect and allow for a more informed understanding of the unique balance between harms and resilience in a particular family (Crittenden, 1996; Gaudin *et al.*, 1996; Thoburn *et al.*, 2000). It is to be hoped that the new assessment framework is a step in the right direction.

As noted above, analysing and making sense of frequently large volumes of information are critical in the assessment and planning process. But practitioners, in our experience, are often fazed by the concept of analysis, expressing uncertainty as to what is required. The antecedents of this uncertainty are likely to be numerous and varied, including the quality of qualifying training and the reactive 'outcomes' culture of many social work agencies and the concomitant downgrading of reflective practice. A further linked factor is the absence of a consistent and transparent use of theory in work with families (Farmer & Owen, 1995). The consequences of this rudderless stance are summed up by Howe *et al.*: 'without strong theoretical and research—based underpinnings information gathered about a case hangs loose and directionless' (Howe *et al.*, 2000, p. 154).

The approach therefore requires a professional and organisational culture that values and makes use of research to inform policy, and a workforce that is knowledgeable and skilled in the explicit application of theory to everyday practice. It also calls for a sensitive and reflective attitude; implicitly this requires an informed but open mind, able to explore emerging facts and patterns within a theoretical context. Practitioners may need to be able to grapple with uncertainty and the anxiety that accompanies not knowing (Briggs, 1992; Tanner, 1999) rather than opting for a deductive and premature fitting together of theory and 'facts' and reactive responses.

Our third point requires the implicit to be stated clearly: a relational perspective on neglect will involve working both *with* and *within* relationships. Social work has a rich history of relationship-based practice in which the concept of the use of self is well established (Egan, 1998; Hollis, 1964; Salzberger-Wittenberg, 1970). However, changes in professional ideologies and the organisation of services have challenged the centrality of relationship-based social work in mainstream practice.

The ideological challenge has come from the growth of competing theoretical perspectives that encourage practitioners to consider alternative loci for understanding and intervening in family difficulties. These perspectives argued that much individual difficulty was a consequence of structural disadvantage or oppression rather than personal deficit. They expressed concern about pathologising such individuals and about fostering dependent relationships lacking in purpose (Baily & Brake, 1975; Dominelli, 1997; Thompson, 1997). One of the reasons why relationship-based practice may have fallen into disrepute was its apparent absence of attention to issues of power, 'difference' and structural oppression (Thompson, 1997; Dominelli, 1997).

The humanistic stance of much casework implied a neutrality and equality in the relationship between social worker and client, and masked the impact of features such as race, gender and class both in the relationship and also in terms of the client's life opportunities and experience. It also failed to recognise the power invested in the worker by virtue of his/her role and

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its implications for the conduct of the client–worker relationship. So any attempt to re-introduce 'relationship' into social work needs to be mindful of this history and ensure that issues of power and of race, class and gender are central to social work endeavour.

A set of organisational challenges to relationship-based work has come from developments in social service provision. The progressive reduction in public sector resources, together with the emergence of the care manager approach, has led to a re-shaping of the social work role with an emphasis on the brokering between, rather than the direct provision of, services. The combination of these factors has resulted in a workforce that feels, and is, under-resourced, overloaded and deskilled. These are powerful points of resistance to a relationship-based approach to neglect, however, our experience tells us that practitioners, with support and training, are hungry to do what they still see as 'real' social work. This has been evidenced by practitioners on the PQ Child Care Award Programme who have undertaken sensitive and skilled work in very debilitating environments. The Goldsmiths Advanced Award Programme similarly enabled practitioners to advance their skills in relationship-based social work (Martyn, 2000; Aldgate & Simmonds, 1988). At the same time we are witnessing a growing body of research that supports the argument for a relationship-based approach (Thoburn *et al.*, 2000).

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Application issues

In order to advance relationship-based practice, we suggest that consideration needs to be given to the concerns both of the families and of the workers involved. Here we will address two parallel processes: the need for practitioners to work in partnership with families, and the need for agencies to work in partnership with practitioners through the medium of supervision. As noted above, anti-oppressive practice needs to be the organising framework within which these concerns are understood.

Partnership

Partnership is a well-established part of childcare social work practice, but in the context of neglect we may need to consider in more detail what the partnership between worker and family members looks like, and why. If attachment difficulties are contributing to the neglect, then part of the work with the parent will involve trying to change the internal working model with which the parent is operating. One way this may be achieved is through the experience of establishing an effective relationship—in this case, with the worker. The process of establishing the relationship will give clues to the attachment experiences of the parent and how and why relationship difficulties occur. This will in turn guide the worker as to the responses that are necessary to make some difference to the parent's attachment style and way of relating. For the social worker, this means *being in* the relationship at the same time as *working on* the relationship.

In terms of skills, this work makes a number of demands on the worker. This includes an ability to acknowledge and work with the fact that the relationship itself is not neutral and takes place within an existing context of power and difference. Power dynamics—whether invested, for example, in the professional role or personal characteristics of the worker—will impact on how the parent is able to use the relationship. The issue therefore needs to be made explicit and worked with, as one of the dynamics of the relationship. As we have indicated earlier, another skill involves the ability to work simultaneously with practical issues and with the unspoken communication and dynamics of the family's life, whilst avoiding collusive or defensive behaviour. The tendency for collusion or defensiveness may

be heightened when the relationship encompasses differences between worker and family for example around race, culture, class or sexuality. This can lead to unrealistic assessments based either on overly optimistic or unduly pathologising responses to the aspects of difference embodied by the family members.

From a relationship-based perspective, there are a number of possible intervention points within a family. The worker may need to consider working with the neglected child/ren, any other children in the family, the parental couple (if appropriate), and the broader family system. Each of these sites will require the key skills we have identified above, augmented by specialist knowledge from different fields, for example, direct work with children, family therapy and couples work (Iwaniec & Sneddon 2001). None of this is quick and dirty work, and may require a timescale that does not comfortably fit with a case management approach (Thoburn *et al.*, 2000). As Daniel points out, 'Long term intervention can be assertive, purposeful and effective, but a shift in approach requires a shift in the formulation of the problem. Children referred because of neglect are not only in need of support themselves, but usually live in families who are also in need, materially and emotionally. If such referrals are characterised as referrals of families with special needs then they can be responded to in these terms and the provision of long-term support validated' (Daniel, 1998). It may also require a different 'take' on the idea of dependency, currently presented as something to be avoided at all costs in the relationship between worker and service user (Daniel, 1998).

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Supervision

> I am more than ever convinced that trying to work in any depth without it [supervision] is like shooting the rapids without a life jacket (Agass, 2000, p. 210).

The quote from Agass captures the turbulent quality of much childcare social work and its potentially engulfing nature. The approach to child neglect we have been advocating asks the social worker to engage very directly with the emotional content of a family's life, and stay with it. To be effective, indeed to survive this, social workers need the opportunity to stop and think, in a safe and containing environment, a function that can be served by regular and skilful supervision. They need to be able to make links between their experience and research/theoretical knowledge, and use these to guide their practice interventions.

Whilst supervision has a key role to play in supporting the worker it also has the potential to affect practice more directly. Engaging with neglect can evoke very powerful feelings in the worker—for example, hopelessness, frustration, disgust—which, if left unexamined may lead to reactions driven by the worker's undigested emotional state. Supervision has the capacity to help the worker think about the *meaning* of their emotional response. It is a place where the social worker can try and keep thinking 'alive' and to this end act as a 'circuit breaker' (Miller-Pietroni, 1998) by challenging habitualised and unthinking and potentially oppressive responses.

We recognise that this approach may offer a challenge to some current supervisory practice, but suggest that there is a need for supervision to parallel the work it supports. This position also lends itself to the call for management training in social services to move away from managerialism and towards the management of practice (Kearney, 1998).

Conclusion

In this paper, we have identified that chronic neglect is a significant issue for social work and raises particular difficulties in terms of effective intervention and outcomes for children. The

framework we propose for understanding and working with neglect focuses on the relationship of care between a child and his/her care-giver(s). We draw on attachment theory to help understand the quality of the relationship, making a link between the nature of the attachment and possible outcomes in terms of neglect. We suggest that in order to work effectively with chronic neglect, the worker needs to be able to address any underpinning attachment difficulties and that a relationship-based model supports this task. The understanding of relationship-based practice explored here involves effecting change in the parent's internal working model (which affects their relationship with their child) through the medium of the client–worker relationship. As we have suggested earlier, this involves a parallel process of working both in and on a relationship. We recognise the demands made by this work on the family, the worker and the organisation, but feel that this approach has much to offer both thinking and practice in relation to neglect.

Note

[1] The work of Stern (1985) on attunement and Bion's (1962) ideas on containment are also significant to understanding the nature and quality of parent–child relationships.

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