

The role of an early years practitioner in recognising and responding to signs that a child may be at risk of harm or neglect.

Introduction

This paper aims to address and discuss aspects of child abuse and the responsibilities of an early years practitioner in recognising and responding to these. Consideration will be given to defining 'harm' and 'neglect' and the role of the practitioner in safeguarding and promoting the welfare of children in their care. The paper will specifically focus on two categories of child abuse namely neglect and sexual abuse utilising relevant literature, legislation (both current and historical), seminal works of theory and research articles where applicable. A flow chart (and further setting guidelines) outlining the safeguarding process that should be followed within an early years environment will be included and referred to when explaining the safeguarding and reporting process in the work setting. For reference, 'early years' in this context applies to children from the ages of 2 until 7 years and the setting in which safeguarding processes are denoted is a small primary school situated in a residential housing estate.

Defining key terms

Key words in the title of this paper should also be considered briefly in order to define the particular areas of focus. For instance, the definition of 'child' may differ depending on context and perspective; the United Nations Convention on the Rights of the Child (UNCRC) states under Article 1 that, '...a child means every human being below the age of eighteen years...' (United Nations International Children's Emergency Fund, 1989 and Department for Education, 2010: 20): unfortunately, physical, emotional and learning needs may compromise this statement and these allowances should be factored in to accommodate a more diverse definition. The term 'child' may be interpreted in a number of ways: it may be viewed as a social construct implying its statement of meaning is not fixed; it is a fluid and changing explanation depending on historical and cultural perspectives. For instance, Aries (cited by Geisinger, 2017) argues that from both historical and cultural perspectives, physical independence determines the stage at which children are expected to take on adult roles, thus reinforcing the theory that 'child' and 'childhood' is established by the society in which the individual lives. Children can be seen to be occupying alternative social spaces

depending on the lens through which they are viewed (Wyness, 2012): in Ethiopia and Burundi for example, children are often recruited as soldiers thus adopting practices traditionally associated with adults. Likewise, it could be debated that the term 'abuse' has an indeterminable definition depending on opinion, experience and context. Interestingly, Kelly theorised that the truth is a personal construct: he examines the idea that all perceptions are open to question and consideration depending on interpretation (cited by Butler, 2009). This theory highlights the precariousness of believing any one version of events which may lead to truths being ignored and embellishments taken as fact. Additionally, as a practitioner it can be difficult to judge whether a child is at risk of harm if the context is not familiar: for example, the wealth and circumstance of a child's environment can greatly influence an outsider's perspective and further discussion regarding this issue will follow. Furthermore, for clarity the difference between 'safeguarding' and 'protection' should be briefly outlined: 'safeguarding' is an umbrella term for the framework of policies and practices put in place to promote the wellbeing of children, 'protection' is an element of these processes employed to aid vulnerable or at risk children (Linden, 2012).

The four categories of child abuse indicated in the title as defined by the National Society for the Prevention of Cruelty to Children, (NSPCC, 2017) a UK based organisation are physical, emotional, sexual abuse and neglect. However, international perspectives differ somewhat and with reference to the previous discussion regarding the terms 'child' and 'abuse' being social constructs (open to interpretation depending on cultural perspectives) the Netherlands by contrast list five general types of abuse: they distinguish between emotional or psychological abuse (whereby the child is constantly verbally abused) and emotional or psychological neglect (in this instance the child suffers a lack of positive attention) (Government of the Netherlands, 2014). Authorities in Australia also list five categories of abuse: physical, emotional, sexual abuse, neglect and exposure to family violence (Australian Government, 2018). The definition of 'child abuse' currently used in legislative terms in the UK is taken from 'Working Together to Safeguard Children' (DfE, 2015:92 cited in Lumsden, 2018) and is stated as, 'A form of maltreatment of a child. Somebody may abuse or neglect a child by inflicting harm, or by failing to act to prevent harm.' The term 'harm' differs from that of 'neglect': referring again to the NSPCC's guidelines (NSPCC, 2017) where it specifies that 'harm' is an act that intends to injure (either

physically or emotionally) whereby 'neglect' is the avoidance of care to meet basic needs (which can result in harm).

Historical context and theory

It is important to recognise the role that previous serious cases and legislation have played in current safeguarding guidelines. A brief timeline indicates that from around 1972 awareness was raised regarding the welfare of children and babies: first came guidance regarding 'battered babies' (DHSS, 1970;1972), then the publication of 'Non-accidental injury to children' (DHSS, 1974 cited in Burton and Reid, 2017) followed which had been triggered by the death of Maria Colwell at the hands of her step-father. During the 1980's, the Cleveland case resulted in 121 children being separated from their families and taken into care after two paediatricians presented evidence of sexual abuse which was later discredited (Hedley, 2014). The Children Act (1989) that followed attempted to address the tensions between families and local authorities and in its introduction, drew attention to the paramountcy of the child's welfare. Other serious cases were brought to light, most notably Victoria Climbié, Baby P and Daniel Pelka: consequently, Lord Laming responded to the Victoria Climbié case with his report (2003) which outlined failures in legislation and child protection measures of the time.

Many theorists subscribe to the idea that unless basic human needs are met, we become preoccupied and are unable to focus effectively on any task in hand. Maslow (cited by Knights, 2017) in particular theorised that providing 'physiological' needs such as food, water and shelter are essential for individual progression. Whilst this premise was initially developed to aid efficiency within an adult working environment, the same can be said of children: often if a child arrives at school without eating breakfast, for example, it quickly becomes evident that they are not adequately prepared for a day of learning being distracted by the discomfort of hunger. Failure to provide adequate food or shelter is a recognised element of neglect: for continuity in defining key terms, referring to the NSPCC guidelines (2017) again among the potential signs of neglect in children are indicators of persistent hunger and unwashed or inadequate clothes. Further reading of this document however, also highlights the difficulty in identifying this form of abuse: infrequent occurrences of known signs do not necessarily prove neglect; numerous and persistent incidents on the other hand

could indicate a serious problem. Indeed, Richards (2018) addresses this issue when alluding to the concerns of the participants in the study: they felt that the rise in 'thresholds' (the level or amount of evidence required to justify social worker intervention) resulted in 'at risk' children being less likely to receive the support they needed. Instead, this type of abuse was only recognised when single serious incidents occurred. Where cases of neglect are suspected, practitioners are expected to keep records of observations over time and add them to the child's file (see appendix A and in B, 'Report'). However, there appears to be nothing in place to acknowledge and mitigate the harm that would be caused to the child as a result of suffering neglect over an extended period before intervention occurs; this would seem to identify a gap in the policy and provision for providing support for children in these circumstances.

Recognising and responding to signs of abuse

Attention will now turn to discussing difficulties recognising and responding to signs of sexual abuse. To continue consistency, the NSPCC guidelines (2017) list some of the potential signs of sexual abuse as soreness, itching or injury in the genital area, discomfort when walking or sitting down and changes in mood or behaviour. Again, in such suspected cases, practitioners are expected to note and report any observations (referring to appendix A and B). Unfortunately, personal experience proves that this type of abuse can manifest itself in many ways and be ambiguous to determine: a six year old girl within the school setting presented with soiled underwear which, over time progressed to an unpleasant smell, itching and soreness. The child had already been the subject of social worker care due to family circumstances and these new indicators led us to follow our reporting process (see appendix B) as we believed the matter of neglect could now be the issue. Further investigation however, over a matter of months revealed that the child was suffering from a sexually transmitted disease as a result of abuse by a relative. She was an outgoing and confident girl; her mood or behaviour had not changed. This raises the question of how are we as practitioners to identify abuse if the child is accustomed to such behaviour and consequently, the abuse is normalised?

The role of the practitioner

The role of the practitioner in identifying, recognising and responding in a situation where a child may be at risk of harm or neglect is therefore a vital yet complex one.

According to the Department of Education guidelines as stated in 'Working together to safeguard children' practitioners within an early years setting must be '...alert to any issues of concern in the child's life...' (DfE, 2018:59). Referring to the previous discussion regarding context, it could be argued that 'concerns' might be difficult to define depending on a child's circumstances, the reliability of the information provided and the practitioner's perspective and experience; for instance, some might assume a child has been neglected if they arrive at school without a coat, whereas others accustomed to a child's home environment may only raise the alarm if damaged or soiled clothes are worn repeatedly. The setting policy provides a framework to which practitioners are expected to follow; referring to appendix A, the flowchart illustrates the procedure on which many settings base their safeguarding process. However, priority has been given to the Designated Safeguarding Lead's role and little dedicated to that of the practitioner. Beyond reporting to the DSL, there is a lack of advice regarding procedure. The process noted in appendix B focuses more on the expectations of details of reporting but gives little consideration to the events that follow reporting or the emotional impact on those involved in the process. An alternative proposal can be seen in appendix C which includes details of how to approach the process and suggests offering support to practitioners. Furthermore, reporting concerns is a collaborative endeavour: issues inevitably occur when interprofessional working is required, issues it has been suggested that can be resolved with procedures, training and coordinated planning (Hood, et al. 2017: 706); further reading of this paper also highlights the lack of empirical evidence relating to interprofessional expertise within a setting: knowledge and experience gained from working collaboratively should be identified and researched for the benefit of current and future practitioners. Munro (2010) introduces the term 'atomistic' (cited in Hood, et al. 2017: 706) in reference to this practical solution but this approach lacks attention to conflict arising from personal interaction, emotional responses and relationship dynamics (Waring, et al. 2017). Training and awareness may begin to resolve some issues: lack of confidence in identifying abuse has proved to be a barrier to reporting (HM Government, 2016: 27) and carefully tailored courses could address this. However, quality training has been in question for some time (Nutbrown, 2012) and is very much dependent on geographical resources.

Conclusion

While the purpose of this paper was to critically discuss the role of the practitioner in recognising and responding to signs of harm or neglect, it is important to note that even before the role itself is analysed, certain terms are difficult to define and pinpoint. For instance, if abuse is a social construct and the truth is a personal construct, how do we as practitioners monitor and measure such allegations? With reference to the reporting process itself, an atomistic approach (such as illustrated in the flowchart) would seem to be the practical solution to reporting incidents but how effective is this when acknowledging collaborating practitioners' relationships and dynamics? Further training would be beneficial, but quality and suitability would need to be closely assessed. It is clear that there is no specific solution which would remedy the issues faced in recognising and responding to signs of potential harm or abuse but gaps in knowledge should be addressed and may be rectified with more research.

Recommendations and implications for practice

In light of the discussions raised within this paper,

- As ratified by the United Kingdom, the UNCRC (United Nations, 1989) defines a child as anyone under the age of 18 years and also states children's rights with regards to protection from harm. However, it is recommended that in the translation of this into setting-level policy and practice, settings should seek to contextualise this definition in light of the diversity of the children attending their setting.
- It is important to recognise that definitions and understandings relating to abuse and neglect, whilst underpinned by legislation and policy, will vary depending on the social and economic context within which they are being viewed. Hence, the signs of abuse should not be deemed as a 'one size fits all' list. How neglect manifests within one location may differ within another context. The key worker, who will already be familiar with the child's circumstances, will be an invaluable resource in this instance.
- It is of central importance that setting-level safeguarding flow charts encompass an element relating to emotional support and debriefing opportunities for staff who are dealing with the situation.
- In line with reporting timelines of concerns regarding abuse, enter a diary date and a reminder for the Designated Safeguarding Lead to update the practitioner regarding the action that they intend to take. Whilst it is understood that it is not necessary at

this stage to disclose details of the ongoing process, practitioners may find it reassuring to know how their concerns will be dealt with.

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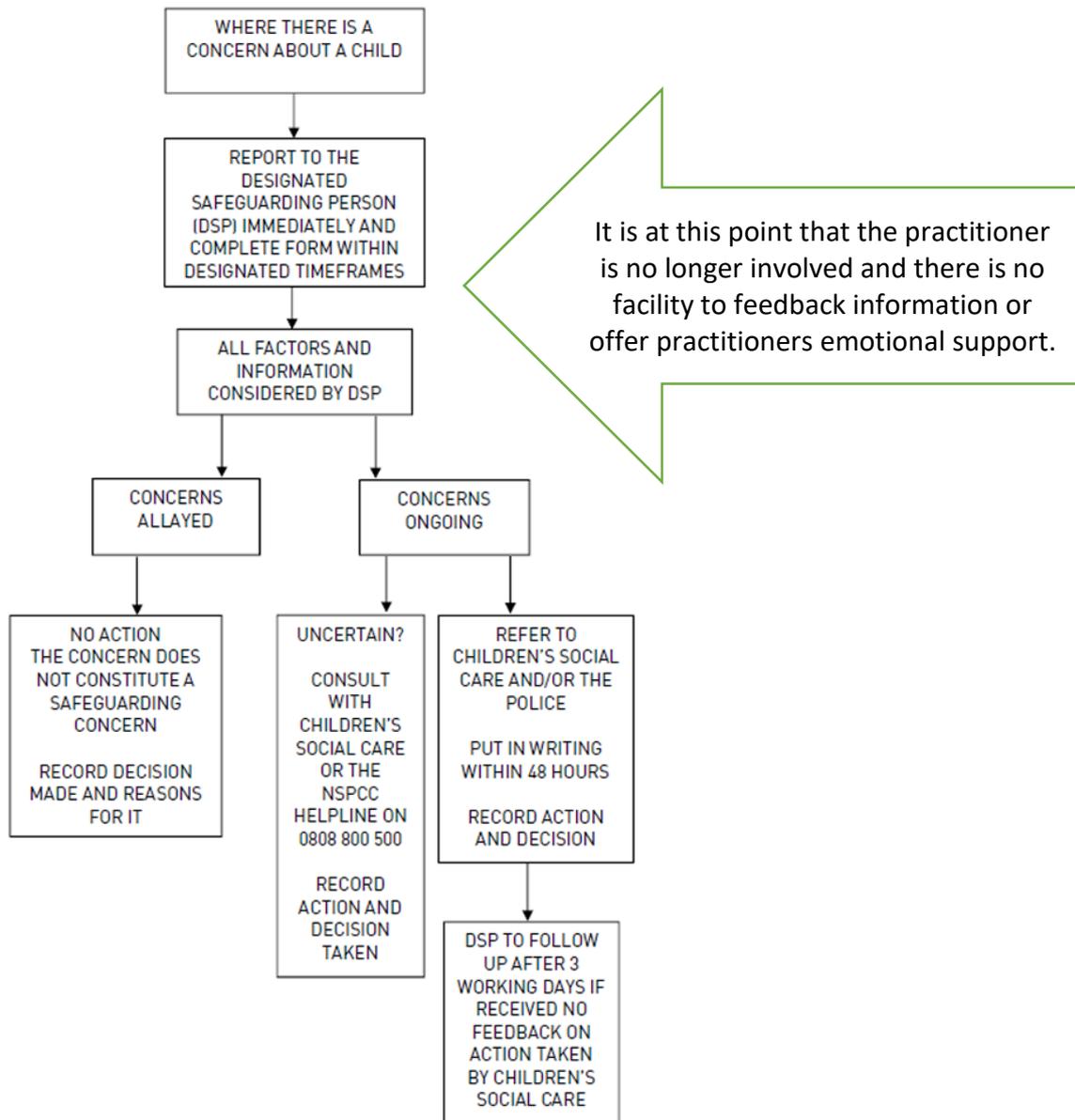
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Appendix A

Safeguarding process flowchart:



Appendix B

The setting reporting procedure:

Receive

Always stop and listen straight away to someone who wants to tell you about incidents or suspicions of abuse. Listen quietly and actively, giving your undivided attention. Allow silences when needed. Do not show shock or disbelief but take what is said seriously.

Reassure

Stay calm, no judgements, empathise. **Never make a promise that you can keep what a child has said a secret.** Give reassurance that only those who need to know will be told. Reassure the young person that they were right to tell you.

React

React to the student only as far as is necessary for you to establish whether or not you need to refer this matter, but don't interrogate for full details.

Surely all incidents need to be referred.

Don't ask leading questions - keep the open questions e.g. 'is there anything else you want to say?'

If you need to try to get more details again keep to open questions, "tell me a bit more about that"

If you do ask questions remember to record the questions you ask as well as the responses the young person gives

Do not criticize the perpetrator; the student may have affection for him/her.

Explain what you will do next - inform designated teacher, keep in contact.

Record

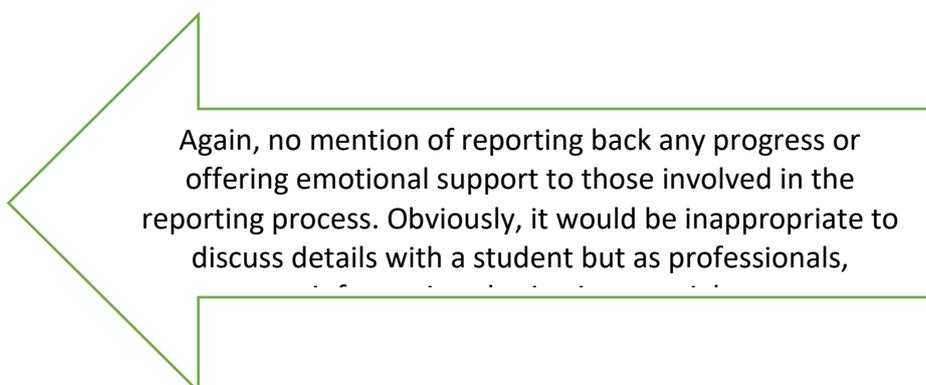
If possible, make brief notes about what they are actually telling you at the time. Keep these notes, however rough they are. If you are unable to make notes at the time write down what was said as soon as you can.

Record what was actually said by the student rather than your interpretation of what they are telling you, be factual at all times.

Record the date, time, place, and any noticeable nonverbal behaviour.

Report

Report the incident to the designated teacher and do not tell any other adults or students what you have been told.



Never attempt to carry out an investigation of suspected abuse by interviewing the young person or any others involved. This is a highly skilled role and any attempts by yourself could affect possible criminal proceedings.

Appendix C

A combined approach:

Using elements from both the flowchart and recording process in setting, the following has been produced.

NB: green text illustrates additions and changes that I feel would be beneficial.

Receive

Always stop and listen straight away to someone who wants to tell you about incidents or suspicions of abuse. Listen quietly and actively, giving your undivided attention. Allow silences when needed. Do not show shock or disbelief but take what is said seriously.

Alternatively, if you suspect harm or abuse report your concerns to a member of staff who is familiar with the child and their circumstances.

Reassure

Stay calm, no judgements, empathise. Never make a promise that you can keep what a

child has said a secret. Give reassurance that only those who need to know will be told. Reassure the young person that they were right to tell you.

React

Don't ask leading questions - keep the open questions e.g. 'is there anything else you want to say?'

If you need to try to get more details again keep to open questions, "tell me a bit more about that"

If you do ask questions remember to record the questions you ask as well as the responses the young person gives

Do not criticize the perpetrator; the student may have affection for him/her.

Explain what you will do next - inform designated teacher, keep in contact.

Record

If possible, make brief notes about what they are actually telling you at the time. Keep these notes, however rough they are. If you are unable to make notes at the time write down what was said as soon as you can.

Record what was actually said by the student rather than your interpretation of what they are telling you, be factual at all times.

Record the date, time, place, and any noticeable nonverbal behaviour.

Report

Report the incident to the designated **safeguarding lead**.

<p>Never attempt to carry out an investigation of suspected abuse by interviewing the young person or any others involved. This is a highly skilled role and any attempts by yourself could affect possible criminal proceedings.</p>
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Reassess

How are you feeling? Do you need support?

Remind

In line with reporting timelines, enter a diary date as a reminder for the designated safeguarding lead to update you on any progress.