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Guidance to Support Practitioners with Emotional Abuse

Inter-agency Practice Guidance



**Nottinghamshire
SAFEGUARDING
CHILDREN Board**



**NOTTINGHAM CITY
Safeguarding
Children BOARD**

CONTENTS

section	subject	Page
1	Introduction	3
2	Definition	3
3	Legislation & Guidance	4
	Interventions	
4	Parental Factors	5
5	Parental Behaviour	5
6	Impact on the child	6
<u>7</u>	Assessment	7
8	Using the framework	9
9	Appendices	
	1. Reference Material	14
	2. Emotional Abuse assessment Pro-forma	16
	3. Advice for Social Workers in Care Proceedings	18
	4. Family Life Cycle	20

1. Introduction

- 1.1. This practice guidance is issued as a supplementary guidance to the Nottingham City Safeguarding Children Board (NCSCB) and Nottinghamshire Safeguarding Children Board (NSCB) Safeguarding Children Procedures and it should be read in conjunction with this document.
- 1.2. It is intended for all those who work with children and families in all agencies and settings. It draws on research into child emotional abuse and on the experience of those actively working in this field. It is intended to be practical guidance which encompasses a shared approach to understanding, recognising and managing emotional abuse in a robust and timely manner; in order to prevent or minimise harm to children.
- 1.3 It seeks to minimise delay, avoid repetitive cycles of intervention, and minimise long-term negative impact on the child. It is important to recognise that effective case management and record-keeping are critical to support and inform future planning at each stage of the process.
- 1.4 It includes a range of tools, resources and useful contacts that practitioners may find helpful in their work with families where emotional abuse is an issue. The list, however, is not exhaustive and practitioners may well add other resources to it that have been found useful in practice.
- 1.5 The term 'parent' is used within the document to mean parent **or** caregiver i.e. those with the primary responsibility for caring for the child.

2. Definition

- 2.1 The central principle in the definition of emotional abuse is the consideration that the abuse must be a typical and pervasive feature of the parent - child relationship.
- 2.2 The definition of Emotional Abuse is contained in 'Working Together to Safeguard Children' (DoH March 2013) is:
- 2.3 **Emotional Abuse** is the persistent emotional maltreatment of a child such as to cause severe and persistent adverse effects on the child's emotional development. It may involve conveying to children that they are worthless or unloved, inadequate, or valued only insofar as they meet the needs of another person. It may include not giving the child opportunities to express their views, deliberately silencing them or "making fun" of what they say or how they communicate.
- 2.4 It may feature age or developmentally inappropriate expectations being imposed on children. These may include interactions that are beyond the child's developmental capacity, as well as overprotection and limitation of exploration and learning, or preventing the child participating in normal social interaction.

- 2.5 It may involve hearing or seeing the ill treatment of another. It may involve serious bullying (including cyber bullying) causing children frequently to feel frightened or in danger, or the exploitation or corruption of children. Some level of emotional abuse is involved in all types of maltreatment of a child, although it may occur alone.

Specific Issues

- 2.6 Emotional abuse will be present in all forms of child abuse and this emotional aspect may have as damaging a long- term effect on the child's development as physical and sexual abuse and neglect. However, it can also be present without other forms of abuse.
- 2.7 Emotional abuse occurs within the context of a parent/child relationship and can often be directly observed in the relationship between them.
- 2.8 Many potentially harmful interactions are very common. It is the persistent and repeated nature that would lead to the situation being emotionally abusive.
- 2.9 It is essential that interactions are observed and understood over time as emotional abuse is a process not an event.
- 2.10 It is unusual for a child to complain about emotional abuse. Mostly children take on the negative feelings voiced by parents about themselves and perceive the ill treatment as justified, thinking their parents' judgment of them is correct.
- 2.11 Emotional abuse will come to the attention of professionals in three main ways:
- Concerns about parental attributes (e.g.: Personnel working in adult mental health or alcohol and drug services becoming concerned about how a parent is functioning, and the impact this may have on a child. (see 4 below)
 - Concerns about parental behaviour (e.g.: Personnel working in Schools or Family Support, witnessing potentially harmful parent/child interactions) (see 5 below)
 - Concerns about the child (e.g.: a teacher or Paediatrician may be concerned about how a child is presenting (see 6 below). Difficulties will present differently at different ages and stages of development (see 6 below)
- 2.12 A Child's basic emotional needs are universal and transcend culture or ethnicity.

3. Legislation and Guidance

- [Children Act 2004](#)
- [Children Act 1989](#)

- [Working together to safeguard children 2013: A guide to inter-agency working to safeguard and promote the welfare of children : The Department for Education](#)
- [Nottinghamshire Safeguarding Children Board - Nottinghamshire County Council](#)
- www.nottinghamcity.gov.uk/ncscb
- [Nottingham City Council : Family Support Strategy](#)
- www.nottinghamshire.gov.uk/caring/childrenstrust/pathway-to-provision

4. Parental Factors – Risk Factors for Emotional Abuse

4.1 There are certain parental attributes that are more likely to be present in emotionally abusive families. Research by Glaser and Pryor (Child Abuse Review 1997, vol.6, pages 315-329) identified four common parental attributes;

- History of Childhood abuse
- History of mental health problems,
- Violence between parents,
- Alcohol or substance misuse.

5. Parental Behaviour – Types of Emotional Abuse

5.1 Persistent negative attitude towards the child/ren.

- The child is repeatedly denigrated; told they are bad, unwanted and blamed for the problems in the family.
- The child may be terrorised, mocked, belittled or isolated in confused or frightening situations.
- This may be specific to one child or involve all the children in the family.

5.2 Emotional Unavailability

Research has indicated that the emotional unavailability and unresponsiveness of the parent can be particularly damaging to the child. It can occur if the parent has mental health difficulties, substance or alcohol misuse or is persistently preoccupied with other difficulties such as domestic violence. Parents may be less likely to complain about their child in these situations and observations of interactions are particularly important. This is not to suggest that all parents who e.g. have mental health difficulties are emotionally unavailable to their children.

5.3 External factors can also impact on the emotional availability of a parent, for example poor physical health or financial worries.

5.4 Developmentally inappropriate or inconsistent interactions with the child

- The child may be expected to support the parent, care for siblings or themselves, or perform tasks beyond their developmental ability.
- The opposite can also be a problem as overprotection, taken to extremes, deprives the child of opportunities to develop friendships, activities and access experiences that would promote their development.
- Parents may promote insecurities in their child by, e.g. threatening to abandon them. Threats of abandonment can be as damaging as actual abandonment, e.g. persistent threats to put the child in care, parents threatening to leave or kill themselves. This can promote insecure attachment behaviours in the child, which can persist into their wider relationships and impact on their psychological and emotional development.
- Parents can have inconsistent expectations of the child and respond unpredictably to them. The child may be given confusing messages, which they cannot understand.
- Any of the above can be observed in many relationships at moments but it is the regularity of the behaviour which will impact on the child's development.

5.5 Failure to recognise or acknowledge the child's individuality or psychological boundary.

- This can involve the denial of the child's unique attributes of temperament and personality. The parents try to actively mould the child into meeting the parent's emotional needs. The parent may have complicated misperceptions of the child and attribute feelings, wishes and motives to the child that belong in the parent or in their history. If the parent has an enduring, serious mental illness, they may actively involve the child in their misperceptions of the world about them.
- The child may be used for the fulfilment of the parents needs, as a virtual extension of the parent
- A child can be involved by their parents in parental disputes
- Fabricated or induced illness is a variant of this category.

5.5 Failing to Promote the Child's Social Adaptation

- Parents may promote mis-socialisation, e.g. actively involving their child in criminal activity.
- Parents may neglect their child psychologically, e.g. failing to provide adequate mental stimulation and/or opportunities for experiential learning, including not sending children to school.

6. Impact on the Child

The extent and nature of signs of impairment in the child vary according to the child's age. There are no specific patterns of symptoms in the child. The effects can be in any area of their development.

- **Physical**
There can be health problems related to poor growth, developmental delay or psychosomatic symptoms.
- **Emotional**
Emotional development can be impaired with low self esteem, chronic anxiety or anger and acting out behaviour, including self-harm
- **Behavioural**
Children can present as being oppositional, attention seeking or overly compliant and withdrawn, e.g. children and young people who engage in offending behaviour.
- **Educational**
For some children, their ability to think clearly or concentrate may be impaired and this will have an impact on their educational achievements. Non school attendance or lateness may be a persistent pattern.

7. Assessment

- 7.1 All professionals who come into contact routinely with children and families, teachers, G.P s, midwives, health visitors, nursery staff and play leaders etc. have a responsibility to identify children and families who are struggling and are in need of extra help and support. All have a role to play in assessing the well-being and development of children. Where there are concerns emerging, the Common Assessment Framework should be initiated.
- 7.2 Practitioners and managers are expected to apply professional judgment to their decision making. If needs cannot be met within universal services, practitioners will need to consider if additional and more extensive, specialist or protective support is required. Requests for extensive and protective support can be particularly challenging for professionals, which is why it is important that decisions are based on high quality assessments using a multi-agency approach with the Common Assessment Framework. More information can be found about this for Nottingham City at; [Nottingham City Council : Family Support Strategy](#) (see page 3) or for Nottinghamshire please refer to the Pathway to Provision. <http://www.nottinghamshire.gov.uk/caring/childrenstrust/pathway-to-provision/>
- 7.3 Advice and consultation must be sought from a manager or safeguarding leads where there is a concern that emotional abuse is occurring.
- 7.4 Where there are immediate concerns about a child's safety and a view that the child/ren is suffering or likely to suffer significant harm, a referral should be made to Social Care without delay and without the need for a CAF. For Nottingham city see [Nottingham City Council : Family Support Strategy](#) (see page 6 for indicators requiring immediate referral) For Nottinghamshire see <http://www.nottinghamshire.gov.uk/caring/childrenstrust/pathway-to-provision/>

- 7.5 Where there are immediate concerns about the safety of a child with severe and lifelong disabilities, not currently open to the Disabled Childrens Team, a referral should be made through Children & Families Direct within Nottingham City . <http://www.nottinghamcity.gov.uk/ics/index.aspx?articleid=26169>
In Nottinghamshire new safeguarding concerns should be referred through the Multi Agency Safeguarding Hub (MASH).
<http://www.nottinghamshire.gov.uk/caring/childrenstrust/pathway-to-provision/mash/>
- 7.6 Determining whether a child or young person is suffering, or at risk of suffering, significant harm can be complex. Practitioners in all agencies have a responsibility to be aware of the indicators of significant harm, the Nottingham City and Nottinghamshire SCB Safeguarding Children Procedures and their own agency's Child Protection Policy in dealing with these. [Nottinghamshire Safeguarding Children Board - Procedures and practice guidance - Nottinghamshire County Council](#) (see Chapter 5. 5.16)
- 7.7 Children's Social Care is the lead agency for undertaking Child Protection enquiries including under Section 47. If there is any doubt about whether to refer to Social Care or not, the case should be discussed with the line manager and / or agency safeguarding lead as well as contacting Social Care for advice and guidance.
- 7.8 Practitioners at all levels of intervention should undertake the following steps to understand if emotional abuse is a factor and whether the child is suffering or at risk of significant harm:
- Compile a written chronology of key events in the child and family's life, by reviewing their own agency records.
 - Complete a genogram to aid understanding of family structure.
 - Record observations of parent/child interaction. Ask the following questions:
 - What worrying interactions happen between the parent and the child and how often do these occur (i.e. is the problematic interaction observed typical of the relationship between the parent and child)?
 - What effect is it having on the child? (Facts and observations).
 - Is the effect on the child mild, moderate or serious? (Remember the effect is cumulative).
 - Is there a link between how the parent behaves and/or how the parent is functioning, and how the child is presenting?
 - Begin to talk to the family about what the concerns are, seek a clearer understanding of any reasons for the difficulties and be clear about what needs to change.
 - Talk to the family about the need to contact other professionals and agencies who know them. It may be particularly important to talk with those who regularly see the child and parent together.
 - Consider meeting together with all agencies involved to discuss the concerns emerging. This may be a CAF, with parental consent and

involvement, or may be a multi-agency meeting within the child protection framework.

- Think about what other family support might be helpful.
- Discuss why you are concerned with your manager/designated person for child protection:
 - Is this emotional abuse?
 - Is it serious?
 - Is there potential for improvements in family relationships?
 - What are the family's strengths?
 - Are there other protective factors?
- Consider the option of seeking an emotional abuse forum consultation to help your thinking at this early stage. (see appendix one for details)

8. Using the Assessment Framework:

8.1 Parenting capacity

- See parents together and if necessary separately to discuss their parenting and how other difficulties impinge on it e.g. alcohol and substance misuse (see practice guidance 'Drug and Alcohol Misusing Parents'). Can they provide emotional warmth and stimulation?
- How do the parents see the child, how consistent is their approach, do both parents see things the same way?
- How do the parents respond to the child's behaviour and circumstances?
- What categories of ill treatment are difficulties in this family?
- Are there other significant difficulties in the family that are getting in the way of their ability to parent?
- Do parents recognise the need for change or do they blame the child?
- What is the parents understanding of the child's needs and development? Can they provide basic care and ensure their safety?
- Do parents understand the necessary tasks, or are they unaware, or do not see the problem?
- What is the impact of past and current experiences on parenting?

8.2 Child's Developmental Needs

- See child to gain an understanding how life is for them.
 - How are they coping?
 - What is expected of them?
 - How do they perceive their daily life?
 - Their mood
 - Their views and feelings about changes they would like in their life
- Check out the child's development and identify and refer on for other assessments if necessary.

- Be aware of the child's vulnerabilities and the meaning this has for the parents.
- Look for resilience and mitigating factors. Were there early secure relationships? Does the child have innate competences?

It is unlikely that the child will directly disclose Emotional Abuse.

8.3 Family and Environmental Factors

- See the family together and in different combinations.
- Sensitively seek a family history which may give clues to the current problems. Don't assume that reluctance to talk about this is resistance. Parents can often feel victim of their own children in the way they felt victim of their own parents.
- In the wider family or community, are there significant other adults who provide helpful interactions with the child?
- Supporting parents with difficulties with housing, income, employment may help them to interact differently with their child.
- Are parents able to use community resources or are they socially isolated?

8.4 It is necessary to observe and record family relationships, family functioning and attachment behaviours. Seeing the family together as well as separately is essential, be aware of strengths as well as weaknesses. A family history may give important clues to the current problems and should be sensitively sought. It is important to check with other agencies for clarity about the child's situation and for their observations of change. There must be clear identification of other assessments necessary and an adequate exploration of other explanations for the problems in the child.

8.5 An assessment of family functioning includes observing actions as well as listening to family accounts; sometimes there is a big discrepancy between the two. There is a need to understand conflicts and alliances between family members, ways of resolving conflict that the family has developed, styles of decision making, predominant mood, family belief systems and values and attitudes. There may be patterns of interaction which have been prevalent in the family over generations and these need to be understood.

8.6 The assessment process itself is an intervention into family life. It is therefore possible to begin to explore the family's capacity and willingness to change, and whether the changes they can make are helpful to the child. The family needs to know as early as possible the specific concerns identified and what they need to change. It is also important to say why and what the benefits would be for the child and parent of changes identified.

8.7 Nottingham City Council has adopted the Signs of Safety as an approach to working with children and families. Signs of Safety is a relationship-grounded, safety-organised child protection framework, which offers concrete tools and strategies for engaging children, families and professionals in the assessment and safety planning process. The framework maps out what the worries (dangers/risks) are about the child, what's going well (safety & protection) and

what needs to happen (agency and family goals). After gathering all the information an overall safety score is applied. More information can be found about the signs of safety, including tools available to support the process can be found at: <http://www.nottinghamcity.gov.uk/ics/index.aspx?articleid=23918>

Interventions

- 8.8 Whilst undertaking this work with the family, practitioners will need to consider if the family are engaging with them, making the required changes and whether there is any positive impact on the child.
- 8.9 Any intervention / support plan needs to be agreed with the parents whilst ensuring that the child's needs remain central; and tailored to the particular issues for change in the family. Account should be taken of the child's culture, religion and family diversity, acknowledging positive things already happening which are good for the child. It needs to specify how these changes will be monitored. The tasks expected of parents need to be realistic, clear and properly sequenced. Care should be taken that the family are not required to be involved in too many activities simultaneously; the potential confusion that this can create gets in the way of change. If parents disengage there needs to be an agreement between all parties about how this will be addressed.
- 8.10 Central to the work will be developing a clear understanding between parents and workers about the connection between family relationships, parental behaviour and the child's difficulties. Part of the multi -agency group's function is to recognise as work progresses any changes in the themes and issues; respond by changing direction or shifting emphasis if necessary; whilst consolidating on positive change.
- 8.11 Eliciting ideas from families about what their child's needs are in general terms, and then looking at how these needs can be met within their family, can be a useful starting point. Obstacles to meeting these needs can then be addressed in a more blame-free way.
- 8.12 Using genograms (maps of family members and significant others) can be very helpful. They provide a quick visual way to record and grasp lots of information about family patterns over generations. They can be an important way of joining with families, and can enable them to see themselves in a new way. Families may begin to see the larger picture, and begin to map their own strengths and vulnerabilities.
- 8.13 Using the idea of the Family Life Cycle (McGoldrick & Carter 1989) and what tasks a family needs to be doing at each stage is helpful. It enables the worker to address what the family is doing well and in a relatively blame free way, pinpointing where the family are not undertaking the necessary jobs to promote their child's healthy emotional development. Information about the Family life Cycle can be found in appendix 3. Further reading on this may be beneficial if you were to use this with families.
- 8.14 It is essential to recognise the type of emotional ill treatment as this will guide the interventions required. The following refers back to Parental Behaviour – types of emotional abuse (paragraph 5)

- 8.15 **Persistent negative attributions to a child.** “Hostility towards the child is often based on negative beliefs that the parent/caregiver has about the child’s temperament and personality which can be hard to shift. Work may include sharing with the parents what the child’s view of himself/herself may be and how this may be altered by interacting more positively with the child” (Glaser 2011). It may be necessary to work on building up empathy in parents towards him / her. However, this needs to be carefully approached. It often involves the worker taking the initiative to show some empathy towards the parents, **but without compromising the child’s emotional safety by losing sight of their needs.** If ill-timed, going on to encourage a parent to ‘imagine what it’s like to be in their child’s shoes’ can simply result in a backlash against the child.
- 8.16 **Emotional unavailability** is present when parents are troubled by their own difficulties e.g. drug and alcohol misuse, mental health problems, domestic violence which are obstacles to attending and responding to their child’s emotional needs. Intervention should initially focus on parental difficulties e.g. treatment for parental drug / alcohol misuse, mental health problems always assessing that any input has the necessary positive effect on their parenting and their relationship with their child. This needs to be followed by direct work
- 8.17 **Developmentally inappropriate or inconsistent interaction** with the child can mean that parents are unaware of their child’s developmental needs for consistent, non punitive boundary setting and rewards. Interventions can be delivered through a parenting group. Parenting programmes can particularly helpful when addressing ‘inappropriate developmental expectations’ as the primary type of emotional harm.
- 8.18 **Failing to recognise or acknowledge the child’s individuality or psychological boundary** – using the child for the fulfilment of parents needs. This often involves unresolved conflict between parents or serious abuse within the parent’s childhood. It is important to sensitively seek and understand the factors that are maintaining these interactions with the child and address what the implications would be if this changed. Helping the parent explore how the child may view these interactions can be helpful. The child’s needs must remain central.
- 8.19 **Failing to promote the child’s social adaptation.** Parents in this situation often fail to consider the impact of their interactions with the child on the child’s relationships with peers and school etc. Educating the parents about this may be effective, and different agencies working together can be particularly helpful.
- 8.20 There are often concerns about more than 1 category of emotional abuse and judgments then need to be made about which category to prioritise
- 8.21 Family Systems Theory has contributed massively to the understanding of certain aspects of emotional harm, e.g. scapegoating and failing to recognize the child’s psychological boundaries. Many of the tools routinely used in family therapy e.g. family life cycles, genograms and the idea of children having difficulties due to having to adapt to problematic parenting, are very useful in working with emotional abuse.

9. Essential components in managing the child's journey

- 9.1 Universal services are usually the first to notice that there is a problem, normally witnessed in the child's behaviour. They will have access to observations of the parent/child interactions and the behaviour of the parents towards a child. They may also have historical knowledge of the parental history and the wider context of family functioning.
- 9.2 A clear written record must be kept of all observations leading to concern, discussions, and interventions with the family. This includes within universal services, early help services and targeted support services.
- 9.3 Interventions to effect change must be tried from the time that concerns are first identified.
All interventions must be:-
- Discussed with the parents
 - Discussed with the child, as appropriate
 - Set out clearly the changes required
 - Specify a timeframe for these interventions to be achieved
 - Well-documented, including evidence of engagement and impact
 - Be clear about what action might be taken if the changes are not achieved and/or increased concerns are identified.
- 9.4 If the interventions tried do not affect change and the child is referred on to the next tier of intervention, a full history of the concerns and interventions tried must be passed on to inform future planning, prevent repetition and starting again. In some cases it will be appropriate to set the interventions within the authority of a Child Protection Plan to secure engagement of families.

RESOURCES AND REFERENCE MATERIAL

Multi-Agency Forum for Emotional Abuse, consultation service accessed through CAMHS, telephone no. 0115 8440500. This offers advice on whether a situation can be deemed emotionally abusive through to helping with the formation of plans for working with registered families. It is not a substitute for child protection referrals being made. The family concerned would need to be aware of the request for consultation.

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PARENTAL BEHAVIOUR	DETAIL/EXAMPLE
Emotional unavailability, unresponsiveness and neglect	
Persistent negative attitudes -> child(ren)	
Developmentally inappropriate or inconsistent interactions with the child	
Failure to recognise or acknowledge child's individuality or psychological boundary	
Failure to promote child's social adaptation	

EFFECT ON THE CHILD	DETAIL/EXAMPLE
Physical	
Emotional	
Behavioural	
Educational	
Peer Relationships	
Other	

PARENTAL Factors	DETAIL/EXAMPLE
Domestic Violence	
Drug and Alcohol Misuse	
Mental Health Difficulties	

History of Abuse as Child	
Other	

FAMILY STRENGTHS	DETAIL/EXAMPLE
RESILIENCE FACTORS	DETAIL/EXAMPLE

Advice for Social Workers in Care Proceedings

Some of this advice may be relevant for care proceedings in all forms of child abuse but it is particularly important for emotional abuse where there is generally a lack of forensic evidence or disclosure from the child. Thus proof relies heavily on 'softer evidence' (usually descriptions of harmful parent/child interactions) and on professional judgments which need to be conveyed in an organised way to illuminate the child's position and demonstrate significant emotional harm.

Key Points

- Significant harm is defined as ill treatment of the child and/or the impairment of the child's development which is attributable to the care given to the child, or likely to be given to him/her. Evidence of a parent's *intention* to harm the child is not required as part of the definition of significant harm.
- Evidence is provided through making links between harmful parental behaviour and the impact on the child, usually demonstrated by the child's presentation. Include, where relevant, a description of any parental difficulties e.g. drug and alcohol misuse, mental health difficulties, domestic violence, parent's history of abuse, and the impact this has on parent's/caretaker's ability to parent. Avoid broad descriptions but give detailed examples of parental behaviour and the effect on the child using records/observations from different situations and different people e.g. schools/ nurseries. A general principle for evidencing emotional harm is more information rather than less, including analysis.
- Providing evidence about the seriousness of witnessed parental behaviour **and** severity of the impact on the child are both important, but in extreme circumstances either of these aspects of abuse in isolation may be sufficient evidence.
- Evidence the persistent nature of the harm i.e. that the abusive interactions are repeated, harmful, sustained and pervasive. Severity is measured by the intensity and chronic nature of the maltreatment as well as the effect on the child. It's useful to convey that it is the chronic nature of the abuse that is so damaging, include the non maintenance of any progress made.
- Social workers need to be confident in their use of the emotional abuse assessment framework; the language, headings and how different aspects fit together. The assessment of emotional abuse if not completed as a separate assessment, needs to be incorporated into the core assessment. Clarity about the type of emotional harm at issue (using the Glaser framework in the Practice Guidance) along with a clear description may help the court appreciate the concerns.

- It is suggested that the assessment sheet for emotional abuse (appendix 2) is used **briefly** for home visit recording (alongside electronic recording) where there are concerns about emotional abuse, and in core groups to record progress and to help maintain a clear focus.
- Regular logs from other agencies can be useful evidence e.g. schools are in a key position to describe a child's presentation; frequent logs of how a child is doing in school, concerns arising from school's contact with parents, and observations of how parents are with their children on a daily basis. Well recorded and well articulated observations of the child, of family interaction, and the observations of other agencies are very important evidence. The parent and child should be observed together (at least intermittently) throughout the assessment and interventions.
- Strong narratives about particular situations highlighting emotionally abusive interactions are helpful. It is important that the court is helped to look at things from the child's perspective.
- It is important to evidence that workers have clearly explained to parents what is emotionally harmful about their behaviour and why, how they were told, and what they were told needs to change. Parents' response to this is also important.
- Do a chronology of the interventions tried, what aspects of the emotional abuse they were tailored to help with, the parents' response and the outcome.
- Certain children may need a higher standard of care and this can be presented in court. The child's level of resilience can be an important consideration but be mindful of the rule of optimism.
- Alternative explanations for a child's behaviour, in addition to emotional abuse don't preclude initiating proceedings, if the threshold for significant harm is likely to be met.

Family Life Cycle

Family life has its own rhythm and while this model has its roots in the idea of a nuclear family, the developmental challenges are shared in families with different structures. This model is based on that of Betty Carter & Monica McGoldrick(1999) and Carr (2006)

Central Concepts in Family Therapy

The stages of family life

Stage 1: Family of origin experiences

- During this phase the main tasks are:
 - Maintaining relationships with parents, siblings and peers *Completing education
 - Developing the foundations of a model of family life

Stage 2: Leaving home

- During this phase the main tasks are:
 - Differentiation of self from family of origin and parents and developing adult to adult relationships with parents *Developing intimate peer relationships.
 - Beginning work, developing work identity and financial independence.

Stage 3: Couple, Partnership stage

- During this phase the main tasks are:
 - Selecting partners
 - Developing a relationship
 - Deciding to establish own home with someone.

Stage 4: Childless couple stage

- During this phase the main tasks are:
 - Developing a way to live together both practically and emotionally
 - Adjusting relationships with families of origin and peers to include partner

Stage 5: Family with young children

- During this phase the main tasks are:
 - Realigning family system to make space for children
 - Adopting and developing parenting roles
 - Realigning relationships with families of origin to include parenting and grandparenting roles
 - Facilitating children to develop peer relationships

Stage 6. Family with adolescents

- During this phase the main tasks are:
 - Adjusting parent-child relationships to allow adolescents more autonomy
 - Adjusting family relationships to focus on midlife relationship and career issues
 - Taking on responsibility of caring for families of origin

Stage 7: Launching children

- During this phase the main tasks are:
 - Resolving midlife issues
 - Negotiating adult to adult relationships with children
 - Adjusting to living as a couple again
 - Adjusting to including in-laws and grandchildren within the family circle

- Dealing with disabilities and death in the family of origin

Stage 8: Later family life

- During this phase the main tasks are:
 - Coping with physiological decline in self and others
 - Adjusting to children taking a more central role in family maintenance
 - Valuing the wisdom and experience of the elderly
 - Dealing with loss of spouse and peers
 - Preparation for death, life review, reminiscence and integration

Goals of Family Functioning Across the Lifecycle

Extra stages in the family lifecycle entailed by separation or divorce & remarriage

Stage 1: Decision to separate/divorce

- During this phase the main tasks are:
 - Accepting one's own part in partnership failure

Stage 2: Planning separation

- During this phase the main tasks are:
 - Cooperatively developing a plan for custody of the children, visitation and finances.
 - Dealing with the response of the families of origin to the plan to separate.

Stage 3: Separation

- During this phase the main tasks are:
 - Mourning the loss of the intact family
 - Adjusting to the change in parent-child and parent-parent relationship
 - Avoiding letting partnership arguments interfere with parent-to-parent co-operation
 - Staying connected to the extended family
 - Managing doubts about separation and becoming committed to it

Stage 4: Post Separation/Divorce Period

- During this phase the main tasks are:
 - Maintaining flexible arrangements about custody, access and finances without detouring conflict through the children
 - Re-establishing peer relationships and a social network

Stage 5: Entering a New Relationship

- During this phase the main tasks are:
 - Completing emotional divorce from the previous relationship

Stage 6: Planning a new Partnership

- During this phase the main tasks are:
 - Planning for co-operative co-parental relationships with ex-partners
 - Planning to deal with children's loyalty conflicts involving natural and step-parents
 - Adjust to the widening of extended family

Stage 7: Establishing New Family

- During this phase the main tasks are:
 - Realigning relationships within the family to allow space for new members
 - Sharing memories and histories to allow for integration of all new members

Books

- Carr, A (2006) *The Handbook of Child and Adolescent Clinical Psychology*. Routledge. ISBN 1583918302
- Carter, B. & McGoldrick, M. (1999). *The Expanded Family Lifecycle. Individual Family and Social Perspectives (Third edition)*. Boston: Allyn & Bacon.