

Narratives of Neglect in Social Work with Children and Families: The Relationship between Voice and Narrative

Abstract

This article reports findings from a study, which sought to offer primacy to the voice of the child, using narrative approaches to encourage children and young people to share their lived experiences of neglect. Couched in a constructivist approach, this paper explores the relationship between the *voice* of the child and their *narrative* of neglect. Drawing on the notion of ‘family narrative’, discussion examines how children’s views are constructed and reconstructed through the process of telling. This research documents that whilst practitioners seek to present the authentic *voice* of the child, our understanding of ‘voice’ should be problematized to take account of the fact that it is mediated through a number of filters and lenses. By attending to the voice of the child in the context of their narrative, practitioners may move closer to understanding the lived experience of the individual by exploring feelings, motivations and the myriad of factors which may influence how and for what purpose voice is shared. Engagement with the voice of their child in the context of their narrative, facilitates the development of a social work meta-narrative to inform effective intervention.

Introduction:

In recent years, the *voice of the child* has become a ubiquitous term within the safeguarding arena; yet little is written about how the voice of the child is conceptualised, nor how practitioners synthesise and create meaning during and

following their interactions with children and young people (CYP). Likewise, whilst the literature documents how the voice of the child can be facilitated with approaches such as relationship-based practice, we know very little about the choices made by children about what to share and when. The discussion that follows seeks to explore how the voice of the child is constrained and facilitated within safeguarding practice, and the factors influencing their narrative of neglect.

Neglect and the Voice of the Child:

Neglect is the most common form of maltreatment in the England, accounting for almost half of children who are subject to a child protection plan (ONS, 2020). The deleterious impact of neglect is well documented, effecting the physical and cognitive development of children exposed to this pervasive form of harm (Stevenson, 2007). Significance is attached to seeking the voice of the child in cases of, given issues of definitional ambiguity (Horwath, 2007).

The importance ascribed to the *voice of the child* is reflected in contemporary legislation; in the UK, The Children Act 1989 and 2004 obligate practitioners to ascertain the child's wishes and feelings, and the UNCRC provides a persuasive mandate to ensure that children are involved in decisions concerning them. Moreover, the statutory guidance '*Working Together to Safeguard Children and their Families*' (2018), directs professionals when operationalising participation within the complex child protection system.

Whilst participation is clearly valued both nationally and internationally, the degree to which it is consistently and effectively achieved in practice is contentious. Despite

longstanding legislative provision, multiple failures to engage with the voice of vulnerable children have been documented. In a recent analysis of serious case reviews undertaken by Solem et al. (2020:9), there was limited evidence that children had been 'seen alone or seen frequently enough', as a consequence, their experiences were rendered invisible. Likewise, in research undertaken by Diaz et al. (2019), organisational pressures diluted meaningful participation with children in care.

Such research suggests that practitioners may be privy to a partial understanding of how neglect is conceptualised and experienced, limiting their ability to intervene effectively in the lives of children at risk. Whilst children may be best placed to provide an accurate account of their day-to-day lives, the barriers to disclosure are acute (Cossar et al. 2011).

Assessment in children's social care is the conduit by which to determine how social workers may respond in effective and appropriate ways to the unique set of circumstances CYP present. It is an exercise in the assimilation of information from which meaning can be inferred, based on professional interpretation. Assessments are an attempt to make sense of a collection of observations, narratives, reports and verbal exchanges. Yet, within this a focus on the child may be lost. Indeed, research indicates CYP can be marginalised by an assessment process which relies on self-reporting by parents and professional summations based on parental actions (Holland, 2010; OFSTED, 2011). Research indicates that parental problems can divert professional attention; parents are often seen as the primary client, the focus of concern and effort, and it is in fact their narratives which are foregrounded in the assessment process (Jones and Gupta, 1998; Holland, 2004). Consequently, the ability of a child to convey their

wishes, is not solely reliant on their developmental stage or willingness, but on the quality of interaction with the practitioner and the importance to which it is afforded. It is the responsibility of the practitioner to create the conditions within which the child's voice can be received, understood and acted upon (Revell, 2019).

What children *say* is only one dimension of what they actually mean (OFSTED, 2011). Likewise, behaviourally children may present in a manner so as not to alert professionals to the fact that something is wrong, or show very few external indicators of trauma and abuse. Indeed, Bridge Consultancy Service (1995) suggest that children who are considered emotionally damaged are prone to smile. This indicates the impact of neglect, further compounds children's ability to communicate with professionals. Whilst children may struggle to verbalise their feelings and emotions, practitioners may also struggle to read the behaviour of children whose presentation is incongruent, creating something of a double whammy. To make sense of the presentation and verbalisations of CYP, practitioners need to develop skill and competence in communicating which is underpinned by a sound understanding of child development, including the myriad of trauma responses (Revell, 2019). It is of fundamental importance that professionals attune to both what is said (voice), how children make sense of their situation (narrative) in addition to and what is unsaid.

Child neglect and the role of narrative:

Narrative approaches permeated professional disciplines from the 1960s onwards, privileging human interaction and relationship (Riessman and Quinney, 2005). Narrative is defined as 'retrospective meaning-making' through which the narrator orders events

and makes connections and interpretations of actions and consequences of themselves and others (Chase, 2005:656). Yet, narrative is polymorphous with the approaches to conveying narrative as diverse as the material contained therein. Narratives differ in length, the medium through which they are shared: oral, written, pictorial, and how they are imparted: interviews, visual displays, documents such as diaries, testimonies. Narratives may span a lifetime or talk to a specific moment or collection of moments. Research-wise, narrative has gained esteem as a means of privileging the depth and detail in an individual's life. Narratives transcend purely chronological accounts, providing a channel through which individuals can express emotion, reasoning and motivations (Fivush and Merrill, 2016).

The twentieth century was heralded as the age of the child, with a focus on children's rights and participation. There was a shift to situate CYP as a credible source of information, taking account of their observations, views, wants and priorities and recognising their agency (James and Prout, 1990). This approach has penetrated all aspects of modern childhood, including safeguarding. Chiming with calls from practice and research which implore social workers to engage with the unique and individual experiences of CYP, the use of narrative within child protection practice is persuasive; narrative privileges the uniqueness of human experiences rather than its common properties (Chase, 2005). Social workers engage with narratives variously, they are fundamental to engagement and assessment. Yet, rarely is the role of narrative acknowledged. Whether consciously or not, social workers play an active part in encouraging narrative exchanges during assessment visits and direct work, supporting children to reflect on their situation and to share their experience.

Research has documented the challenge of relaying the voice of the child within decision making forums. Whilst it is widely recognised that practitioners play a key role in interpreting the best interests of unborn or very young children (OFSTED, 2011), less acknowledged, is the degree to which professional interpretations predominate when they are seeking to represent the voice of CYP who *are* able to verbalise their views. For example, in a study undertaken by Bruce (2014) there was a notable lack of clarity about how the voice of child should be conveyed and whether it was in fact the child's authentic voice or a reflection of what the worker presupposed the child would say, if asked. Similarly, research undertaken by Sanders and Mace (2006), called for greater transparency as to professional assumptions, judgments, and interpretations when detailing the views of children within assessments and case notes. This challenge was also identified by Vibeke and Turney (2017:122) who likened professional judgement to a 'black box', suggesting that whilst both inputs (information) and outputs (assessments) are generally clear and visible, the 'internal processes' which link the two, lack transparency, and are not readily understood.

Research suggests children engage in co-operative narrative creation alongside family members from the time they learn to verbalise, with most children able to proficiently construct a coherent narrative by the time they commence school (Fivush and Merrill, 2016). Fivush (2008) draws on the concept of a *family narrative* to explore the ways in which autobiographical memories are created and re-created in the exchanges we share with others, as knowledge and beliefs evolve in 'space between people' (Hoffman, 1992:5). Whilst narratives can be autobiographical, their construction is rarely a lone

venture. Parents actively influence their children's understanding, reactions, and emotions through conversation (Martin et al., 2008).

The study outlined below endeavours to provide some illustrative examples of narrative construction relayed for a specific purpose by children living in the context of neglect, exploring the relationship between their narrative of neglect and their *authentic voice*.

Overview of the Study

The research was conducted in a local authority in England. Ethical approval for the research was granted by the Research Ethics Committee at the University of Hull. A sample of children (n=5) and parents (n=4) were identified by the host authority, from a larger number of families in receipt of services due to identified neglect. Social workers (n=5) and Family Support workers (n=3) formed part of the wider sample (See *Table 1. Child Participants*). The allocated social worker made the initial approach to each family, providing a leaflet outlining the research study. The social worker then sought consent to share the family's details with the researcher. Prospective participants were assured that they could refuse to take part in the research and this would bear no impact on the services they received. The researcher experienced many of the same barriers to recruitment experienced by social workers when navigating neglect cases, for example, difficulties in making contact and numerous failed visits. Ultimately, this limited the sample size.

In-depth, semi-structured interviews were conducted with all participants utilising narrative techniques, privileging the experiences of individuals by encouraging them to share their stories. This allowed participants to determine the direction of travel; in part,

they set the agenda. Michael and Daisy were interviewed in their own home, whilst the three younger children chose to be interviewed in school.

All CYP were invited to share an account of a typical day. Younger children, between the ages of 9 and 10 years old, opted to engage with craft-based paper tools drawing their micro-chronologies using a picture of a clock face. Interviews with older children, were, at their behest, conversation based, although the researcher elicited a verbal narrative with the use of invitational questions outlining a 'day in their life,' as advocated by Horwath (2013).

All children completed a consent form prior to the interview, supplementing parental consent. Viewing consent as an ongoing issue, each CYP was given a laminated 'stop/go' sign to use throughout. Participants used this tool to change topic or cease discussion altogether. As a previous social work practitioner, the researcher was well placed to undertake data collection with vulnerable people. Had participants become distressed or raised any unaddressed safeguarding concerns, these would have been passed on to the relevant authority, although this was never required.

Qualitative Analysis

All interviews were digitally-recorded and transcribed in full. Transcripts were analysed using Braun and Clarke's (2006) six-step approach to thematic analysis to scrutinise and manually code the data; namely familiarisation with the data, generating initial codes, searching for themes, reviewing themes, defining and narrowing themes, producing the report. This formed the basis for a conceptual framework based on the emerging themes

and patterns, capturing important meaning within the data. This paper is based upon one particular emergent theme: 'use of narrative and voice'.

Findings:

Here, the concept of 'family narrative' will be utilised to explore how the voice of the child is influenced by their narrative of neglect. Drawing on the work of Fivush (2008), family narrative is defined as the framework within which children make sense of their individual experiences, developed through discussions, interactions with, and key messages from, family members. Familial and cultural narratives are common to most kinship arrangements. For the most part they provide validating, supportive contexts for children to make sense of themselves and others. They are central in supporting individuals to understand their history, heritage, and family functioning (Martin et al, 2008). Yet, under the gaze of protective services, family narratives may be instituted by caregivers to serve a particular purpose. They can be influential in shaping what children choose to share in exchanges with social workers. The examples below illustrate occasions when family narrative was used explicitly by parents to dispel professional concern, therefore silencing children, and times when implicit messages were conveyed to children, shaping their understanding of why protective action was instigated.

Children's voices and Parental Narratives:

Use of narrative to deflect blame

The difficulties in identifying and evidencing neglect are well documented (Daniel, 2015). Unlike incident led forms of abuse, the indicators of relationship forms of harm

are less clear and subject to professional interpretation. Michael, aged 15, spoke eloquently about his experience of polyvictimisation, suffering multiple forms of abuse, and actively concealing the extent of physical harm and neglect throughout his childhood, under duress from his mother. Michael acknowledged that he suppressed concerns relating to parental substance misuse so it remained undetected:

'No one should see that...but it's my own fault...me and my sister kept it a secret, like we didn't know what would happen if we said anything...my mum used to say... 'don't tell anyone, just don't, because you will get into trouble, alright?' So, we didn't tell anyone.'

For Michael, the potential repercussions of further abuse and seeking to protect his younger sisters, prevented him from deviating from a family narrative, instituted to suppress professional concern by deflecting blame upon Michael himself. Retrospectively, Michael acknowledged the extent of the abuse and neglect he experienced:

'Payday...they would go out and get their stuff [drugs]...I would be just left with the girls and if they woke up and started crying...I was there for them'

'I never had clothes, I used to wear shoes what were...I was a size 9, I used to wear size 6, and if I sit like I am now, I curl my toes because I'm used to it...what I wore before, everything used to be ripped, massive holes in my knees, everything just used to be wrecked'.

When asked what promoted his eventual disclosure, Michael revealed the turning point:

'the way she was hurting me physically and mentally...she would tell me it was my fault, that my sisters left, because I was getting in trouble. That's when I got arrested, I just went off, because I thought I had nothing to live for really...she would get me into a corner and start punching me, slapping me, she bit me lots of times, scratched me, made me bleed, nussed me...'

Michael's comments illustrate that his *voice* – what he chose to share with his social worker, represented his mother's version of family functioning which portrayed his behaviour as the source of concern. In contrast, Michael's nonverbal presentation embodied a young person experiencing neglect; one who wore ill-fitting clothes and engaged in a range of risk-facing behaviours. It was his verbal exchanges which predominated, forming the basis for professional decision-making. He questioned why his social worker had not queried his presentation, despite potential triggers for concern. He implored practitioners to demonstrate a level of professional curiosity in similar situations:

'You wanna look out for these certain signs, what is actually going on? If they're keeping quiet and you think they are keeping quiet, you gotta notice. If they are wearing clothes that don't look right...stuff like that...I used to have bite marks all up my arm from my mum, hid...'

Such findings echo research undertaken by Solem et al, (2020) whereby professionals adopted the rule of optimism, and misread behaviour presented by CYP in the context of neglect.

Erin (aged 9) shared a narrative account of her contact with social workers, suggesting her understanding had been shaped, in part, by parental influence. She outlines here that her stepfather first told her of the concerns raised:

Erin: *[He] came to walk me home, he didn't mention it in school in case anyone overheard...we had been reported*

Erin's use of the word 'we' in this short segment is notable. It was replicated frequently throughout her future exchanges, as she conveyed the experiences of her collective family, rather than herself, as an individual. She continued:

'I remember when we got put on to social services for...someone reported us, we don't know who, they said we had no food in our fridge or our cupboard but when they came to look, it was full, we couldn't get no more in'. (emphasis added)

Erin's comments here suggest a family narrative which contested concerns raised in relation to a lack of food. As her interview continued, she touched upon additional concerns, notably accepting that the blame lay with her and her siblings, rather than parental culpability:

'the house was a bit messy, because we was younger, we used to play with toys and leave them out and then it used to get messy, or we was little and we didn't make the bed...there was clothes everywhere, toys, the bed covers was off the bed, um, sometimes the wall paper was ripped, because we used to, there was drawing on the wall...and the kitchen, cos sometimes we go through and we played with mud and we walked right through and there is all muddy things all over...'

Erin's commentary here contradicts with the case history shared by the social worker, indicating poor home conditions and parental failures to protect the children. In contrast, Erin took responsibility for failing to undertake chores, absolving her caregivers of responsibility. Whilst interviewing Erin's mother, Sophie, it was evident that she was fearful of the repercussions of statutory involvement, and had actively encouraged the children to work together to address concerns, as she outlines here:

'I was trying to initiate the kids, "look, this is what's going to happen". We need to work together and stay together as a positive family and not argue and fight'.

Sophie reported that her intention was to encourage the family to work together, fostering solidarity. However, there is an implicit message here about the consequences if improvements were not forthcoming; she feared that her children would be removed. Accordingly, the family narrative adopted by Erin was one of self/sibling blame and dismissal of social work concern. This extended to criticism of the social worker, again conveyed as a collective opinion:

'we used to have [Social worker], but she...we didn't all like her, so we made a complaint and we now have [social worker]'.

Common to Erin and Michael, is a lack of clarity in terms of their authentic voice, their distinct views; although for Michael at least, he was able to express this eventually, when the ramifications of doing so felt less acute.

Research has suggested that the 'voice of the family,' is a neglected aspect of safeguarding work (Sidebotham et al., 2016:153); yet here we see that family narratives can in fact overshadow the views of CYP, or at least heavily influence the construction

of their narrative to serve a specific purpose. For Michael and Erin, their voices had been eclipsed by a family narrative which served to render their individual experiences invisible.

Use of family narrative to influence decision-making:

Within some of the narratives shared, parental influence was made explicit in the choice of language and expression adopted by CYP. The interviews conducted with siblings Harrison (aged 9) and Sarah (aged 10), suggest use of language and an understanding of parental motivations for action, which may exceed their developmental age and comprehension. Here, Sarah outlines the reason why she moved to live with her father:

‘My dad got told by the Social Worker...because I was riding my bike with my friend and apparently, they’re all moaning because apparently, I almost got run over...and my mum asked her friend to look after me on the road, and then my mum went inside because she was cooking tea, but my dad kind of said that I almost got run over and it was my mum’s fault...apparently she didn’t treat us properly’

Two areas of interest emerge from the comments made by Sarah. Firstly, her use of the word ‘apparently’, which could indicate discord with the inference that her mother failed to protect her or, may suggest that she is espousing the views of another. Secondly, there is a protective defense of her mother, as she deflects blame for the ‘near miss’ on to a family friend. Notably, Sarah does not offer a first-hand account of the alleged incident; providing instead, another’s interpretations of what happened. Throughout her interview, Sarah sought to defend her mother, situating her narrative

accordingly. Such findings chime with research by Och and Taylor (1992:301), which outlined that it is mothers who are instrumental in introducing narratives to their children, directing 'narrative topic and timing'. This is particularly so for teenagers, who are more likely to replicate the content and structure of maternal narratives (Fivush et al., 2010). However, in contrast with Sarah, Harrison's narrative appeared to lean toward a father-favouring stance, as we see here when he was asked why he had moved to live with his father:

'Our Mum didn't supervise us when I cut my head open...we are supervised at our dad's but not at our mum's...mum bosses us about sometimes...she tells us sometimes what to do, but my dad don't...our mum shouts at us, but dad don't'.

Here, Harrison is drawing on adult terminology and concepts in relation to 'supervision', potentially imparted by his parents or the professional network. As with his sister, Harrison is attempting to make sense of decisions outwith his control and influence. Harrison draws on adult terminology and ideas in the construction of his narrative, yet he accommodates these into his own experiences, owning his observations. Harrison was vocal in his desire to remain with his father, whilst acknowledging this view was not shared by all of his siblings, as explained here:

'My brother lied to the social worker...he said that dad got him by the neck and swung him around, but dad didn't...so he can go and live with mum...because he thinks it's better at mum's than dad's...I like it at dad's...because we get supervised properly and I haven't cut my head open once yet'

This segment demonstrates clear conflict in the narrative of the siblings who have shared at least some of the same experiences. Here we see a complex interplay of differing views, opinions, needs and desires, with the three children expressing opposing accounts of the concerns, in order to influence decision-making by professionals. Whilst much attention has been given to the influence of parents on narrative formation, research also highlights the centrality of siblings, as part of a wider network in which children are embedded (Davies, 2015). Consequently, a broader understanding of the family situation is required to determine what the voice of each child is conveying from their respective subject position, and what their narrative and voice, individually and combined, tell us about family functioning, relationships, and levels of concern specific to each child. This serves as a reminder of the nuanced way in which child neglect may be experienced by children, even when they reside in the same family group (Doyle and Timms, 2014).

Adolescent Voices and Personal Narratives

Described above are examples of narrative construction which have been conveyed to deflect blame and influence decision making, and voice which has been heavily influenced by parental agendas; for Michael, explicitly so. This is not to negate that children are active participants with agency, but to recognise that the child's voice 'manifests itself in the relationship with others' (Murrells, 2013:257). Within the interviews with Michael and Daisy (aged 15), there was indeed evidence of independent subject positions, and use of narrative to create meaningful change and protection for

others; examples, where the voices of young people were liberated. This appeared to coincide with adolescent maturity.

Daisy and her twin sister had spent much of their younger life in their mother's care. After several years of chronic neglect, Daisy finally disclosed to professionals. Daisy's sister blamed her sibling for the protective action which ensued:

'She keeps bringing it up. I am the one who grassed. She is like "you're the one at fault, we have a social worker because you are the one that grassed". I had to tell, when I was worried, I had to tell my social worker about [sister], because she was like "don't tell anyone", when she got [sexually assaulted] ...I had to...'

Allnock and Miller (2013) cite the protection of others a key motivational factor driving disclosures made by children. It was common to both Daisy and Michael's narrative. Whilst Michael's eventual disclosure was driven by a desire to protect his siblings, the narrative he shared with me was motivated by a need to help young people in a similar position:

'I don't mind telling people about it, getting it off my chest really...if they want to learn about it...I have been through this experience, I don't mind telling people, if it helps others'.

For Michael, there was clear ownership, an authoring of his narrative and use of voice to encourage and reassure others to seek help:

'Tell the truth, what is happening in their life, I know it will be hard for them. I know it will be hard for their family, but in the end, it is helping you'

Michael's shift to author and own his narrative resonates with research undertaken by Fivush (2008), who identified adolescence as a time when individuals start to produce overarching life narratives, with increased complexity, sophistication and insight. In doing so, Michael moved from an identity of victim to one of survivor.

Discussion:

Employment of narrative approaches in social work has clear benefit in the process assessment and understanding. The act of narration encourages individuals to develop their own voice, make sense of their situation and reflect on the actions of those around them. As the active component of narrative, the child's voice can offer a window into their subject position, their lived experience (Chase, 2005).

Where CYP subscribe to a collective family narrative based on shared experiences and mutual understanding, they show higher levels of well-being, identity formation, self-regulation and more positive behaviour overall, particularly in the face of adversity (Fivush and Merrill, 2016; Bohanek et al., 2008). However, as illustrated here, under the gaze of children's social care, family narratives can be used subversively to silence children, influence decision-making, and dispel or displace professional concern. In Michael's example, threats were made to prevent him from deviating from a maternal narrative. As a consequence, professionals working with the family formulated an optimistic view of family functioning and in part, tolerated levels of physical neglect. In effect, professionals formulated a *narrative of the family*, as one struggling to cope, besieged by poverty (Revell, 2019). Whilst Michael's narrative was crafted to dispel concern and accept blame, his presentation, nonverbal communications and behaviour

spoke to an embodiment of neglect which required professional observation and professional curiosity to decode.

A myriad of factors may prevent or discourage CYP from sharing a narrative of neglect. Revell (2019) outlines that protectiveness towards parents, the awareness of potential ramifications and a lack of understanding about neglect, are important determinants. Consequently, the existence of neglect may need to be 'uncovered', rather than conveyed through disclosure (Raws, 2019). Verbal communications provide only a partial account of children's' views, wishes and feelings, and are subjective by their very nature. Moreover, Bamberg and McCable (1998) remind us that the act of telling can serve many purposes: to remember, 'argue, justify, persuade, engage, entertain, and even mislead the audience' (Riessman and Quinney, 2005:395). When seeking the views of CYP therefore, significance should also be attached to observing their behaviour and presentation, including somatic symptoms, posture and other non-verbal or physical indicators. Without conscious reflection on what is seen and heard, professionals may minimise or fail to acknowledge manifestations of abuse that are not directly verbalised.

Whilst 'the voice of the child' has become a ubiquitous term in safeguarding policy and practice, less attention has been given to how practitioners ascertain the voice of the child, how children construct a narrative of their experiences and what happens when this is subjected to a layer of meaning-making. *Ascertaining* the voice of the child is, in itself, not enough; analysis and interpretation is required to reveal the meaning behind what children choose to share. As outlined by Ochberg (1996) we may only see this if we are willing to look beyond what we are told in so many words. In effect, practitioners

need to undertake *double listening*, to uncover the multiple stories our exchanges with others may convey; the dominant narrative and those which may be hidden from view (Meyer, 2015).

Just as Gubrium and Holstein (2002:23) warn researchers against the romantic assumption that narrators reveal their authentic selves and speak in their 'own' voices', practitioners must also be cognisant that children's voices are mediated through a number of different lenses. So that they may find that a verbal exchange with a child could in fact represent the views of several individuals (Chase, 2005). It is for the social worker to make sense of the narrative which is shared, exploring the context in which it is conveyed, disentangling potential influences and developing an understanding of the purpose that a chosen narrative may serve for that individual or family. As social workers synthesise and analyse information, they produce a meta-narrative of neglect, drawing on numerous sources of knowledge (illustrated in *Figure 1*), reflecting the complex drivers and conditions within which information is shared. Only then, may we move closer to ascertaining the child's authentic *voice*.

Conclusion

Family narratives can and should provide validating and supportive contexts for children to understand their family history and current family functioning. However, in cases of child neglect, where parents have little investment in fostering a child's self-esteem, growth and identity, children may be bound by a family narrative which distorts professional perceptions of family functioning. The intention is not to help children

make sense of their experiences, but institute an understanding of events, geared towards parental agendas.

Social workers play a pivotal role in making the child visible; yet they must decode the child's narrative, questioning what children choose to share, within the context in which it is conveyed. Narrative is a central component of the 'voice of the child,' yet verbal contributions alone will not suffice. Narrative, behavior, and physical presentation combined move us closer to understanding the lived experience of those exposed to neglect, and to making the most appropriate decisions to ensure they are safeguarded. If we fail to problematise the voice of the child, we run the risk that speaking with a child becomes a surface task to fulfil.

Limitations:

The CYP were a small proportion of the overall sample. As is common to practice, the researcher faced challenges in securing interviews with children and navigating parental gatekeepers. Whilst the narratives shared may be idiosyncratic to each individual, they contribute to a broader understanding of the experiences of abused and neglected children, who for so long have been silenced. These voices provide a window into the lived experience of neglected children and as such, their contributions are invaluable.

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Table 1. Child Participants

Name (Pseudonym)	Age	Gender	Status
Michael	15	Male	Child Looked After
Daisy	15	Female	Child Looked After
Sarah	10	Female	Child in need of protection
Harrison	9	Male	Child in need of protection
Erin	9	Female	Child in Need