

Caregivers Lack Parenting Knowledge, Skills, and/or Motivation Necessary to Assure a Child's Safety

Introduction

Many safety assessment models do not contain this threat concerned with knowledge, skill or motivation necessary to assure a child's protection. It is true that when the threat involves a lack of knowledge, skill or motivation that other threats are usually apparent, such as the caregivers are not providing basic care or are not providing adequate supervision or are experiencing debilitating mental health problems. So why have this as a threat?

There are two reasons that including this as a threat in safety assessment is important. Remember that safety threats are assessed and identified in order to know whether safety intervention (i.e., safety planning and safety management) is necessary and at what level. When applicable, this threat provides a more specific rendering of exactly what is threatening a child's safety. For instance, consider the case in which the mother does not know how to provide basic care for her infant. The absence of the basic care exists as a danger to the infant. As we think about safety intervention, however, isn't it important to know that the absence of basic care is associated with the mother's lack of knowledge? Safety intervention will be more effective by taking that reality into account.

The application of this threat during safety assessment also provides an important conclusion about certain aspects of the caregiver's protective capacities that may be diminished. You may remember from previous articles that caregiver protective capacities are contained within three domains: cognitive, behavior and emotion. Notably knowledge, skill and motivation match up or are associated or contained within those areas of caregiver functioning.

So we think that this impending danger threat is worth including in safety assessment because it provides a way of more fully understanding the dynamics occurring within the home that combine to threaten a child's safety.

Knowledge, Skill and/or Motivation

This threat allows us to draw conclusions about three separate areas of caregiver functioning and also allows us to indicate the existence of all three as comprising the threat to safety.

A lack of knowledge refers to the absence or limited essential knowledge that a caregiver needs to assure a child's safety given the child's vulnerability, the child's needs and conditions, and circumstances present in the home or family at the time of the safety assessment. So, we emphasize *unique* knowledge—the kind of knowledge that is necessary given the exact situation that endangers a child's safety. One of our staff once had a case in which a limited, emotionally disturbed mom was an adequate parent for her children until they reached toddler stage. Then she simply didn't know what to do to care for them or protect them. She didn't have the knowledge—and subsequently the skill—to protect a child who began to express his independence and became highly mobile. This example demonstrates the problem of a lack of knowledge related to child development and child management.

But as we think of *unique* knowledge, it's important to widen our perspective to consider any kind of knowledge that a caregiver must possess in order to perform her protective responsibilities. The knowledge could be related to basic care of the child, management of special needs or demands of the child, home care and management, neighborhood or environment management, management of people who frequent the home, and so forth. The idea is that a caregiver's knowledge must be sufficient and relevant to provide for a safe environment and basic care, to be alert to threats to a child safety, and to know what action is necessary to avert danger or manage it.

A lack of skills refers to ability, aptitude and even competence associated with specific behavior required to assure a child is protected. The skill may be strictly associated with caregiving or parenting. A parent may not be able to manage a child, may not be sufficiently proficient to manage the home situation, or may not possess the necessary physical or cognitive capacity to perform a skill. An example is the case of a physically disabled person who is unable to physically perform skills necessary to supervise a four-year-old. The important assessment concern is whether the person actually takes appropriate action with desired results. Skill includes not only the action taken but the timeliness of the action and the proficiency of the behavior associated with the action taken. Typically, we think of these skills as fundamental so that includes providing basic essential care, maintaining a safe environment, employing effective and acceptable child management skills, and assuring that the child is safe within his larger environment (e.g., outside the home, neighborhood, within the family and social network).

Motivation as referred to here is quite basic and also highly personally related to the emotional state and well-being of the caregiver. This is a very serious dynamic. A lack of motivation concerned with assuring a child is protected may be associated with deep-seated feelings a person has about being a parent, with serious feelings of preoccupation with one's own needs, with seriously distorted perceptions or emotions about the child, or as a symptom of a disturbed parent-child relationship. The point here is, that regardless of what explains the lack of motivation, the caregiver does not possess the enthusiasm, interest or drive to make certain that his child is protected. In fact, the caregiver doesn't feel sufficient responsibility which might translate into motivation influenced by a sense of obligation or moral integrity to make sure that the child's protective needs are met.

Immature Caregivers

This threat is often apparent in cases that involve teenage parents or those that are older yet remain immature. These are caregivers who developmentally are still “children” themselves. Their needs are driven by their immaturity; they are unable to set aside their own needs for others, in particular children. They have no experience in parenting. So, they lack knowledge essential to providing basic care and being protective. Their lack of experience means they have not developed the necessary skills to perform their protective duties. Such caregivers are motivated primarily by their own needs which may be concerned with their self-image, self-gratification, or peer-related needs and social experiences. Notably immature caregivers (young, inexperienced parents) may be products of ineffective parenting themselves. Thus they do not possess strong or clear role models which reinforce the importance of the parenting role, the emotional connections with the child, and the skill to behave effectively as a parent. In fact, it can be that some immature caregivers actually possess very distorted perceptions and understanding of the parenting role and responsibility based on their own experience with their parents.

Sometimes the immature caregiver is a caring, motivated young person who simply is faced with a developmental crisis—having become a parent before he or she was intellectually, socially or emotionally prepared for the responsibility. This can include very basic limitations related to knowledge of child development, the needs of infants or young children, and skills necessary to provide basic care.

Developmentally-Challenged Caregivers

Sometimes cases involve developmentally-challenged adults who do not possess the intellectual capacity to perform basic duties, basic care and protective behavior necessary to assure child safety. Assessment is necessary with these caregivers to ascertain what their limits are and where their judgment and capacity might be in question concerning protectiveness. Developmentally-

challenged caregivers may not possess necessary knowledge or be able to call forth knowledge appropriate to the demands of a caregiving situation. These caregivers sometimes become preoccupied, do not remember, lose track of time, or experience other difficulties related to their limitations that reduce their ability to provide necessary care when it is needed. Developmentally-challenged caregivers may be highly motivated, but their motivation may vary in accordance with other daily stimulation that influences them.

Attachment and Bonding

Some parents do not possess deep, compelling feelings for their children. They lack feelings of affection or attachment with their children. Such caregivers may have the necessary knowledge to protect their children and the skill to do so as well. But they may not be motivated as parents in general or specifically motivated to assure their children are protected because they are not emotionally involved with their children. Because they are not attached to their children, they are detached which means they are more likely to pay little or no attention or even avoid their children. They will not be sensitive to their children's vulnerability or dependence. They will not be alert to danger or the potential for their children to suffer.

Among these kinds of caregivers are the new moms who are experiencing postpartum depression. While this is usually situational and transitional, it is important for us to be mindful that while it is occurring that these moms can experience the lack of attachment which can result in life-threatening neglect or bizarre and severe outcomes resulting from a mom's delusions or mental disturbances. This is a condition that should never be minimized with respect to child safety.

Emotionally Stressed and Disturbed

In the August 2007 article, we wrote about caregivers who are out of control. We emphasized that the out-of-control threat was associated with caregivers whose mental health issues were such that they were not able to manage their feelings and behavior.

So, here is an example in which you may assess a case in which an emotional disturbance exists so that the caregiver is out of control and also is not motivated to protect her children. We want to emphasize that there are caregivers who are experiencing increased stress or a crisis which has immobilized them emotionally and reduced their interest, motivation and commitment to care for and protect their children.

Self-Image

Some people do not have an image of themselves as caregivers and/or someone for others to be dependent upon—even if it is their own children. For some, being a parent doesn't fit their self-image. This is not so much a conscious thing as simply the manner in which the person views themselves and their priorities. This is a very serious issue in safety assessment. It may involve a natural parent who even says, "I never wanted to be a mother." It may involve a non related caregiver such as a step-father or live-in companion. The important point is that when a person in a caregiving role has a self-image that does not include the role of parent then there is no inherent basis for motivation to care for a child, to be sensitive to a child's needs or vulnerabilities, or to be concerned about a child's suffering or safety.

Definition and Elaboration

This threat is concerned with knowledge, skill and motivation related to basic parenting that directly affects a child's safety. Stated simply, the caregiver doesn't

have knowledge of basic care necessary to assure child safety or can't perform behavior associated with providing basic care necessary to assure child safety or isn't interested in or motivated enough to provide the basic care necessary to assure child safety. It is important to make the distinction that we are not discussing knowledge, skill or motivation that is associated with being a "good parent." We are concerned only with that which contributes to or is associated with keeping a child safe. It is crucial that this threat be understood as being associated with knowledge, skill and motivation that is essential to contributing to assuring that a child is safe. We all agree that there is a lot of knowledge and skill along with motivation that comprises being a good parent. That's not what we're discussing here.

This threat includes caregivers lacking the basic knowledge or skills which prevent them from meeting the child's basic needs that are associated with child safety or the lack of motivation resulting in the caregivers abdicating their role to meet basic needs or failing to adequately perform the parental role to meet the child's basic needs associated with safety. This inability and/or unwillingness to meet basic needs creates child safety concerns. Basic needs (and care) are associated with food, clothing, shelter, supervision, medical care, essential physical hygiene and management of the child's environment.

Application of the Safety Threshold Criteria

When is this family condition out of control? Caregivers who do not know and understand how to provide the most basic care such as feeding infants, hygiene care, or immediate supervision can be judged to be out of control. The lack of knowledge is out of control when it is consistent with caregiver capacity problems such as serious ignorance, intellectual limitations, social deprivation, and so forth. Remember that "out of control" can be concluded when there is nothing within the family or home situation which can compensate for the threat—the lack of knowledge.

Skill, on the other hand, must be considered differently than knowledge. People can know things but not be performing or just don't perform. The lack of both action and aptitude must be clear. The basis for ineptness may vary. Caregivers may be hampered by cognitive, social or emotional influences.

Motivation is yet another matter. People may be very capable, have plenty of pertinent knowledge, but simply don't care or can't generate sufficient energy to act. Remember, any of these are out of control by virtue of the behavior of the caregiver and the absence of any controls internal to the family.

The lack of the essential or unique knowledge and skill (as we've been discussing) can result in the development or occurrence of circumstances which can have a severe effect on a child. For instance, you can readily see the potential severe effect that could occur because a limited caregiver does not know how to properly feed a newborn. Likewise, the lack of motivation resulting in a caregiver avoiding contact with a child or abdicating necessary protective care and responsibilities can have severe results for a vulnerable child, such as in a failure-to-thrive child.

The safety threshold requires us to also consider whether a threat is imminent—certain to occur and have effects—and whether a threat is observable and specific. Your safety assessment must be sufficiently rigorous to describe in detail what essential and *unique* knowledge and skill is deficient and to connect or relate the deficiency to specific needs and circumstances of a vulnerable child. You must be able to explain in detailed ways the nature of the caregiver's motivation with sufficient examples and demonstrations apparent to you through your information collection. Your analysis must draw logical connections and conclusions about the certainty that these deficiencies produce impending danger which is associated with the absence of basic care to assure a child's safety.

Examples of the Threat

Here are some more examples of this threat beyond those mentioned above:

- Caregiver's intellectual capacities affect judgment and/or knowledge in ways that prevent the provision of adequate basic care.
- Young or intellectually-limited caregivers have little or no knowledge of a child's needs and capacity.
- Caregiver's expectations of the child far exceed the child's capacity thereby placing the child in unsafe situations.
- Caregiver does not know what basic care is or how to provide it (e.g., how to feed or diaper or how to protect or supervise according to the child's age).
- Caregivers' parenting skills are exceeded by a child's special needs and demands in ways that affect safety.
- Caregiver's knowledge and skills are adequate for some children's ages and development, but not for others (e.g., able to care for an infant, but cannot control a toddler).
- Caregiver does not want to be a parent and does not perform the role, particularly in terms of basic needs.
- Caregiver is averse to parenting and does not provide basic needs.
- Caregiver avoids parenting and basic care responsibilities.
- Caregiver allows others to parent or provide care to the child without concern for the other person's ability or capacity (whether known or unknown).
- Caregiver does not know or does not apply basic safety measures (e.g., keeping medications, sharp objects, or household cleaners out of reach of small children).
- Caregivers place their own needs above the children's needs, thereby affecting the children's safety.

- Caregivers do not believe the children's disclosure of abuse/neglect even when there is a preponderance of evidence, and this affects the children's safety.
- Caregiver's knowledge, skill or motivation is not sufficient to assess, address and manage threats that might exist within the child's environment in the home or outside the home.
- Caregiver is not attached or bonded with a child and does not hold deep feelings for the child; is not involved with the child.
- Caregiver does not want to be a parent.
- Caregiver does not view themselves as a child's caregiver, does not identify with the child, has little or no interest in caring for or protecting the child.
- The caregiver is developmentally unprepared to be a parent.