



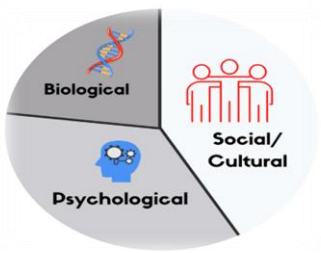
Safeguarding news



Happy August to all!

Your Safeguarding newsletter this month will focus on the following topics and provide a list of appropriate support services available both locally and Nationally:

- Eating Disorders
- Self-neglect
- Neglect



What Causes Eating Disorders?

There are many genetic, environmental, and sociological factors that contribute to eating disorder development.

Biological Factors

Biological risk factors for eating disorders shows that Individuals that have a family history of mental illness diagnoses are more likely to experience mental illness themselves. Even if the predisposed mental illness is not an eating disorder, eating disorders commonly co-occur with diagnoses such as depression, anxiety, or substance use issues, to name a few.

An individual's medical history can also increase eating disorder risk, as research indicates that certain illnesses, such as Type 1 Diabetes, are associated with increased risk for eating disorder development.

Psychological Factors

Psychological factors for eating disorders include a co-occurring diagnosis of another disorder, as mentioned above.

Additionally, there are specific personality traits that research indicates can increase the likelihood of developing an eating disorder, such as perfectionism, low self-worth, distorted body image, or impulsivity.

Experiencing a past or present trauma also increases one's likelihood of developing a disordered eating belief or pattern.

Environmental Factors

Environmental factors include the dynamics that surround an individual.

This can include family dynamics, as family-related beliefs and discussions around weight, food, and self-view are shown to be associated with eating disorder diagnoses.

The social views one absorbs via peers, social media, television/movies, and consumer culture are also related to the increased development of eating disorders.

What is an eating disorder?



An eating disorder is when someone's relationship or attitude towards food becomes unhealthy. It can take over their life and make them unwell, mentally and physically.

Eating disorders can involve eating too much, eating too little or becoming obsessed with their body weight or shape.

Eating disorders are serious mental health illnesses.

Anorexia Nervosa has the highest mortality rate of any mental health illness in the UK among adolescents.

What are the different types of eating disorders?

• Anorexia Nervosa

Trying to keep your weight as low as possible by not eating enough food, excessively exercising or both.

• Bulimia

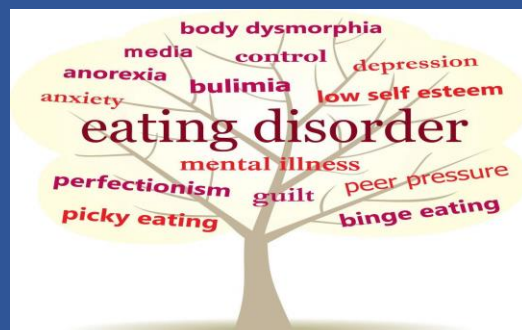
Binging on large amounts of food in a short amount of time and then deliberately making yourself sick, using laxatives, restricting what you eat after the binge or excessively exercising to stop yourself gaining weight.

• Binge eating disorder

Eating large amounts of food in a short space of time, followed by feelings of guilt or shame.

• Other Specified feeding or eating disorder (OSFED)

when symptoms do not exactly match those of anorexia, bulimia or binge eating disorder.



Eating Disorder Symptoms

Eating disorders manifest in varying ways as they are complicated disorders that impact psychological, physical, and sociological health. Determining whether someone is struggling with an eating disorder is not an exact science due to the many manifestations of these disorders, but, there are some symptoms that can present as warning signs.

Emotional & Behavioural Symptoms

Below are a few emotional and behavioral symptoms that may indicate an individual is struggling with eating disorder beliefs or behaviors.

- Beliefs/patterns/choices that indicate a focus on weight loss, dieting, food rules, or eating patterns.
- Extreme mood swings.
- Difficulty
- Checking in the mirror often.
- Withdrawing from others decreased socialising, especially when food is involved.
- Presenting as hyper-focused on weight, food, calories, nutritional content of food.
- Eating alone or hiding food.
- Skipping meals.
- Intense fear of gaining weight.
- Distorted body image.
- Tangential thought process and difficulty concentrating.

Physical Warning Signs of an Eating Disorder

A starved brain and body cannot function optimally. Therefore, an individual struggling with an eating disorder will present with at least some, if not all, of the physical signs of an eating disorder below:

- Weight fluctuations (both up and down) that occur rapidly.
- Severe constipation.
- Low blood pressure
- Slow breathing and pulse.
- Lethargy, sluggishness, or consistent reports of feeling tired.
- Brittle hair and nails.
- Dry, yellowish skin.
- Loss of menstrual cycle (amenorrhea).
- Growth of soft hair all over body (lanugo).
- Stomach/gastrointestinal issues.
- Dizziness/fainting/lightheadedness.
- Muscle weakness.
- Impaired immune system functioning.

How to get help

- Visit your GP, who will be able to refer you for psychological therapies and discuss treatment options with you.
- Find local services near you for eating disorders through the [HUB OF HOPE](#)
- If you are looking for help for someone else, the charity [BEAT](#) have a comprehensive guide on how to approach the situation.
- If you or someone you know is in crisis, it's important to get help fast. If you think that you or someone you know is in danger, call 999.

- [Treatments for Anorexia](#)
- [Treatment for Bulimia](#)
- [Treatment for Binge eating](#)



How to report a concern



Speak to a member of staff in college or the Day Opportunities Hub.



Look for the 'Bee safe' symbol, these are safe places to talk about safeguarding. Designated people also wear a yellow Bee lanyard.



Phone 01733 747474 after 5pm or at weekends 01733 234724.

Eating Disorder



Eating disorders are complicated disorders and vary from person to person. However, there are some overall eating disorder facts that research has been able to clearly identify regardless of the individual.

- Eating disorders do not discriminate and are observed in “people of all ages, racial/ethnic backgrounds, body weights, and genders
- Eating disorder onset typically occurs in adolescence or young adulthood but is not limited to these life stages.
- There is no one distinct cause of eating disorders. Research has found a number of “genetic, biological, behavioral, psychological, and social factors” that can increase the risk of eating disorder development.
- Eating disorders can be life-threatening and have the highest mortality rate of any mental illness.
- While eating disorders do not have a “miracle cure,” there are numerous evidence-based practices proven to support eating disorder recovery.



Introduction to NEGLECT

In the context of caregiving, neglect is a form of abuse and ongoing failure, where a person who is responsible for caring for someone who is unable to care for themselves, fails to do so. It can be a result of carelessness, indifference, or unwillingness and abuse.

Neglect may include the failure to provide sufficient supervision, nourishment, or medical care, or the failure to fulfill other needs for which the child / vulnerable adult cannot provide themselves.

Types of neglect

Neglect can be a lot of different things, which can make it hard to spot, broadly speaking, there are 4 types of neglect:

- **Physical neglect**
Basic needs, such as food, clothing or shelter, are not met or they aren't properly supervised or kept safe.
- **Educational neglect**
A parent doesn't ensure their child is given an education.
- **Emotional neglect**
The individual doesn't get the nurture and stimulation they need. This could be through ignoring, humiliating, intimidating or isolating them.
- **Medical neglect**
An individual isn't given proper health care. This includes dental care and refusing or ignoring medical recommendations.

Neglect can cause many long-term side effects, including physical injuries, **developmental trauma disorder**, low **self-esteem**, attention disorders, violent behavior, and even death.

The physical signs of neglect in children may include:

- constant hunger, sometimes stealing food from others.
- constantly dirty or 'smelly'
- loss of weight, or being constantly underweight
- inappropriate clothing for the conditions.

Changes in behaviors which can also indicate neglect may include:

- complaining of being tired all the time.
- not requesting medical assistance and/or failing to attend appointments
- having few friends



Effects of childhood neglect

Neglect changes childhood. Children who've been neglected might experience short-term and long-term effects. These can include:

- Problems with brain development
- Taking risks, like running away from home, using drugs and alcohol, or breaking the law
- Getting into dangerous relationships
- Difficulty with relationships later in life, including with their own children.
- A higher chance of having **mental health problems**, including depression.



Examples of Neglect abuse in vulnerable adults may include:

- Regularly leaving the person unattended for long periods or abandoning them
- Lack of care including food, warmth, medication, and access to medical treatment
- Failing to attend to physical needs such as toileting, dressing, and washing
- Failing to provide access to appropriate health, social care or education services

Signs and symptoms of neglect abuse in vulnerable adults can include:

- Poor physical condition of the person such as ulcers, bedsores etc.
- The person's clothing and body seem to be dirty /scruffy and neglected.
- Failure to give prescribed medication or get appropriate medical care.
- Sudden weight loss – this can indicate dehydration or malnutrition.
- Carers reluctant to accept contact from health or social care professionals.
- Inappropriate or inadequate clothing or being kept in night clothes during the day.
- Sensory deprivation - not allowed to have access to glasses, hearing aids or other communication aids.
- The person thought to be at risk has no method of calling for assistance.
- Discontent expressed by the resident
- Isolation
- An unclean environment
- Bruises that don't have a reasonable cause, or repeated bruises in odd areas such as around wrists or on shoulders
- Depression and/or anxiety



Do you struggle to put yourself first?

When we prioritise the needs of everyone else above our own we neglect self-care and actually do a dis-service to those we care about the most.

It all starts with Self-Care

If I care for me, then I can care for you.

If I care for me, then I can teach you how to better care for yourself.

If you care for you, then you can teach others how to treat you.

If you care for you, then you give others permission to care for themselves.

If others care for themselves, then they start to care for each other.

If others care for each other, then they start to care for the planet.

If we all care for ourselves, each other and our planet, then we create the kind of change that builds a positive future for our children.

It all starts with self-care.

JAYNE MORRIS

Reach out for support

Find a range of resources and signposting to support for adults at:

www.peterborough.gov.uk/healthcare/adult-social-care

Find out how to help - the charity Mind have published resources that explain hoarding, possible causes and how to access treatment and support for yourself or friends and family – find out more at

➤ www.mind.org.uk

Raise awareness about this secretive condition - visit HELPFORHOARDERSUK for information, support and advice aimed at hoarders, and their loved ones / carers.

➤ [Animal hoarding - recognise the signs](#)

The Cambridgeshire and Peterborough Safeguarding Partnership Board have published Multi-Agency Policies and Procedures to [Support People who Self-Neglect](#) and for [Working with People with Hoarding Behaviours](#)

Published alongside the procedures is a [Resource Pack](#) which includes:

- [Self-Neglect Risk Indicator Assessment Tool](#)
- [Self-Neglect Assessment of Need and Risk](#)
- [The Clutter Image Rating Tool \(CIRT\)](#)
- [Hoarding Risk Assessment Tool](#)

Check out this video on responding to self-neglect! <https://youtu.be/ZEXrczADeKo>

Self-neglect – What is it?

The Care Act Guidance 2014 recognises self-neglect as a category of abuse and neglect. This means that people who self-neglect may now be supported by safeguarding adult approaches, including Making Safeguarding Personal, as well as receiving additional support from practitioners.

Self-neglect covers a wide range of behaviors which in general means someone is not caring for their own personal hygiene, health, safety, or surroundings. (It can also include hoarding behavior, although not always. Hoarding can involve specific things, very general items, or animals.)

It isn't always easy to determine a root cause for neglect, but it can be a result of:

- a person's brain injury, dementia, or other mental health disorder.
- obsessive compulsive disorder or hoarding disorder.
- Unmet care and support needs
- An inability to maintain own self-care and household chores.
- Chronic use of substances and/or alcohol impacting on their functioning
- Having parents who hoarded (a learnt behaviour)
- Childhood neglect, trauma, or an adverse experience
- The impact of abuse or neglect domestic violence and abuse
- Life changing events such as loss of a job, social status, accommodation, bereavement
- The loss of a strongly held value system
- Reduced independence due to an accident, trauma, major illness, or the onset of frailty.
- Physical illness which influences abilities, energy levels, attention span, organisational skills or motivation.

Chronic self-neglect and/or hoarding is likely to have developed over many years, and it may be considered a safeguarding concern at the point:

- where the person with care and support needs can no longer control their behaviour, so they cannot protect themselves.
- where there is a defined high risk of harm to the individual.
- or the physical / environmental risk to others is significant.



Social isolation and self-neglect are a toxic mix and can result in increasing deterioration to a person's physical and mental well-being. Other risks can include:

- Likelihood of fire
- Falls and trips.
- Poor housing structures and lack of repairs
- Items falling from a height
- Nutritional risks
- Unsanitary conditions
- Infection or vermin
- Risk to others, including visiting professionals and emergency services.
- Environmental risks to others
- Losing accommodation and becoming homeless.

She'd been taking care of others for so long that she scarcely recognised herself when she looked in the mirror....

author unknown

The Social Care Institute for Excellence (SCIE) have published an excellent range of resources and policy research about self-neglect for community practitioners, such as housing officers, social workers, police and health professionals. These include a general briefing on self-neglect, a manager's briefing and a practitioner's briefing.

The SCIE self-neglect resources can be found on their website at www.scie.org.uk/self-neglect

Get in touch!

Should you require further help, support or signposting around any of the subjects featured in this edition, or any other Safeguarding query, please contact Racheal Franklin (safeguarding manager) via email – rfranklin@citycollegepeterborough.ac.uk

[Please do check the staff intranet for useful resources!!!](#)