



Self-Neglect: An Overview

Provided by Hywel Dda University Health Board

The Social Services and Well-Being (Wales) Act 2014 defines Neglect as “a failure to meet a person’s basic physical, emotional, social or psychological needs, which is likely to result in an impairment of the person’s well-being”.

Neglect is a form of abuse in which the perpetrator is responsible for providing care for someone who is unable to care for him or herself, but fails to provide this – be it no care at all, or care that is clearly not of an adequate standard to meet the person’s needs. As such, neglect can be deliberate, or can occur as a result of not understanding what someone’s needs are. Safeguarding procedures are in place to address these circumstances.

However the Act does not make provision for Self-Neglect and yet individuals who self-neglect frequently pose significant challenges to both health and social care as well as wider society. Self-neglect can present in a variety of ways but includes many of the following:

- Lack of self-care to an extent that it threatens personal health and safety
- Neglecting to care for one’s personal hygiene, health or surroundings
- Inability to avoid harm as a result of self-neglect
- Failure to seek help or access services to meet health and social care needs
- Inability or unwillingness to manage one’s personal affairs

Self-neglect is a difficult area due to the fundamental human right to a private life. In other words, if someone chooses to live in a particular way, however worrying that is, there are limited circumstances when the law can intervene. If someone has sufficient mental capacity, then social services have no powers to force someone to receive assistance from them, even if this appears to outsiders to be an unwise decision by the person concerned.

This does not preclude the sharing of information with relevant professional colleagues. This enables professionals to assess the risk of harm to the individual and others and to be confident that the adult is not being unduly influenced, coerced or intimidated and is aware of all the options. This will also enable professionals to check the safety and validity of decisions made.

If it is determined that the person lacks sufficient mental capacity to make an informed decision about their living conditions, the views of the person at risk are still important and must be taken into account. However health, social services and other professionals involved in the case can make ‘best interests’ decisions on their behalf. Where it is considered that the person is an ‘adult at risk’ and professionals are unable to manage that risk, a referral to safeguarding procedures would be appropriate.

The Regional Adult Safeguarding Threshold Guidance Document gives specific examples of when it might be appropriate to refer cases of self-neglect to the relevant Local Authority Adult Safeguarding Team. Health Board practitioners are also encouraged to seek advice and support from the Health Board Adult Safeguarding Team.