

Self-Neglect

7-Minute Briefing



1. What is Self-Neglect?

Self-neglect occurs when an adult:

- Neglects their own personal care (hygiene, nutrition, hydration, health) to a level that endangers their safety or wellbeing;
- Neglects their living environment (e.g., domestic squalor, hoarding creating health or fire risks); or
- Refuses assistance (care services, health interventions, assessments) that could reasonably alleviate these issues, even if previously agreed.

Self-neglect may be intentional or unintentional, short-term or long-term, isolated or repeated.

2. Common Causes

Understanding the underlying factors is essential for effective support. Potential contributors include:

- Mental health conditions (depression, anxiety, schizophrenia, psychosis);
- Cognitive impairments (dementia, learning disabilities, brain injury);
- Physical health problems (chronic illness, mobility limitations, substance misuse);
- Social isolation;
- Past or ongoing trauma (abuse, bereavement, domestic abuse).

3. Responding to Self-Neglect

Key principles:

- Assessments and interventions must be grounded in the adult's personal, social, and cultural context. Practitioners should reflect on how their own values may influence judgement.
- Practitioners must consider and assess mental capacity in relation to specific decisions linked to the self-neglect (e.g. refusing care, living in unsafe conditions). Capacity should be decision-specific and time-specific, and reassessed where circumstances change.
- Effective responses usually require multi-agency working (including housing providers) rather than a single-agency approach.
- Balance respect for autonomy with the duty to protect wellbeing. This often means building rapport and trust over time to better understand the adult's perspective.
- Avoid viewing self-neglect as simply a "lifestyle choice." Professionals have a duty to explore why decisions are being made and how support can be offered, even when engagement is limited.
- Determine when the self-neglect began—this can reveal triggers (e.g., recent bereavement, trauma, or loss of capacity).
- Rule out coercion, abuse, or harassment. Use professional curiosity to explore concerns without assumption (see Professional Curiosity guidance).
- If self-neglect stems from unmet needs (e.g., physical disability), consider a full Care Act needs assessment and care/support plan.
- Where trauma or mental health is a factor, mental health services or advocacy may be appropriate.

Environmental Health Services (EHS) can intervene where conditions pose a statutory nuisance or risk to others.

4. Risk Assessment

Key areas to consider:

- 1.Capacity and consent
- 2.Indicators of mental health difficulties
- 3.Risk to physical health
- 4.Risk to overall wellbeing
- 5.Impact on others (e.g., neighbours, family)
- 6.Serious fire risk
- 7.Serious environmental risk (e.g., structural damage, destruction of accommodation)



7. Further Guidance

- Scie: <https://www.scie.org.uk/self-neglect/at-a-glance>
- 39 Essex Chambers: [Mental-Capacity-Guidance-Note-Capacity-Assessment-May-2025_0.pdf](https://www.39essexchambers.com/media/1024/mental-capacity-guidance-note-capacity-assessment-may-2025_0.pdf)
- Research in Practice: https://www.researchinpractice.org.uk/media/xqqlavsi/working_with_people_who_self_neglect_pt_web.pdf
- NHS: <https://safeguarding-guide.nhs.uk/types-of-abuse-exploitation-and-neglect/s3-15/>

6. When Self-Neglect Becomes a Safeguarding Issue

Self-neglect becomes a s.42 safeguarding enquiry matter when the adult is at risk of significant harm to health, safety, or wellbeing and is unable to protect themselves (e.g., due to declining capacity or inability to control behaviour without external support). Statutory guidance (updated March 2016) states: decisions must be made case-by-case.

Indicators that may trigger safeguarding:

- 1.Persistent poor personal hygiene (unkempt appearance, body odour, consistently unwashed clothing).
- 2.Decline in health due to refusal of essential treatment/medication.
- 3.Living environment posing serious risks (rubbish accumulation, pests, fire hazards).
- 4.Unsafe conditions (no running water, heating, or electricity).
- 5.Evidence of malnutrition, dehydration, or weight loss.

5. Carers

If the adult has a carer:

- Assess the carer's ability to meet needs and exclude carer neglect or acts of omission.
- Consider carer burnout or inability to continue safely.
- Offer a carer's assessment under the Care Act 2014 (eligible regardless of hours of care provided). See Legal Requirement of a Carer's Assessment.