Safeguarding is everyone's responsibility

Please speak to the Designated Safeguarding Lead:

Hannah Pallôt or Deputy Designated Safeguarding Lead:

Rachel Heffer immediately with any concerns.

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Fabricated and Induced Illness



Every Moment Matters

Seven Minute Safeguarding

WB 9th May 2022

What is Fabricated and Induced Illness?

Fabricated or induced illness (FII) is a rare form of child abuse. It happens when a parent or carer (93% of cases, the mother (Schreier, 2004)) exaggerates or deliberately causes symptoms of illness in the child.

The parent or carer tries to convince doctors that the child is ill, or that their condition is worse than it really is.

The parent or carer does not necessarily intend to deceive doctors, but their behaviour is likely to harm the child. For example, the child may have unnecessary treatment or tests, be made to believe they're ill, or have their education disrupted.

FII used to be known as "Munchausen's syndrome by proxy" (not to be confused with Munchausen's syndrome, where a person pretends to be ill or causes illness or injury to themselves).

Why does FII happen?

The reasons why FII happens are not fully understood.

The parent or carer will have a need for their child to be treated as if they're ill, or as being more unwell than they really are. The fabricated illness may involve physical, and/or psychological health, neurodevelopmental disorders and cognitive disabilities. Their behaviour is intended to convince doctors that the child is ill or has a medical condition.

This may be because the parent or carer gains something, such as attention, support or closeness to the child. Or it may be because they have anxiety or incorrect beliefs about their child's health, and they need these beliefs to be confirmed and acted upon. The parent or carer may not always be fully aware of the reasons for their own behaviour.

A large number of parents or carers involved in FII have their own mental heath challenges and may also suffer from Munchausen's syndrome themselves.

There have also been several reported cases where illness was fabricated or induced for financial reasons. For example, to claim disability benefits.

Information gathered from the child's records & collated in the form of a chronology is key to confirming whether the situation is abusive. The documentation of facts & evidence in this format often reveals a startling picture. Getting the facts agreed and seeing the overall pattern is crucial

Want to know more? This longer read [15 mins] from Safeguarding Network looks at this issue in more detail.

The NHS have created this guidance to provide an overview of FII and the impact it can have on children's lives

What are the signs that a child may be experienced FII?

The NHS has published advice for clinicians which can be read here.

The list of signs includes some that schools should be aware of including prolonged, frequent or persistent absences. Keeping registers up to date and using correct codes is especially important in this instance. If you complete registers and are unsure of the correct code to use to indicate an absence, please check.

As a school there is therefore a need to be aware of patterns of absence and whether asking questions leads to increased absence. Schools should also be aware of cases where there are multiple moves of school or the suggestion of home schooling for an ill child and should question what the reason for this may be. Evidence suggesting that this is part of the pattern when there are cases of Fabricated or Induced Illness.

We must also make sure that medication we administer to a child is prescribed to them or is an age appropriate over-the-counter medication and that medication forms have been properly completed.

Respectful uncertainty was a concept introduced by Lord Laming in his <u>enquiry into</u> <u>death of Victoria Climbié.</u> The importance of professionals remaining curious and critically evaluating information presented to us is important in cases of FII.

Why is this an issue for Schools?

Although this study in 2011 carried out by the University of Edinburgh found that cases were prevalent at a rate of 89 per 100,000 over a two-year period making it a very rare event, there are a number of caveats to the figure, and there is consensus that the true figure may be higher. Although not specifically referenced in the body of Keeping Children Safe in Education 2021, all staff should be aware of Fabricated or Induced Illness through its inclusion in the definition of physical abuse in Part one of the document:

'27. Physical abuse: a form of abuse which may involve hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating or otherwise causing physical harm to a child. Physical harm may also be caused when a parent or carer fabricates the symptoms of, or deliberately induces, illness in a child.'