



# EXAMINE AND DISCUSS THE FACTORS THAT CAN CONTRIBUTE TO THE CAUSES OF VULNERABILITY

Vulnerability, Welfare and Risk BMPL6007

Chelsea Pelosi 2015581

Chelsea Pelosi (2015581)  
[Email address]

## Examine and discuss the factors that can contribute to the causes of vulnerability.

This assignment undertakes a thorough examination and discussion of the various factors contributing to vulnerability within contemporary society. Vulnerability, a multifaceted concept influenced by socio-economic, psychological and environmental factors, permeates individuals' lives and communities at large. By delving into these intricate factors, this study aims to illuminate the underlying complexities that render individuals susceptible to adversity, exploitation and marginalization. Through a comprehensive analysis, this assignment seeks to unravel the interconnectedness of these factors and their cumulative effects on shaping vulnerability across diverse contexts. By understanding the root causes and manifestations of vulnerability, this inquiry lays the groundwork for devising effective strategies and interventions to address systemic inequalities and foster resilience among vulnerability populations.

Vulnerability refers to a state of being susceptible to harm, whether physically, emotionally, financially, or socially. It encompasses various factors that can render individuals or groups more susceptible to adverse outcomes or exploitation. Vulnerability can arise from a range of circumstances, including socio-economic disadvantage, health issues, lack of social support, discrimination or exposure to trauma (College of Policing, 2021). Recognising and addressing vulnerability is essential for designing effective interventions and support systems to protect and empower those at risk.

One of the factors that can contribute to a person's vulnerability is Socioeconomic Status. Socioeconomic status refers to an individual's or group's social and economic position in society, incorporating elements like income, education, occupation and wealth (McLoed & Kessler, 1990). McLoed and Kessler (1990) states that the status of these elements influences vulnerability by determining access to resources, opportunities, and support system, ultimately impacting one's capacity to navigate difficulties and setbacks. Individuals with lower socioeconomic status frequently encounter various difficulties that can adversely affect their health (Smith, 1998). This is supported by Office for National Statistics (2020) which highlighted how deaths related to COVID19 doubled in the most deprived areas within England during the Covid 19 pandemic, July 2020. The statistics indicated a rate of 3.1 deaths per 1000,000 population, more than a double the mortality rate observed in the least deprived areas (Office for National Statistics, 2020).

Watchtler et al (2020) suggested that socioeconomic disparities in COVID-19 stemmed from unequal risks of infection, potentially driven by variations in living and working conditions. Even amid the pandemic, numerous individuals found themselves in circumstances where they could barely shield themselves from infection. For example, socioeconomically marginalised communities residing in communal housing or shelters. It is apparent that individuals with lower income levels or restricted access to recourses are frequently more susceptible to various challenges and adversities. This vulnerability stems from their limited financial means and lack of access to essential recourses such as adequate healthcare and

education. Additionally, economic instability can exacerbate their vulnerability to unforeseen events such as the COVID-19 pandemic which influenced people's health and jobs, further perpetuating cycles of poverty and disadvantage. Overall, Socioeconomic status plays a significant role in shaping an individual's level of vulnerability and their ability to cope with adversity.

The College of Policing (2021) has presented an infographic formula supporting their approach, defining vulnerability as a recognition that any individual could be susceptible, but it is the combination of external factors interacting with internal ones that can lead to suffering or place someone at risk of harm. These are known as situational factors and personal factors. Adverse Family Circumstances are a situational factor that influences an individual's vulnerability. Adverse family circumstances refer to challenging or difficult situations within a family that can negatively impact the well-being and functioning of its members (Gu, et al., 2022). Petersen et al (2015) highlights how adverse family circumstances can have profound effects on children, affecting their emotional, social and cognitive development, as well as their physical health and overall quality of life. The significance of early childhood is evident as their experiences during this period can profoundly shape and influence their future lives. A child who experiences Adverse Family Circumstances are at risk of being exposed to Adverse Childhood Experiences (ACE's). ACE's are traumatic events or adverse experiences that occur during childhood and have the potential to negatively impact an individual's physical, emotional and mental health later in life (NHS Foundation Trust, 2024).

These experiences may include various forms of instability, one being household dysfunction. According to Clements et al (2019) exposure to household dysfunction, such as parental substance abuse, mental illness, domestic violence or incarceration of a parent can disrupt family stability and lead to adverse outcomes in a child, including poor academic performance, behavioural problems and increased risk of involvement in criminal activities. Violence Prevention Unit (2023) Stated that being exposed to ACEs can elevate the likelihood of being implicated in violent offences and transitioning into a prolific offender. Public Health Wales (2024) Supports this by revealing that 46% of prisoners at HMP Parc prison, South Wales had reported having encountered at least one adverse childhood experience. This shows that people who are exposed to ACEs during childhood continue to be vulnerable as adults, where they become offenders due to the lack of support and trauma caused.

Abuse is also a form of instability in Adverse Family Circumstances, where physical, emotional or sexual abuse is prevalent (Childrens Bureau, 2019). The research highlights how these forms of abuse can lead to long-term physical and mental health issues, such as increased risk of depression, anxiety, PTSD and chronic pain. The study by Chen et al (2010) supports this by discovering that instances of PTSD were influenced by abuse and neglect, which demonstrated strong connections with instances of sexual abuse. Widom (1999) confirms this in a study which states 37% of adults met the criteria for PTSD following adverse family experiences of sexual abuse. PTSD resulting in sexual abuse can increase vulnerability due to its profound impact on an individual's mental, emotional and physical well-being.

This can have a significant impact on an individual's future relationships, where they may struggle with intimacy problems along with having trust issues (NSPCC, 2023) .The Attachment theory supports this by emphasising the importance of early relationships with

caregivers in shaping social and emotional development. Insecure patterns, resulting from experiences such as neglect or abuse can increase vulnerability by affecting individuals' ability to form trusting relationships and regulate emotions effectively (Ogebi & Berant, 2010).

The Trauma theory provides insights into how adverse experiences during childhood can increase vulnerability in several ways. Trauma can also have a significant influence the development of maladaptive coping mechanisms, such as substance use, self-harm or avoidance behaviours. These coping strategies may provide temporary relief but can ultimately exacerbate vulnerability by limiting healthy coping skills and exacerbating mental health issues (Bloom & L, 1999). The study undertaken by Cleare et al (2018) revealed that a total of 79.1% of individuals with multiple ACE's had resorted to self-harm as a coping mechanism. This represents a significant portion of individuals who have encountered ACEs. It can be questioned whether the correct interventions and support systems are in place to understand and support those dealing with ACEs. It is important as a practitioner dealing with these cases to understand the trauma and triggers that may be contributing to their self-harm triggers, whilst providing a safe and non-judgement environment for them to express their emotions and experiences, which they may not be used too.

Based on a 2015 study Welsh Government (2021) had highlighted that individuals who encountered four or more ACEs , were sixteen times more prone to using class A drugs such as heroin or cocaine in comparison to those who had not experienced any ACEs. It is evident that individuals with ACEs handle their experiences differently and employ varied coping strategies. The Trauma theory highlights that children who encounter recurring instances of intense arousal, lack the necessary safety and protection essential for typical brain development. Due to this, they might not attain regular regulation of arousal, leading to persistent irritability, anger, difficulty managing aggression, impulsivity and anxiety, exposing them to vulnerability (Bloom & L, 1999). Adverse Family Circumstances, presence of an abuser and lack of support are all separate factors within the framework of defining vulnerability and can be seen as different factors to ACE's (College of Policing 2021). Subsequently, a child who experiences neglect or abuse from a caregiver would be experiencing the factors of adverse family experiences, lack of support, as well as having a presence of an abuser, which implies they are at greater risk. Justice Analytical Services (2018) states that individuals who encounter multiple ACEs are at a higher risk of experiencing violence in adulthood compared to those with no ACEs. This research identifies the leading impact of experiencing ACEs, with an urged importance for the prevention and when appropriate nurturing of individuals subjected to ACEs.

According to Bagattani (2019) childhood is widely considered the most fragile stage in human life. During this time, children rely heavily on others to fulfil their fundamental needs, rendering them susceptible to harm or adversity. In 2021, the NSPCC's helpline had contacted and collaborated with multi-agencies in regard to investigate concerns regarding 22,505 children in relation to neglect and abuse (NSPCC, 2021). During 2023 640,430 referrals were made by Children's Social Care and just under 51,000 children were put under a protection plan in England alone (Office for National Statistics, 2023). These statistics underscore the severity of child vulnerability whether it's from household dysfunction, abuse, neglect or trauma. These statistics are notably elevated and raise concern to the number of children experiencing neglect and abuse, which exposes them to ACEs. The prevalence of neglect and

abuse among children is alarming and underscores the urgent need for intervention and support systems to ensure their safety and well-being.

Grooming is a situational factor that increases the risk of vulnerability (College of Policing, 2021). Grooming refers to the process by which an individual builds a relationship with a child, often online or in person, with the intention of gaining their trust and confidence for the purpose of sexual abuse, exploitation or other harmful activities (Metropolitan Police, 2022). According to NSPCC (2015) during 2022/23, a total of 6,350 child offences were recorded, involving sexual communication within the UK. This marked an 82% surge since 2017/18. The substantial rise is a cause for concern regarding the notable shift that has occurred. This suggests a pervasive vulnerability within the community, indicating a pressing need for increased awareness, education and protective measures to safeguard individuals from exploitation and harm. Social Media networks can serve as a platform for grooming, as perpetrators may exploit its anonymity and accessibility to establish relationships with potential victims, gradually gaining their trust and manipulating them into engaging in harmful or exploitative behaviours (NSPCC, 2023).

Amid the global pandemic, COVID19 heightened internet usage during lockdowns and has led to technology becoming deeply ingrained in the daily lives of young individuals (Chiu & Quayle, 2022). NSPCC (2025) revealed that 150 various apps, websites and games were utilized for online grooming for children, with 47% of them being products used by Meta, including Facebook, Instagram and WhatsApp and 26% of grooming offences being committed via Snapchat. This raises significant concern that a high percentage of grooming is occurring online. This highlights the importance of vigilance and proactive measures to protect children from such dangers in digital environments. Grooming can result in both immediate and enduring consequences, heightening individuals' vulnerability. Consequences include psychological impact, self-harm, drug and alcohol problems (Whittle, et al., 2013). According to NSPCC (2023) a child may experience challenges with sleep, exhibit anxiety, or have difficulty concentrating or managing school tasks. They may also display withdrawn behaviour, communicate less and express feelings of anger or distress.

It is apparent that grooming is a significant factor of vulnerability, where a child is left to feel exploited and confused about boundaries, whilst making it hard to recognise harmful intentions. Grooming children for exploitation is a severe violation of trust and safety that exploits vulnerabilities and increases the risk of harm to children.

Personal factors to vulnerability such as Gender become prevalent in grooming where Whittle et al (2013) reported that females face a higher likelihood of being targeted compared to males. NSPCC (2006) supports this by revealing 83% of victims in grooming cases were female within England and Wales, between April 2017 and March 2021. This indicates a concerning gender disparity in victimisation. This trend suggests that females may be perceived as more vulnerable or easier targets by perpetrators, highlighting the need for targeted interventions and support services, addressing this gender disparity which requires comprehensive efforts to challenge societal norms and attitudes that contribute to the victimisation of females and promote gender equality and empowerment.

Personal factors such as age have can have a significant impact on an individual's vulnerability. The Developmental cognitive Neuroscience (DCN) theory relates to child vulnerability by

providing insights into how the developing brain interacts with environmental influences, shaping cognitive process and behaviour (Johnson, 2001). Bortfeld and Bunge (2024) suggests that there are critical periods during development when the brain is particularly sensitive to certain experiences. Negative experiences during these sensitive periods, such as trauma or neglect, can have long lasting effects on brain development and increase vulnerability to mental health issues and behavioural problems later in life. It is clear that negative experiences in early age and childhood can have a significant impact on brain development, increasing the risks of vulnerability. However, it is important to note that elderly individuals can be just as vulnerable as children, due to factors such as physical fragility, cognitive decline, social isolation and age-related discrimination (Age UK, 2015). These vulnerabilities can increase their risk of experiencing abuse, neglect, exploitation and other forms of harm (Age UK, 2023).

The personal factor of age among the elderly can raise the likelihood of loneliness and situational factors such as isolation, thus amplifying their vulnerability. According to Newall and Menec (2017) social isolation entails an absence of social interaction or engagement, while loneliness is the subjective perception of being alone or lacking meaningful connections despite being in the company of others. Among the elderly, social isolation may stem from factors like having diminished social circles or living alone. In 2021, England and Wales had a collective total of 3.3 million individuals aged 65 and above living alone (Office for National Statistics, 2023). It is apparent that a significant number of elderly individuals who are living alone and could possibly be experiencing social isolation and loneliness. This causes greater concern where NHS (2022) highlights how being socially isolated can result in mental health issues such as depression and significant deterioration in physical health. Centers for Disease Control and Prevention (2023) supports this by stating how isolation heightens the likelihood of heart disease, stroke, type 2 diabetes and the mental health and disability factors such as depression, anxiety and dementia. It is evident that the personal factor of age can increase the risk of other personal and situational factors within the framework such as isolation, Disability and Mental Health.

Dementia is recognised as a disability, protecting elderly people from discrimination, which can be seen as a personal factor that contributes to an individual's Vulnerability (College of Policing, 2021). Dementia is a progressive neurological condition that affects cognitive function, memory and behaviour, impacting a person's ability to perform daily activities independently. The personal factor of disability, such as dementia, heightens the susceptibility to vulnerability due to several interrelated factors such as Cognitive Decline. Cognitive decline occurs due to damage or degeneration of brain cells, leading to impairments in various cognitive functions. This decline typically follows a progressive pattern, impacting different areas of cognition over time (Sujata & Davidson, 2014).

Dementia can also cause communication challenges, where it can affect language abilities and communication skills, leading to difficulties in expressing their needs, understanding information and seeking help, when necessary, thereby heightening vulnerability (Banovic, et al., 2018). The research identified that individuals with dementia face heightened vulnerability to abuse, primarily due to their increased reliance on others for care and the impairments in memory, communication abilities and discernment. These factors can make it more challenging for them to stop and report instances of abuse. It is apparent that dementia

can increase the risk of vulnerability due to the cognitive decline and reliance on others to assist with daily tasks and routine, creating a power imbalance that may be exploited by abusive individuals.

Alzheimer's Society (2021) highlights that approximately 900,00 individuals in the UK are currently affected by dementia. Social isolation can elevate an individual's risk of dementia by approximately 60%. This percentage is concerning because it highlights the significant impact of social factor on cognitive health, it indicates that the factor of social isolation can not only affect an individual's emotional well-being, but it can also have tangible consequences for their cognitive function and brain health (Alzheimers Society, 2023). This statistic underscores the importance of addressing social isolation as a preventive measure for dementia. It emphasises the need for interventions that promote social engagement, support networks, and community connections among elderly individuals to mitigate this risk and improve overall cognitive outcomes.

The risk of dementia in elderly people can be increased by other personal factors, like mental health issues such as depression (Alzheimer's Society, 2023). This is supported by Muliyla and Varghese (2010) which states that depression is linked to cognitive decline and a greater susceptibility to dementia. The hippocampus is vital for key functions in the brain that can affect a person's vulnerability. The hippocampus is a crucial part of the limbic system, which is involved in emotions, memory and learning. Damage or dysfunction of the hippocampus can lead to memory impairments and other cognitive defects (Rodda, 2011). According to Brenner et al (2000) High levels of glucocorticoids during periods of depression might result in hippocampal damage, ultimately leading to a decrease in volume. The research supports this by disclosing that individuals with depression showed a significant 19% decrease in hippocampal volume. According to Alzheimers Society (2023) a decreased volume within the hippocampus can result in memory impairment and cognitive dysfunction, increasing the risks of dementia. It is apparent that the personal factor of age within the elderly can increase other personal and situational factors, increasing their risks to vulnerability. Recognising the potential risks between depression and dementia is vital. Identifying and treating depression in its early stages may help prevent or delay the onset of dementia.

In conclusion various factors such as social isolation, age, grooming, disability and mental health play a significant role in identifying an individual's vulnerability. These factors can interact and compound, increasing an individual's susceptibility to exploitation, abuse and other forms of harm. The risk of vulnerability begins from the early stages of childhood. Children are at a heightened risk of vulnerability due to a combination of reasons, including their dependence on caregivers for care and protection and ongoing developmental processes. A child experiencing situational factors like adverse family circumstances, presence of abuser, lack of support and grooming would have Adverse Childhood Experiences (ACE's) which may later result in personal factors such as mental health, where they experience depression, anxiety and PTSD. Research shows how depression can cause damage to the hippocampus, a part of the brain that involves emotion, memory and learning. It is evident that damage to the hippocampus can increase further personal factors to vulnerability in elderly age, such as the disability, dementia. The factors of vulnerability Recognising and

addressing these vulnerabilities are essential for implementing interventions, support services and protective measures to safeguard individuals at risk.

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