

DRAFT THRESHOLD WORKING DOCUMENT

February 2021

This page has not been changed from the original draft.

Levels of need			
Level 1: Not needing any interventions.			
<i>Need</i>	<i>Agencies providing support</i>	<i>Example indicators</i>	<i>What to do</i>
No additional support needed beyond that which is already available and provided by the school and health services.	Schools and nurseries, Early Years health visiting, school nursing, Young People's service. Voluntary and community sector.	Children making good overall progress in all areas of development broadly receiving appropriate universal services such as health care and education.	No action required.
Level 2: Needing help from one or more partners.			
www.sloughfamilyservices.org.uk			
<i>Need</i>	<i>Agencies providing support</i>	<i>Example indicators</i>	<i>What to do</i>
Children and young people with additional needs. Some require simple short term interventions. Some require a co-ordinated approach by multiple partners.	Services above may engage mental health services, substance misuse and/or other services to help the child and family to understand their needs and devise solutions.	Parental learning difficulties/poverty and debt, physical disability/long term health conditions/ chronic health conditions/poor hygiene/family without permanent accommodation/the child requires additional educational support//the family are asylum seekers/the child is a young carer/persistent unauthorised absences from school. <i>Pre-disposing factors to exploitation, eg, loss of a significant adult, has lived, or is living with domestic abuse, poor school attendance, at risk of school exclusion, related behavioural problems.</i>	Work with the child and family to understand the child's needs. Engage appropriate services to work with them. In cases involving multiple partners and increasing in complexity, make appropriate arrangements to share information and ensure services are co-ordinated and there is a clear plan. Complete the CE risk identification tool Check the link above to the Family Information Service to find out what services are available.
Level 3: Additional needs requiring specialist support			
<i>Need</i>	<i>Agencies providing support</i>	<i>Example indicators</i>	<i>What to do</i>
Children whose needs require specialist.	In addition to above; Young People's Service/ Youth Offending Team (YOT), Children's Social Care Services..	The child has a physical or mental health condition or disability which significantly affects their everyday functioning and access to education. High level of complex health needs or constant care needs. Offending behaviours. Exhibiting behaviours Indicating in interest in or early involvement with Crime or criminal gangs.(and parents capability unclear?)	Refer to appropriate specialist service YOT or Young People's Service. Complete the CE risk identification tool and refer.

This page has not changed from the original draft.

Level 4: Acute and urgent need including child protection

Need	Agencies providing support	Example indicators	What to do
<p>Children requiring formal statutory intervention under section 47 of the Children Act, (i.e. requires child protection procedures) Victim or perpetrator of knife Involved in gangs, county lines.</p>	<p>Those already providing services, e.g. schools and colleges, GP. Children's services and social care will lead. Young people services, YOT</p>	<p>Children; <ul style="list-style-type: none"> • who disclose abuse or harm • who are suffering or likely to suffer significant harm • whose parents are unable to provide care, for whatever reason • where physical, sexual or emotional abuse or neglect is suspected • may be suffering as a result of suspected fabricated illness • are at risk of sexual exploitation and trafficking. • are at risk of female genital mutilation (FGM) • are at risk of forced marriage and/or honour based violence • where there are allegations of harm by a person in a position of trust • who are in contact with persons who are considered to pose a risk to children • who are unaccompanied Asylum Seekers. • whose behaviour is so extreme they are at risk of removal from home e.g. control issues, risk taking, dangerous behaviour <p>Harmed by exploitation including knife crime, Gangs/county lines and/or sexual exploitation.</p> <ul style="list-style-type: none"> • as yet unborn and there is concern about Parental capability. <p>Concealed pregnancy.</p> </p>	<p>Follow child protection procedures, Contact the Children's Trust and make a referral without delay.</p> <p>For exploitation: complete the CE risk tool AND MARF to make the referral</p>
<p>Young people who have committed an offence</p>	<p>Those already providing services, e.g. schools and colleges, GP. Police /court refer to YOT who will lead.</p>	<p>Young people who get into trouble with the police or are arrested, are charged with a crime and go to court and/ or are convicted of a crime and given a sentence.</p>	<p>Link to YOT here</p>

The rest of the document has been amended to incorporate the child's rights from the UN convention on the rights of the child. Level 1 is described as the expectations we have of parents/carers so this is a kind of baseline and reflects the assumptions we make in practice but we tend not to articulate them. .

Child's developmental needs: Health

<i>Every child's right</i>	Level 1 <i>Expectations of parents/carers</i>	Level 2	Level 3	Level 4
<p>Article 6: Life survival and development <i>Every child has the right to life, to thrive and develop to their full potential</i></p> <p>Article 23: Children with disabilities <i>Children with disabilities have a right to live a full life with support their families.</i></p>	<p>Parents pro-actively manage their child's health, and take up preventative screening and immunisations services. Parents respond to health problems without delay.</p>	<p>Parents not taking up screening and preventative health services, have been advised of the risks and health professionals have made every effort to encourage parents to take up these offers. Health professionals are assured that parents understand the risks and have taken an informed decision about this. Child's health and welfare not adversely impacted by parent's decisions. Parents take the child for medical consultation when there are health problems without delay. Excellent oral hygiene.</p>	<p>Parents are persistently refusing to take up screening and preventative health services and are refusing to take clinical advice and so are not informed of the risks. Health professionals are concerned about the health of the child, such as Failure To Thrive, inappropriate diet and unable to carry out an assessment to clarify this. Parents delay in seeking medical attention for the child. Poor oral hygiene and parents refuse to take the child for dental treatment.</p>	<p>Parents persistently refusing to take up preventative health services, and/or to seek medical/dental attention for the child and there is concern that the child is suffering or likely to suffer significant harm from a clinical condition. Factitious and Induced illness. Child suffering severe dental pain or suffering from infections because parents refusing to take the child for dental treatment. Non-organic Failure to Thrive.</p>
<p>Article 24: Health & Health Services</p>	<p>Parents/carers supporting the child to meet developmental milestones, including speech and language.</p>	<p>Delays in reaching developmental Milestones. Interventions are accepted and lead to improvements.</p>	<p>Persistent delays in reaching developmental Milestones, a clinician suggests that this is likely to be due to a concern about parenting capacity.</p>	<p>There is concern about persistent developmental a failure of the parents to accept advice and provide appropriate care and this suggests the child is suffering or likely to suffer significant harm.</p>
<p><i>Every child has the right to the best possible health with good health care, clean water, nutritious food, a clean environment and education on health and well being.</i></p>	<p>Parents/carers ensure the child has a healthy diet, and suitable clothing.</p>	<p>Parents finding it difficult to provide Healthy food and adequate clothing. This is due to poverty of lack of awareness and advice is accepted and having a positive impact.</p>	<p>Parents unable to provide appropriate food and/or clothing. Efforts by partners to help them improve have failed and the child is in need of statutory support.</p>	<p>There is persistent failure to provide the child with adequate food and clothing and child is suffering or likely to suffer significant harm due to the cumulative and adverse impact of this on his/her welfare.</p>
	<p>Parents nurture positive mental health development</p>	<p>Concerns around mental health, self-harm, depression, eating disorders, body image. Family accepting help and interventions are having a positive impact.</p>	<p>Concerns about mental health are persistent and efforts by partners to support the child and family are not working and there is concern about parental capacity to manage these challenges.</p>	<p>The child is experiencing deteriorating mental health problems and there is concern about parental capacity and that the child is suffering or likely to suffer significant harm without formal child protection interventions.</p>
	<p>Parents supporting the child who has a disability and do not need support services.</p>	<p>Disabled and requiring multi-agency support services and sound planning. Complex needs. Parents champion the child's needs.</p>	<p>Disabled as defined by the Children Act 1989; diagnosed with severe or profound: learning disability, developmental delay, physical disability, sensory disability; multiple disabilities that impact on the child or young person to the same degree as a diagnosis of severe / profound disability. (link to CWD and SEND offer).</p>	<p>Disabled and suffering or likely to suffer significant harm, (including inadequate or sub-optimal care/neglect or other forms of abuse. Parental capacity concerns.</p>
	<p>Parents/carers support the child about Sexual health/respect their privacy.</p>	<p>Starting to have sex (under 16). Conception aged under 16. Complies with and support with positive outcomes</p>	<p>Inappropriate sexual images of the child have been shared on social media.</p>	<p>Sexual activity under the age of 13 Sexual exploitation. Sexual abuse</p>

Child's developmental needs: Education

Every child's right	Level 1 Expectations of parent	Level 2	Level 3	Level 4
<p>Article 28: Education Every child has the right to an education.</p> <p>Article 17: Access to information Every child has the right to reliable information from a variety of sources that is important to their wellbeing. They should be protected from harmful information from the media.</p>	<p>Parents/Carers ensure the child attends school regularly, on time and with the right equipment.</p>	<p>Occasional to persistent truanting, poor punctuality, and or school attendance. Not in education, employment or training (NEET) Previous fixed term or permanent exclusion from another educational establishment. Managed move. Not supported by parents/carers to succeed in the labour market. Child Missing Education. (CME).</p>	<p>The parent does not engage with the school and resists suggestions of supportive interventions. The young person is often discouraged by parents/carers from success in the labour market. Child is missing education and there are indicators suggesting exploitation.</p>	<p>The parent/carer actively discourages or prevents the child from learning or engaging with the school. The young person is obstructed and discouraged from success in the labour market. There are concerns about exploitation.</p>

Childs developmental needs: Emotional and behaviour development

Every child's right	Level 1 Expectations of parents/carers	Level 2	Level 3	Level 4
<p>Article 12: Views of child Every child has the right to express their views, feelings and wishes in all matters affecting them and to have their views taken seriously</p> <p>Article 37: Inhuman treatment Children have a right not to be tortured or suffer cruel or degrading treatment or punishment</p>	<p>Parents/carers nurture good quality early attachments. When parents have mental health problems of their own, they comply with medical advice. They promote the child's growing abilities doing this in a way that recognises the child's increasing capacity to make their own choices</p> <p>Take steps to talk to and educate their child about substance misuse issues.</p>	<p>Parents/Carers recognising mental health or emotional issues. Difficulty coping with anger, and frustration. Loss of a significant adult. Low self esteem; lacking confidence in own ability. Interventions accepted and working. Anti- social behaviour resolved with appropriate interventions.</p> <p>Parents concerned or recognising child's substance misuse. Accepting interventions and they are working.</p>	<p>Deteriorating mental health and emotional issues. Behavioural problems worsening, despite interventions. Concern about parents' capability. Behaviour leading to risk of social exclusion, or school exclusion. ?Child -parent abuse, Unresolved bereavement issues. Requiring social work interventions to prevent admission to care. ? concealed pregnancy?</p> <p>Parents/carers not accepting serious substance problems. misuse interventions being refused or not working and likely to impair the child's health and development.</p>	<p>Parents/carers demonstrably detached from the child's needs. Unresponsive. High criticism, low warmth. Parents/cares lack capability to promote self esteem and confidence in the child and this continues despite efforts to help them understand this. Parent/child relationship breaking down due to child parent abuse. Unexplained injuries, Bruising in non mobile infants.(bruising protocol)</p> <p>Substance misuse likely to be causing significant harm. Child dealing and/or trafficking and so being exploited. Parental capability a concern.</p>

Child's development needs: Identity

The child's rights	Level 1 Expectations of parents/carers	Level 2	Level 3	Level 4
<p>Article 7: Birth registration <i>Every child has a right to be registered at birth with a name and nationality and as far as possible to know and be cared for by their parents</i></p> <p>Article 8: protection of identity <i>Every child has a right to identity Everyone must respect and protect that right</i></p> <p>Article 13: Freedom of expression <i>Every child must be free to express their thoughts and opinions and to access relevant information as long as it is within the law</i></p> <p>Article 30: Minority groups <i>Every child has the right to learn and to use the language, customs and religion of their family irrespective of the country they live in.</i></p>	<p>Ensure the child has a positive and clear sense of self and abilities and he/ she demonstrates feelings of belonging and acceptance. Parents listen to the child and consider their views.</p>	<p>Some insecurities around identity. Subject to discrimination and Low self esteem. Social exclusion?</p>	<p align="center">??</p>	<p>Parents unable or unwilling to protect from race hate. Persistently demonstrates extremist views and may be being radicalised.</p>

Child's development needs: Family and social relationships

The child's rights	Level Expectations of parents	Level 2	Level 3	Level 4
<p>Article 9: Separation from parents <i>Children must not be separated from their parents against their will unless it is in their best interests</i></p> <p>Article 10: Family reunification <i>If parents live in a different country, children have a right to live with them in the same country.</i></p> <p>Article 14: Freedom of thought, belief and religion</p>	<p>Parents encourage the child to have a positive understanding of his/her cultural, ethnic and linguistic identity and sees this as a positive contribution to a multi-cultural society. Parents/carers</p>	<p>Parents/carers identify bullying/isolation around perceived difference, or the child is bullying others. Parents/carers concerned that the child may be involved in gangs.</p>	<p>A criminal record relating to serious or violent crime is held by a member of the family which may impact on the children in the household. There is known involvement in gang activity.</p>	<p>Unaccompanied asylum seeking child. Child socially isolated and lacking appropriate role models. There is known involvement in gang activity which is impacting significantly on the child and family.</p>

<p><i>Every child has the right to think and believe what they choose and also to practise their religion, as long as they are not stopping other people from enjoying their rights.</i></p> <p>Article 15 Freedom of association <i>Every child has the right to meet with other children and to join groups and organisations as long as it does not stop other people from enjoying their rights</i></p>	<p>encourage social and friendship networks.</p> <p>Parent/carers ensure their children are supported to practise their religion and to understand and respect other religious views.</p>	<p>Family may be new to area or new to Britain. Family not engaging in local services. Family socially excluded.</p> <p>There is concern that the education the child is receiving does not teach them about different cultures, faiths and ideas or, if it does, is derogatory and dismissive of different faiths, cultures and ideas</p>	<p>The child is being educated to hold intolerant, extremist views. Family only mixing with other children and adults who hold similar intolerant, extremist views.</p>	<p>There are concerns that the child is being radicalised: http://proceduresonline.com/berks/slough/p_sg_ch_extremism.html</p>
<p>Article 18: Parental responsibilities <i>Both parents share responsibility for bringing up their child The best interests of the child must be a top priority in all decisions and actions that affect him/her.</i></p> <p>Article 31: Leisure, play and culture <i>Every child has the right to relax, play and take part in a wide range of cultural and artistic activities</i></p>	<p>Parents/ Care givers providing stable, consistent support to the child in a low criticism, high warmth environment which prioritises the child's needs and promotes their development.</p>	<p>Parents with poor parenting experiences in childhood, seeking and accepting advice and support.</p> <p>Loss of significant parent/carer, there is a significant attachment to another relative providing support. depression, anxiety, eating disorders.</p> <p>Child of a teenage parent accepting practical advice and support.</p>	<p>Low parental aspirations. Unconcerned about child's potential Parents unable to prioritise the child's needs over their own needs(such as mental health or substance misuse) and efforts to changes this have not worked or have not accepted by parents/caregivers.</p> <p>A child is under the age of 16 (under 18 if disabled), is cared for by someone who is not their parent or a close relative for 28 days or more (private fostering).</p> <p>Child of a teenage parent who is finding parenting challenging, child receives little warmth and affection, and persistent efforts to advise and support are not working and there is information to suggest escalating risk without intervention.</p>	<p>The child is suffering or likely to suffer significant harm as parents/caregivers overlook his/her needs and/or expose him/her to risks of harm. High criticism, low warmth from parents/ care givers.</p> <p>Family breakdown. Deceased parents and no arrangements to care for the child.</p> <p>Teenage parent who is a subject of child protection plan or is a child looked after. Child of a teenage parent where there are concerns about neglect or abuse.</p>

		The child is undertaking some caring responsibilities, occasionally or regularly needed to care for another family member.	The young carer's responsibilities are such that; he/she is unlikely to achieve or maintain, or to have the opportunity of achieving or maintaining, a reasonable standard of health or development without the provision for him of services by a local authority, or his/her health or development is likely to be significantly impaired, or further impaired, without the provision for him of such services.	The young carer's responsibilities are complex and demanding and suggest that he/she is suffering or likely to suffer significant harm as the child's own needs are being neglected.
--	--	--	---	--

Child's development needs: Social presentation

The child's rights	Level one Expectations of Parents/carers.	Level two	Level three	Level four
Article 27: Standard of living <i>Every child has the right to a standard of living that is good enough to meet their physical and social needs and support their development.</i>	Parents/carers ensure the child is appropriately dressed for different settings.	Inappropriately dressed- or persistently inappropriately dressed for the weather, shunned by other children. Resolved with advice.	Persistently inappropriately dressed, child not protected from extremes of weather. Parental capacity suggests parents need formal help and support to effect change.	Persistently inappropriately dressed despite multi-agency interventions. Parents unable to take protective action.
	Good level of personal hygiene.	Poor personal hygiene resolved with advice and support or resulting in social isolation from peers.	Persistent poor hygiene. Shunned or bullied and/or excluded by peers. Parental capacity concerns.	Poor hygiene persistent and chronic despite advice and support and this is a feature of other factors suggesting neglect and likely significant harm.
	Parents/carers champion the needs of their children, advocate for them and strive to ensure they have what they need to thrive.	Parents unable to meet some of the child's physical or social needs and are seeking and accepting help and this is resolving.	Parents unable to provide for the child's physical or social need and the child's development is likely to be impaired without interventions.	Parents unable or unwilling to co-operate with offers of help to provide for the child's physical or social needs and this is causing, or likely to cause significant harm to the child's development.

Parenting capacity: Basic care, safety and protection

The child's rights	Level 1 expectations of parents/carers	Level 2	Level 3	Level 4
<p>Article 3: Best Interests <i>The best interests of the child must be a top priority in all decisions and actions that affect him/her</i></p> <p>Article 5: Parental Guidance <i>Children have a right to receive support from their family to provide guidance and direction for the child to learn to exercise their rights, recognising their increasing capacity</i></p> <p>Article 11 Abduction <i>Children have a right to be protected from abduction by their parents or other relatives</i></p> <p>Article 16 Privacy <i>Every child has the right to privacy including protection from unlawful attacks that harm their reputation.</i></p> <p>Article 19: Violence, abuse and neglect <i>Children have a right to be protected from all forms of violence, abuse, neglect and bad treatment by their parents or anyone else looking after them.</i></p> <p>Article 40: Juvenile justice <i>A child breaking the law must be treated with dignity and respect</i></p>	<p>Parents/Carers provide for the child's needs and protect from danger and harm.</p> <p>They support the child's development through interaction and play and provide appropriate guidance and boundaries.</p>	<p>Parents/carers not providing good quality care across a number of areas of the child's needs some of the time. Parents are compliant with advice and support and this is having a positive impact.</p> <p>Possibility of substance misuse by adults within the home and there is at least one parent/carer providing consistent care and safeguarding the child.</p> <p>Parents need help to understand the importance of activities and play in the child's development.</p> <p>May have different carers. Inconsistent boundaries. Can be anti-social. Spends much time alone. Parent rarely manages disputes between siblings. Parents compliant with advice and support.</p>	<p>Parents/carers have a range of challenges impacting on their ability to provide for the child's needs, eg. substance misuse problem (including alcohol) and there is no parent/carer providing consistent care to and safeguarding the child. Child is rarely comforted when distressed. Parents/carers have no other positive relationships. There are no toys visible at the home visit, parents do not understand the importance of play and there are other concerns about safeguarding. Efforts to help parents understand the importance of play are not working. Inconsistent parenting which impairs emotional or behavioural development and parent not responding to advice and support. Parents' capability to comply with advice and support is considered to be compromised.</p>	<p>Parents unable to protect their child/ren and cannot prioritise the child's needs over their own. Severe or long term harm has been or is likely to be done to the child and/or the parents/carers are unwilling or unable to engage in work to improve care provided.</p> <p>Failure to provide good quality care across most of the child's needs most of the time. Parents not compliant inconsistent and therefore harmful.</p> <p>Parents' use of alcohol or other substances is impairing their ability to provide safe care for their child/ren. There is no parent/carer providing consistent care and safeguarding the child and there is information to suggest that the child is suffering or likely to suffer significant harm.</p> <p>Teenage parents who themselves were subject to child protection plan or looked after</p> <p>Parents inconsistent, highly critical or apathetic towards child. Child is rejected or abandoned Parents are negative and abusive (verbally, emotionally and/or mentally) towards the child. Few or no effective boundaries set by</p>

				parents. Child regularly behaves in an anti-social way. Inconsistent and/or violent discipline. Subject to a parenting order which may be related to the child's criminal behaviour, anti-social behaviour or persistent absence from school.
--	--	--	--	---

Family and environmental factors

Family history and functioning

Where domestic violence is suspected; always refer to DV guidance http://proceduresonline.com/berks/slough/p_dom_viol_abuse.html

Housing, employment and finance

Rights of the child	Level 1 Expectations of parents/carers	Level 2	Level 3	Level 4
Article 27: Standard of living <i>Every child has the right to a standard of living that is good enough to meet their physical and social needs and support their development.</i>	Parents/carers understand the need for, and strive to achieve housing that has all basic amenities and appropriate facilities.	Family affected by low income or unemployment. Parents have limited formal education. Adequate or poor housing. Family seeking asylum or refugees. Overcrowding, temporary accommodation, homelessness.	Physical accommodation places child in danger. No fixed abode or homeless. 16-17 year old homeless young people. (refer to housing)	Families seeking asylum or refugees where there is a concern about their ability to safeguard the child/ren.
	Parents/carers aspirational for their child.	Unemployment affecting aspirations. Prolonged unemployment, inter-generational worklessness.	Parents' /carers' ability to provide adequate care and the child's basic needs is affected by debt and poor financial management as the child's needs are consistently not prioritised and this is affecting their welfare.	There is information to suggest that the child is suffering or likely to suffer significant harm as a result of long standing, chronic failure to resolve financial difficulties. Debt and poor financial management, for example due to the need to purchase drugs or alcohol, or gambling is resulting in inadequate care, e.g. utilities supplies cut off, rent in arrears /eviction and or no money for food.
	Parents/carers have sufficient income to provide for the child's needs and where this is not the case, they make every effort to seek support.	Financial difficulties, e.g. redundancy or serious debts/poverty impacting on ability to care for the child. Parents concerned and seeking appropriate help.		

Family's social Integration/accessing community resources

Exploitation/ Extra familial abuse

Rights of the child	Level 1 Expectations of parents and the community.	Level 2	Level 3	Level 4
<p>Article 32 Child Labour <i>Children must be protected from economic exploitation and work that is dangerous or might harm their health, development or education. If children work they have a right to be safe and paid fairly</i></p>	<p>Parents/ carers ensure that their child, if employed is protected by the legislation and employers follow guidance appropriately.</p>	<p>Parents need support and advice to understand child employment safety issues.</p>	<p>Parents and carers willing but needing support to safeguard the children from Domestic Servitude/ unsafe employers.</p>	<p>Parents not protecting children from or encouraging or colluding with Domestic servitude, Drug dealing/county lines Cannabis farms.</p>
<p>Article 33 Drug abuse <i>Children must be protected from the illegal use of drugs and from being involved in the production or distribution of drugs</i></p>	<p>Parents/carers act as role models by not engaging in substance misuse. They teach their children about the dangers of substance misuse..</p>	<p>Parents/carers need support and advice to talk to their children about substance misuse.</p>	<p>Parents unable to safeguarding their children from drug trafficking/county lines or from using drugs and and complying with support from social workers and partners..</p>	<p>Drug dealing/county lines, Cannabis farms. Parents openly engaging in illegal substance misuse and not protecting their children from this exposure. Parents distracted by their own needs and not prioritising the need to safeguard their children from these issues.</p>
<p>Article 34 Sexual exploitation <i>Children must be protected from all forms of sexual abuse and exploitation.</i></p>	<p>Parents/carers should operate reasonable privacy boundaries and promote the child's persona and physical integrity and on line safety.</p>	<p>Sexting?</p>	<p>Sexting? Extra-familial exploitation including on line abuse and parents concerned and needing support safeguarding their child from this.</p>	<p>Sexting? Intra-familial sexual abuse. Extra-familial Exploitation including on-line abuse and parents unable or unwilling to safeguard the child from this.</p>
<p>Article 35 Abduction, sale and trafficking <i>Children must be</i></p>	<p>Parents/ carers should protect/education their children from the dangers of exploitation and trafficking.</p>			<p>UASC, Domestic servitude</p>

<p><i>protected from being abducted, sold or moved illegally to a different place in or outside their country for the purpose of exploitation</i></p>				
<p>Article 36 Other exploitation <i>Children must be protected from all forms of exploitation, e.g. for political activities, by the media or for medical research</i></p>	<p>Parents/carers educate their children about the importance of respecting different cultures and ways of life.</p>			<p>Prevent referrals</p>
<p>Article 39 Recovery from trauma and reintegration <i>Children who have experienced neglect abuse exploitation , torture or who are victims of war must receive special support to help them recover their health, dignity, self respect or social life</i></p>				