

1 Tuesday, 22 September 2020  
 2 (10.30 am)  
 3 THE CHAIR: Good morning, everyone, and welcome to Day 2 of  
 4 this public hearing. Please go ahead, Ms Hill.  
 5 MS HILL: Good morning, chair and panel. This morning, we  
 6 are going to hear evidence from two anonymous witnesses.  
 7 First of all, chair, we are going to hear from CS-A2.  
 8 MS LEEK: Sorry, chair, but I think it is A12, not A2.  
 9 MS HILL: Forgive me, I'm sorry, it is A12. I'm sorry if  
 10 I made that mistake. Can I ask for CS-A12 to be sworn,  
 11 please.  
 12 WITNESS CS-A12 (affirmed)  
 13 Examination by MS HILL  
 14 MS HILL: Good morning. Can you see and hear me all right?  
 15 **A. Yes.**  
 16 Q. You have provided the inquiry with a witness statement  
 17 with the following reference: INQ005276. Is that  
 18 statement true, to the best of your knowledge and  
 19 belief?  
 20 **A. Yes.**  
 21 Q. The chair and panel have a copy of your statement, and  
 22 I think you have been given a topics list that I propose  
 23 to go through to help you understand the order in which  
 24 I would like to ask you some questions.  
 25 If, at any point, you can't see or hear me, or you

Page 1

1 **they weren't good, but they weren't particularly bad**  
 2 **either. They were just normal.**  
 3 Q. In your witness statement, you've said that, in the year  
 4 of your 7th birthday, you were living in a hostel house,  
 5 and that's where your mum met your stepdad. Can you  
 6 tell us a bit about that, please?  
 7 **A. Well, my sister's father had -- their relationship had**  
 8 **broke down, and he had attempted to kidnap my sister**  
 9 **because there were some disputes over custody, so my mum**  
 10 **had then seeked refuge and we'd gone into the hostel**  
 11 **house, which had been in the same area that my mum had**  
 12 **brought up in when she was younger, and she met**  
 13 **a man who was with her old -- he was her old best**  
 14 **friend's brother, and that's when they started dating.**  
 15 Q. This is the person you describe as your stepdad?  
 16 **A. Yes.**  
 17 Q. I should have made clear at the beginning, I think you  
 18 know that we are not going to hear evidence about which  
 19 geographical part of the country these events took place  
 20 in.  
 21 **A. Yes.**  
 22 Q. You can carry on, then, and perhaps tell us a little bit  
 23 about your relationship with your stepdad.  
 24 **A. To start off with, it was all right. They met in the**  
 25 **summer near my birthday, so about July. By -- I think**

Page 3

1 don't understand the question, then please let me know.  
 2 Is that all right?  
 3 **A. Yeah, that's fine.**  
 4 Q. If you find it difficult to give any of your evidence  
 5 and you'd like me to remind you about things in your  
 6 statement, then please also do let me know, and I'll try  
 7 and follow the order on the topics list as best I can,  
 8 and if there is anything else that you have difficulties  
 9 with, then please do say.  
 10 **A. All right, thank you.**  
 11 Q. Please try and keep your head up and your voice up as  
 12 best you can, so that we can hear you clearly, and if,  
 13 at any point, you want a break, please let me know.  
 14 **A. All right.**  
 15 Q. Can I begin by asking you some questions about your  
 16 early childhood, and, in particular, about how things  
 17 were perhaps before you were age 7. So perhaps just  
 18 give us a little bit of information about that, please?  
 19 **A. My mum had me when she was 14, so she was quite young,**  
 20 **and we struggled a lot, like, financially. We didn't**  
 21 **really have a lot, or anything like that. We had -- she**  
 22 **had a relationship throughout most of my young**  
 23 **childhood, but then they split up and I had no contact**  
 24 **with him again and I was about -- I was about five when**  
 25 **she got with my sister's father, and things weren't --**

Page 2

1 **it was new year was the first time that he beat her up,**  
 2 **and that's when the domestic violence started quite**  
 3 **regularly after that. He'd get drunk and a few times**  
 4 **a month there'd be very big incidents, quite serious**  
 5 **incidents. Like, instances where he put her head**  
 6 **through a double glazing window, and stuff like that.**  
 7 **He'd sit with knives underneath the chairs and say, "I'm**  
 8 **going to kill your mummy when she gets home", and stuff,**  
 9 **so they were quite serious incidents.**  
 10 **He was arrested a few times for threats to kill her**  
 11 **and stuff like that.**  
 12 Q. I think you've said police were called several times and  
 13 he was accused of GBH, attempted murder and death  
 14 threats. But I think you've said in your witness  
 15 statement that often your mum didn't want to continue  
 16 with the criminal prosecutions; is that right?  
 17 **A. Yes. She dropped them near enough every time. She did**  
 18 **once get a restraining order against him that she paid**  
 19 **for, but even that didn't last. That was dropped pretty**  
 20 **soon afterwards.**  
 21 Q. The violence that you have described him using towards  
 22 your mum, did he ever assault you?  
 23 **A. Yes.**  
 24 Q. Do you want to tell us a little bit about that?  
 25 **A. He was beating my mum up in the front room, and I came**

Page 4

1 down the stairs and into the front room, and I tried  
 2 intervening, and as I, like, tried getting him off of  
 3 her -- sorry, I'm just trying to -- so I tried getting  
 4 him off of her, and then he came at me, so I ran from  
 5 the front room to the bottom of the stairs. He slammed  
 6 the front room door and it hit me on the head, and then  
 7 I ran outside and I started knocking on the neighbour's  
 8 door. No-one answered the door, so I -- and he stood at  
 9 the door telling me to get back inside. So I went back  
 10 inside and he hit me at the side of the head. He  
 11 punched me in the head, basically.

12 Q. You say in your witness statement that, in fact, he was  
 13 convicted of criminal charges in relation to that  
 14 incident. Is that right?

15 A. **Yeah, he spent -- he wasn't long in prison, but he did  
 16 spend some time in prison, and he is on the child  
 17 offenders register.**

18 Q. You've explained in your witness statement that the  
 19 violence that your mum suffered led to her mental health  
 20 being badly affected. Can you tell us a little bit  
 21 about that?

22 A. **She started trying to kill herself a lot. Like, there  
 23 was episodes of self-harm in front of both me and my  
 24 little sister, suicide attempts while she was in sole  
 25 care of me and my sister. I had to learn my**

Page 5

1 A. **Multiple times, yes. I think they've been involved most  
 2 of my life.**

3 Q. You say in your witness statement that those events that  
 4 you have described before you were 12 led to  
 5 Social Services -- well, that "Social Services", you say  
 6 here, "were involved, but they always decided that my  
 7 mother was safeguarding us well enough and didn't assist  
 8 further, even though we were far from safe in her  
 9 custody"?

10 A. **Yes.**

11 Q. Is that what you think is the truth of what your  
 12 situation was before you were 12?

13 A. **Yes. They should have intervened a lot more; maybe not  
 14 removed us, but they should have made sure that she got  
 15 the appropriate mental health care and the appropriate  
 16 support and that we got support outside of her as well.  
 17 Like, we had -- like, the other conversations we really  
 18 had was with her and the social workers. We didn't  
 19 have, like, no outside counselling, no outside help,  
 20 nothing like that. I had a learning support worker at  
 21 school for a bit, but that same learning support  
 22 worker -- my mum worked in the same school, so  
 23 I couldn't really ever even open up to her properly  
 24 because I knew that, on a personal level, she went out  
 25 drinking with my mum at weekends.**

Page 7

1 grandmother's home number off by heart, just in case  
 2 I ever needed to ring her to get help, and my grandma  
 3 came down a lot of times and had to look after us while  
 4 my mum went to hospital for various issues to do with  
 5 her mental health. She was on medication. It  
 6 eventually led to her getting diagnosed with psychosis  
 7 and she got sectioned in a mental hospital on voluntary  
 8 for quite a while, for a few months, when I was about  
 9 17.

10 Q. Were there occasions when your mum was also violent  
 11 towards you?

12 A. **Yes.**

13 Q. I should have probably tried to give some dates to this,  
 14 and I'm sorry that I didn't do that at the beginning.  
 15 Can I just try and clarify this, that you were born --  
 16 don't give us your exact date -- in 1993; is that right?

17 A. **Yes.**

18 Q. So the events that we are talking about take place,  
 19 obviously, beginning with that year. These events that  
 20 you have described are happening before you're about 12;  
 21 is that right?

22 A. **Yes. I ran away from home when I was 12, because I'd  
 23 had enough.**

24 Q. Just before you were 12 and started running away, were  
 25 Social Services already in contact with your family?

Page 6

1 Q. You said already that, when you were 12, you started  
 2 rebelling and running away. I think in your witness  
 3 statement you've also said that you started self-harming  
 4 and began to need medical treatment for a stress-related  
 5 condition.

6 A. **Yes.**

7 Q. Did that make any difference to the actions of  
 8 the Social Services?

9 A. **No. They knew I was self-harming, and they knew that  
 10 I was treated for depression and stress and stuff along  
 11 them lines by the doctors from as early as about  
 12 12 years old.**

13 Q. When you did run away from home, or leave home, and when  
 14 you then returned, did you have discussions with the  
 15 police and Social Services about why it was you'd left,  
 16 and things like that?

17 A. **Yeah. When the police had found me when I'd run away,  
 18 they would try to take me back, and I would cry and say  
 19 I didn't want to go back, they were -- they'd been  
 20 hitting me, things weren't good at home. I told them  
 21 everything, and they would forcibly get me in the car  
 22 and take me back to the house and forcibly carry me in  
 23 the house and assist my mum in locking me in the house.**

24 Q. Can you remember what sort of words or language were  
 25 used about you in these Return Home -- or these

Page 8

<p>1 interviews?</p> <p>2 <b>A. They used to roll their eyes and say, "Good luck with</b></p> <p>3 <b>that one. You've got your hands full with her", and</b></p> <p>4 <b>stuff like that to my mum, just basically saying that</b></p> <p>5 <b>I was a bad child, that I was the issue. They never,</b></p> <p>6 <b>ever looked into what I was saying. They just put me</b></p> <p>7 <b>down as being a volatile teen, and that me and my mum</b></p> <p>8 <b>had a volatile relationship, and that I was rebelling</b></p> <p>9 <b>against my boundaries.</b></p> <p>10 Q. In your witness statement, you've said:</p> <p>11 "I was called a liar, a rebellious, out-of-control</p> <p>12 teen and told I was the problem, not my home</p> <p>13 conditions."</p> <p>14 Is that right?</p> <p>15 <b>A. Yes, I was treated as if I was just an out-of-control</b></p> <p>16 <b>person; like I just wanted to be naughty and there was</b></p> <p>17 <b>no reason behind it. They never looked at why I was</b></p> <p>18 <b>acting up and tried to find out what the root cause of</b></p> <p>19 <b>it were. It was just, "Oh, she's naughty".</b></p> <p>20 Q. In your witness statement, you've, at various points,</p> <p>21 listed a series of questions, if you like, that you have</p> <p>22 about how things were. Can I just try and summarise</p> <p>23 what you have said at paragraph 5 in this way. During</p> <p>24 this time, many mistakes were made by professionals and</p> <p>25 you say there were regular instances of domestic</p> <p style="text-align: center;">Page 9</p>	<p>1 violence, there were safeguarding issues:</p> <p>2 "Why didn't Social Services take more of an active</p> <p>3 involvement? Why were my claims about what was</p> <p>4 happening at home not taken more seriously? Why was I,</p> <p>5 the victim and the child, told that I was the problem?</p> <p>6 Why was it not taken more seriously when I started</p> <p>7 self-harming at such a young age and I was showing</p> <p>8 physical and mental side effects consistent with abuse?</p> <p>9 Why were these not picked up on and investigated</p> <p>10 further?"</p> <p>11 Does that broadly reflect how you feel about that</p> <p>12 period of time?</p> <p>13 <b>A. Yes.</b></p> <p>14 Q. There came a point when you were placed in a care home,</p> <p>15 and you've said in your witness statement that the</p> <p>16 reason why you were put in a care home was on the</p> <p>17 grounds of your volatile relationship with your mother,</p> <p>18 and still the authorities not believing what was</p> <p>19 happening to you at home; is that right?</p> <p>20 <b>A. Yes.</b></p> <p>21 Q. You've explained in your witness statement how, first of</p> <p>22 all, you were placed in what we will call children's</p> <p>23 home 101 and then you were placed in children's</p> <p>24 home 100. Dealing with the first one, 101, just give us</p> <p>25 a little bit of a sense about how you felt there and how</p> <p style="text-align: center;">Page 10</p>
<p>1 safe, in particular, you felt?</p> <p>2 <b>A. It was a temporary care home, so it's not a long-term</b></p> <p>3 <b>one. It's where you go until you find the long-term</b></p> <p>4 <b>placements. It was in quite a bad area that had quite</b></p> <p>5 <b>a high CSE record anyway, and that care home itself was</b></p> <p>6 <b>well known for CSE issues.</b></p> <p>7 <b>We all used to -- they had magnetic doors and stuff,</b></p> <p>8 <b>but we used to set the fire alarms off so we could get</b></p> <p>9 <b>out and, one day, one of the workers had tried to stop</b></p> <p>10 <b>us from going out and said that he didn't care what</b></p> <p>11 <b>happened, he didn't want to get the phone call to say</b></p> <p>12 <b>that we'd been found dead in a ditch, and then the next</b></p> <p>13 <b>day he was put on -- he was suspended without pay for</b></p> <p>14 <b>not letting us go out, because, apparently, it was</b></p> <p>15 <b>against our rights to be able to leave the building when</b></p> <p>16 <b>we wanted and go do what we wanted.</b></p> <p>17 Q. Was it your perception that he was trying to protect</p> <p>18 you?</p> <p>19 <b>A. Yes, he was. He knew we was going out with older males</b></p> <p>20 <b>and we were getting given alcohol and drugs and stuff</b></p> <p>21 <b>like that, and he was worried that one of us'd die and</b></p> <p>22 <b>that he'd then have to have that on his conscience</b></p> <p>23 <b>because he'd let us leave the building.</b></p> <p>24 Q. You say in your witness statement that, at the time you</p> <p>25 were placed in children's home 101, you'd already lost</p> <p style="text-align: center;">Page 11</p>	<p>1 trust in the Social Services, you were struggling to</p> <p>2 work with them, and up until that point, "I'd not had</p> <p>3 any freedom at all because of my home conditions". You</p> <p>4 say this:</p> <p>5 "I was called a rebellious teen that much that</p> <p>6 I started to act exactly how they were treating me."</p> <p>7 Tell us a little bit about that, please?</p> <p>8 <b>A. I went off the rails. I went from not being allowed out</b></p> <p>9 <b>of my garden to having no boundaries at all, nothing</b></p> <p>10 <b>stopping me from doing anything, and I just -- no-one</b></p> <p>11 <b>tried speaking to me or tried getting through to me or</b></p> <p>12 <b>tried working with me. They just left me basically to</b></p> <p>13 <b>do what I wanted, and I just kind of -- it was like</b></p> <p>14 <b>a domino effect. I'd go out once and have fun, and</b></p> <p>15 <b>nothing'd happen to me, so then I'd go out again and</b></p> <p>16 <b>again and a bit more, and it just spiralled like that</b></p> <p>17 <b>until I was basically in too deep already without even</b></p> <p>18 <b>noticing.</b></p> <p>19 <b>I had no, like, thoughts about working with the</b></p> <p>20 <b>social workers or anything like that, because I didn't</b></p> <p>21 <b>want to work with people that didn't believe me. If</b></p> <p>22 <b>they didn't believe me, then what was the point in</b></p> <p>23 <b>working with them because anything I'd say to them, it</b></p> <p>24 <b>wouldn't even matter.</b></p> <p>25 Q. Were things any different when you went to children's</p> <p style="text-align: center;">Page 12</p>

1 home 100?  
 2 **A. No, it got worse in there.**  
 3 Q. You say in your witness statement that by the time you  
 4 arrived at children's home 100 -- I should have asked  
 5 you this: how long were you at children's home 101 for?  
 6 **A. A few months. I can't remember exactly. Maybe about**  
 7 **three months.**  
 8 Q. You say:  
 9 "I went to children's home 100 an already broken,  
 10 abused and mentally scared girl. They already knew the  
 11 behaviour I was displaying before deciding the best home  
 12 to suit my needs was that care home."  
 13 Do you think, now, that children's home 100 was the  
 14 best place for you?  
 15 **A. No, definitely not. It was -- it's in the worst**  
 16 **place -- the worst area in -- from where I'm from. It**  
 17 **has high rape, child abuse, drugs, violence; everything**  
 18 **is as high as it can be. There was often instances that**  
 19 **we witnessed from the care home of violence out on the**  
 20 **streets from gang members beating each other up,**  
 21 **fighting, throwing each other out of windows, tying**  
 22 **a guy to the back of the car and dragging him down the**  
 23 **road over drug money, and this is a care home that was**  
 24 **specialised in people aged between 12 and 18, all having**  
 25 **to witness instances like that.**

Page 13

1 You say:  
 2 "Surely it's better to prevent further exposure is  
 3 to limit the risk rather than moving to a location that  
 4 makes the abuse easier to take hold."  
 5 Is that how you felt about children's home 100, that  
 6 it was creating more of a risk for you?  
 7 **A. Yeah. Upon arrival to the care home, there was another**  
 8 **girl there who was already getting abused, and one of**  
 9 **the first things that the staff member said to me is,**  
 10 **"Oh, stay away from her, she's a wrongun". They already**  
 11 **knew they had an issue there and they was already victim**  
 12 **blaming that girl and isolating her off, and they didn't**  
 13 **ever seem to realise that the fact that they was**  
 14 **isolating her off then pushed her further towards her**  
 15 **abusers because she was seen as she was doing something**  
 16 **wrong. And then, by the time I left that care home,**  
 17 **every girl in that building, apart from one, was getting**  
 18 **abused by older males. It wasn't just a one-off or just**  
 19 **one person; it was every single girl in that building**  
 20 **apart from one person, plus two more that have gone**  
 21 **after that also got abused. It was just everyone. It**  
 22 **were everywhere.**  
 23 Q. The girl that you have just talked about, is that the  
 24 person you describe in your witness statement as  
 25 victim 2?

Page 15

1 **Just leaving the care home, there would be cars and**  
 2 **cars of adult males parked outside, pulling up on the**  
 3 **pavement, blocking your passage as you're trying to**  
 4 **walk, trying to get you in the car, doing doughnuts in**  
 5 **the middle of the street, everything. You couldn't**  
 6 **leave the building without that.**  
 7 Q. You say in your witness statement that you feel that you  
 8 were exposed to more danger in these care homes and that  
 9 the decision to place you in these homes set in motion  
 10 five years of horrific abuse. Is that right?  
 11 **A. Yes, it did.**  
 12 Q. Again, you've raised a series of questions about your  
 13 treatment, and you say this, and I will try to summarise  
 14 these as best I can and I hope I can do it fairly. You  
 15 say:  
 16 "Why wasn't more effort put in place to try and  
 17 rebuild trust with me? Why wasn't there more of  
 18 a targeted approach to tackle my behaviour? Why wasn't  
 19 any help put in place for me? Why are staff members who  
 20 are actively trying to safeguard or protect the children  
 21 punished? Why, when deciding on my long-term placement,  
 22 wasn't my behaviour and vulnerability of history going  
 23 missing, taken into consideration before placing me in  
 24 a care home with CSE issues in an area that had CSE  
 25 issues?"

Page 14

1 **A. No.**  
 2 Q. That's somebody else. All right. Let me just take this  
 3 in stages, then.  
 4 **A. One second. I can try and find which one it is.**  
 5 Q. Let me just try and help you a little bit, if I may.  
 6 Just going back to your placement at children's  
 7 home 100, you say this in your witness statement:  
 8 "I was in a prime position to become a victim of  
 9 CSE. I'd just been placed in a prime location for it."  
 10 Then you go on to say every single placement you  
 11 were placed in, apart from one, was eventually shut down  
 12 for concerns about how they were run:  
 13 "They had shocking conditions and they had  
 14 highlighted multiple times concerns over CSE."  
 15 So does that reflect all of the institutions that  
 16 you were placed in, apart from one?  
 17 **A. Yes. Care home 100, that failed its Ofsted, and I think**  
 18 **so did the other care home. They got the lowest Ofsted**  
 19 **results in the area and, yeah, each and every place all**  
 20 **had concerns over CSE and around the vulnerability of**  
 21 **the people that lived there and the area they were all**  
 22 **in and the way it was run by the management taking the**  
 23 **money and not putting it back into what it should have**  
 24 **been. Like, it should have been put into, like, rent to**  
 25 **make sure that the people had secure places and stuff,**

Page 16

1 **but instead she was spending the money and not paying**  
 2 **the rent, people were getting evicted from their**  
 3 **accommodation. That was supposed to be a secure place**  
 4 **through Social Services and they were just ending up**  
 5 **homeless because she'd not paid the rent on the**  
 6 **properties.**  
 7 Q. You highlight the area that this home was located in and  
 8 you say that this had issues relating to gang crime, gun  
 9 crime, knife crime, drug crime and sexual crime. Is  
 10 this right, that the conditions in children's home 100  
 11 made your mental health get worse, to the point that you  
 12 made three attempts on your life?  
 13 **A. Yes. I took three overdoses but there was also a lot of**  
 14 **self-harming as well on top of that and multiple**  
 15 **hospital -- multiple times I had to be taken to hospital**  
 16 **for self-harming issues and stuff within that timescale**  
 17 **and I was told by the staff that I was attention seeking**  
 18 **and stuff like that, which I probably was, to be honest,**  
 19 **I probably was attention seeking, crying for help,**  
 20 **trying to get someone to notice that something wasn't**  
 21 **right, but no-one ever paid attention. I were just**  
 22 **treated like I was disgusting for doing it, not that**  
 23 **there was a reason behind me doing it.**  
 24 Q. You say in your witness statement that the impact on  
 25 your mental health meant that you became even more

Page 17

1 but that on other occasions, perhaps, there was physical  
 2 restraint used and rather difficult exchanges with the  
 3 staff. Is that right?  
 4 **A. Yeah, they told us that they weren't allowed to hug us,**  
 5 **that it was against the rules. They wasn't allowed to**  
 6 **have physical contact with us unless they was**  
 7 **restraining us for their own safety, and they was very**  
 8 **quick on restraint. There was no trying to calm you**  
 9 **down or talk you down and have a conversation with you.**  
 10 **It was straight to pinning you down and arms behind your**  
 11 **back and your face pushed to the floor and maybe, like,**  
 12 **three members of staff sat on your back. There were no,**  
 13 **like -- like, I wouldn't do that with my own children,**  
 14 **do you know what I mean? If my children were upset, I'd**  
 15 **sit down and try and find out what was wrong with them**  
 16 **and try and find out how I could help them. I wouldn't**  
 17 **pin my child to the floor.**  
 18 Q. You say in your witness statement:  
 19 "The forceful reaction to cries of help caused me to  
 20 act out further, and many times I was arrested on  
 21 charges of criminal damage at my care home or assault on  
 22 the staff".  
 23 Is that right?  
 24 **A. Yeah, I ended up hating the staff. I ended up hating my**  
 25 **situation. I hated my life. I hated everything about**

Page 19

1 dependent on your abusers. Can you just tell us  
 2 a little bit about what you mean by that?  
 3 **A. Well, I felt isolated. I felt like I wasn't wanted at**  
 4 **the care home. I felt like no-one there really cared.**  
 5 **No-one paid attention. They came there, basically, to**  
 6 **earn a wage and go home. There was a couple of members**  
 7 **of staff that I did have a kind of relationship with,**  
 8 **but majority of them, no. We didn't -- it was nothing**  
 9 **like a safe home environment, somewhere for you to feel**  
 10 **secure. It was just somewhere for you to sleep. There**  
 11 **was no love or care or consideration there, and that's**  
 12 **what I ended up craving, and the people that abused me**  
 13 **didn't just pretend to be my boyfriends or anything,**  
 14 **they pretended that I was part of their family. They**  
 15 **gave me what I was lacking at the care home. They gave**  
 16 **me somewhere where I felt like I belonged and somewhere**  
 17 **where I felt like I was wanted, and I never had any of**  
 18 **that at the care home. I was -- I felt alienated.**  
 19 **I didn't ever feel like it was my home; I just felt like**  
 20 **it was somewhere I had to go back to when I had nowhere**  
 21 **else to go.**  
 22 Q. You explain in your witness statement that sometimes,  
 23 when you came back from hospital, you did not get  
 24 sympathy or reassurance or a hug, or something like  
 25 that, which is what you felt you needed, from the staff,

Page 18

1 **it. I didn't want to be at that care home. I didn't**  
 2 **want to be around any of them. There was no safety**  
 3 **there. They didn't provide a secure place for me. And**  
 4 **I'd have -- well, I did. I went out and ended up in an**  
 5 **absolutely horrible situation just to be away from the**  
 6 **staff there, because of how they made me feel.**  
 7 Q. You describe in your statement that another girl you met  
 8 at the home, who I think is who you talk about as  
 9 victim 2, you and she together would venture out of the  
 10 care home. You say:  
 11 "I felt unwanted and unloved, like I didn't belong.  
 12 We were shown attention and made to feel wanted by the  
 13 men in question. They told me they'd look after me and  
 14 encouraged me to sign myself out of care and I felt more  
 15 like I belonged with them than I'd ever felt at home or  
 16 in any placement social care had placed me in. They  
 17 managed to see what I was lacking in my life and  
 18 pretended to offer me exactly what I was needing to  
 19 manipulate me into a position where they could sexually  
 20 exploit me."  
 21 **A. Yes.**  
 22 Q. Is that how you feel about the men who abused you?  
 23 **A. Yes. Even when it was in court and I was giving**  
 24 **evidence against them, I had such conflicting feelings**  
 25 **because I -- to a certain degree, I loved these men; not**

Page 20

1 necessarily as a boyfriend or anything, but for a heck  
 2 of a lot of years, they were my family and they were the  
 3 only people that were there when I was upset or that  
 4 ever paid any attention into my life. Everywhere else,  
 5 at the care homes and the other placements, I was just  
 6 part of the furniture, I was just something that came  
 7 with the job. Whereas these people gave me someone to  
 8 rely on and someone to basically look after me and,  
 9 yeah, it came with a lot of other stuff, but I don't  
 10 think I had a full understanding that that wasn't  
 11 a normalised situation, that that's not what came for  
 12 everyone. I just thought it was part of the package,  
 13 like someone actually loves me and is looking after me,  
 14 but, yeah, there's this other stuff.

15 Q. You've explained in your witness statement that you and  
 16 other girls that had left the home were often stopped by  
 17 the police in cars with these men. You say:  
 18 "The cars were owned by older males and often  
 19 contained up to three older males as well as us."  
 20 You were often found in a drunken condition with  
 21 these people in cars. So tell us a little bit about  
 22 what your experience of being stopped by the police was  
 23 like?  
 24 A. They would stop and they'd ask us us date of births so  
 25 we'd give the date of births and obviously they'd do the

Page 21

1 normal checks with the drivers and stuff and then they'd  
 2 turn around to us and say, "You shouldn't be in this  
 3 car, should you? You're reported missing. You're going  
 4 to get the drivers into trouble with your behaviour",  
 5 and stuff like that. They'd blame us, even though they  
 6 knew this adult had children in the car. They would say  
 7 to us that we was going to get the man in trouble, not  
 8 say to the man he was going to get himself in trouble  
 9 for associating with children. But then they would --  
 10 like, one police officer told me I was what was going  
 11 wrong in our society and that I was the type of person  
 12 that was bringing about a bad society, something along  
 13 them lines, basically saying I were horrible.

14 Another one said that we were going to get these men  
 15 in trouble because we wanted to act like child  
 16 prostitutes.

17 Q. I think you've also said that you were told that you  
 18 were wasting police time because you wanted to be  
 19 a child prostitute; is that right?  
 20 A. Yes, many times we were told we were wasting police time  
 21 and that they had better things to be doing than looking  
 22 for us.  
 23 Q. You say in your statement that the driver of these cars  
 24 was almost never questioned on why he had under-age  
 25 girls in his car; is that right?

Page 22

1 A. No, they would normally -- every now and again, they'd  
 2 say something like, "Oh, watch what you're doing,  
 3 because you'll end up getting into trouble if you have  
 4 these girls in the car", but they never said anything  
 5 like, "Why have you got children in the car?" These  
 6 people already knew how old we were, because we were  
 7 quite open to give our date of births in front of  
 8 the drivers to the police, and stuff like that. These  
 9 people knew how old we were. But they never once  
 10 questioned why they had someone that young in their car  
 11 and why we had the alcohol, where we'd got the alcohol  
 12 from. We weren't even old enough to buy alcohol, so why  
 13 were we sat in the back of the cars with bottles of  
 14 vodka? And the police never asked where it come from or  
 15 anything like that. They never looked into anything.  
 16 They'd just get us out of the car, drop us back at the  
 17 care home and go on their way.

18 Q. You say in your witness statement that often when you'd  
 19 been out, you say this, you'd been plied with alcohol.  
 20 Had these men supplied the alcohol to you?  
 21 A. Yes.  
 22 Q. You say, when you were dropped off back at the care  
 23 home, you were often not allowed back in, as you were  
 24 under the influence of alcohol:  
 25 "Many times, we had to go and entertain ourselves

Page 23

1 until 7.00 am when the day staff came on shift."  
 2 Just tell us a bit about that?  
 3 A. Yeah, we -- I remember one day when we'd gone back and  
 4 they said -- we knocked on the door and they said,  
 5 "You're not coming in, you're too drunk, we're not  
 6 dealing with this. Come back when the day staff come  
 7 on", so me and victim 2 went to the park that was near  
 8 the care home and we ended up playing in the park until  
 9 7.00 in the morning, and that just shows as well how  
 10 young we were mentally. We were drunk and kids, but we  
 11 were off playing in the park, playing on roundabouts and  
 12 swings and stuff. We did that from about 5.00 am until  
 13 7.00 am.

14 Q. You say in your witness statement that that happened --  
 15 that sort of thing happened many times; is that right?  
 16 A. Yes.  
 17 Q. Sometimes, you say, the police said, when they'd picked  
 18 you up missing, "We aren't a taxi service", and that you  
 19 and your friend had to find your own solution to your  
 20 own problems. Is that something you remember being  
 21 said?  
 22 A. Some days, because, like, a lot of the times when the  
 23 actual abuse was happening, the men would say stuff  
 24 like, "If you're not going to do as you're told, you can  
 25 get out of the house", and some days I decided to just

Page 24

1 run out of the house and run away, and I'd go to the  
 2 phone box and I'd ring the non-emergency police number  
 3 and I'd say, "I'm a missing person and I really want to  
 4 go home", and they would have known as well, because  
 5 I was on the at risk of child sexual exploitation  
 6 register, like it was all documented, they would have  
 7 known my background and known what I was at risk of, and  
 8 they would say, "We're not a taxi service. Make your  
 9 own way home. You put yourself in that position. Get  
 10 yourself out", and they would leave me, and there's been  
 11 many times I've had to jump into other random people's  
 12 cars to try and get home, just to get away from the  
 13 houses where I were getting abused in the first place.  
 14 Q. The staff at the care home, did they know that you were  
 15 going out with these men and being given alcohol and  
 16 drugs?  
 17 A. Yeah, they used to speak to them. They used to park  
 18 outside the care home and they used to speak to them or  
 19 they'd ring up the care home number and they'd answer  
 20 the phone and put us on the phone. They had plenty of  
 21 contact with the men that were abusing us.  
 22 Q. You say in your witness statement:  
 23 "It seemed to us like the staff thought it was  
 24 normal behaviour."  
 25 Tell us a little bit about that, please?

Page 25

1 what happens when you go out with these men?", and  
 2 I said that, "We'd have a drink, maybe do drugs", and  
 3 they said, "Are these men your boyfriends?" and I said,  
 4 "Yeah, some of them. Some of them are just friends" and  
 5 they said, "Do you have sex with these men?" And  
 6 I said, "Not all the time", and they went, "Oh, right,  
 7 then", and nothing ever happened after that. So  
 8 basically, I had admitted that I was getting groomed  
 9 without saying that I was getting groomed.  
 10 Q. I think you explained that these men bought you stuff,  
 11 gave you alcohol and that you had "relationships", but  
 12 even after disclosing all of that there was no further  
 13 action taken; is that right?  
 14 A. No.  
 15 Q. Tell us about, then, an incident where you and victim 2  
 16 had been brought back to the care home by police, having  
 17 been found in an older man's car at around midnight:  
 18 "We asked staff to let us back out."  
 19 Tell us what the reply you were given was when you  
 20 asked to be allowed back out of the care home?  
 21 A. He said, "Okay, but if anyone asks, your friends had set  
 22 the fire alarms off", and then he opened the door and  
 23 let us out.  
 24 Q. Did that member of staff know where you were likely to  
 25 be going?

Page 27

1 A. They'd wave to them on the way in. Like, one of  
 2 the girls that lived at the care home, she was getting  
 3 ready to go on a date with some 30-year-old man, and  
 4 they were helping her pick out her outfit, and stuff  
 5 like that. They never questioned it. Victim 2 used --  
 6 she was classed as "going out with" one of the men,  
 7 who's now in prison, and they used to talk to her while  
 8 she were getting ready to go out and see him. They'd  
 9 never sit and say, "Oh, you shouldn't be going out to  
 10 see him", they'd just talk to her like a normal  
 11 conversation and about normal stuff, like she were going  
 12 and meeting a normal 14-year-old boyfriend, not  
 13 a 28-year-old man.  
 14 Q. How old were you and victim 2 around this time?  
 15 A. About 14, 13.  
 16 Q. You say in your witness statement:  
 17 "When concerns were raised to me that I may be  
 18 getting groomed, I said I wasn't."  
 19 So who was asking you those questions?  
 20 A. They referred it to Barnardo's, I think, because I was  
 21 on the CSE register and everything like that, and  
 22 someone came out to speak to me and asked me if  
 23 I thought I was getting groomed and I said, "No, I don't  
 24 think so", and they said, "Do you know what grooming  
 25 is?" And I said "Yeah", and they said, "All right, so

Page 26

1 A. Yeah, he knew we were getting picked up outside.  
 2 Q. There was then an occasion when you and victim 2 had  
 3 been out with some older men, and this is on the night  
 4 before your 15th birthday. I'm talking about the  
 5 incident at paragraph 13 and onwards in your witness  
 6 statement. You describe, on that occasion, that you'd  
 7 gone to some apartments with these men, and that they'd  
 8 passed you a drink that you now think had been spiked?  
 9 A. I know it had been spiked. It were pure orange juice,  
 10 Tropicana, and he poured them into two tall, like,  
 11 half-pint glasses but, you know, the straight ones, and  
 12 he had a stirrer and he, like, mixed both of the drinks  
 13 up. We asked him why he mixed them and he said, "Oh, it  
 14 just makes it taste better". Then he came over and  
 15 passed one to victim 2 and then he passed his arm over  
 16 and passed another one to me and said, "That one's for  
 17 the birthday girl!". Then he said he was going to the  
 18 toilet and he walked off to the toilet. Me and victim 2  
 19 were sat laughing and giggling about certain stuff and  
 20 we was sipping us drinks, and then, all of a sudden,  
 21 I started feeling very strange. I stood up and  
 22 everything were, like, moving weird and I couldn't  
 23 breathe properly and I just -- I felt really, really  
 24 weird. I took a couple of steps and I passed out and  
 25 I hit my head on the skirting board and had a fit. And,

Page 28

1 while I was having a fit, I vomited, and the vomit was  
 2 all in my face and in my hair. Victim 2 were trying to  
 3 bring me round, but she didn't really know what to do  
 4 and she were panicking a bit. Then I came round and the  
 5 guy that was there was just stood watching and staring  
 6 and then he was on the phone. I was, like, washing my  
 7 hair out over the bath, because there was vomit all in  
 8 it, and he was on the phone saying, "What the heck was  
 9 that? She's just had a fit", this, that and the other.  
 10 I can't remember exactly what he was saying, but he said  
 11 enough for me and victim 2 to know that they had put  
 12 something in my drink. We asked for them to take me to  
 13 the hospital and they said, "No, we're not taking you to  
 14 the hospital. I wouldn't dare. We will drop you off  
 15 near your care home". Then me and victim 2 were freaked  
 16 out about getting in the car because a car turned up  
 17 with two more males in it, so there was then three  
 18 males, and she was scared to get into the middle and so  
 19 was I, but we ended up somehow getting in and they  
 20 dropped us off near the care home.  
 21 Q. So you understand, do you, that one of these men had put  
 22 some kind of drug in your orange juice?  
 23 A. Yes.  
 24 Q. When you were dropped off at the care home, staff, you  
 25 say in your witness statement, started having a go at

Page 29

1 on you still?  
 2 A. The drug and the fit, I think, a mixture of them both.  
 3 Q. But I think you say that you didn't get any medical help  
 4 from the staff, and that, when you did come back down  
 5 after three days, they said something to the effect of,  
 6 "You finally decided to get out of bed and grace us with  
 7 your presence"; is that right?  
 8 A. Yes, and a police officer turned up during the few days  
 9 I was in my room to arrest me for criminal damage  
 10 because I'd smashed a mirror in my room about a week  
 11 before, and the police officer opened the bedroom door,  
 12 and I remember it were a female officer and she took one  
 13 look at me and she said, "I'm not arresting her in that  
 14 condition. You need to make sure she's all right and  
 15 get her some medical help", and then the police officer  
 16 left but still no-one got me any medical help.  
 17 Q. Were there other occasions where you were threatened  
 18 with being placed in a secure unit not for your own  
 19 safety in relation to the abuse but because of your  
 20 "behaviour"?  
 21 A. Yes. They said if I carried on acting the way I was  
 22 acting, they'd have to put me in a secure unit and that  
 23 I wouldn't be allowed out of the building, I'd have to  
 24 be kept in all the time, and that would sort my  
 25 behaviour out.

Page 31

1 you over something, and you replied, "Not now. I've  
 2 been spiked and had a fit". How did they respond to  
 3 what you said?  
 4 A. Told me I was a liar and then victim 2 said, "No, she  
 5 has", and stuck up for me, and they just turned away and  
 6 walked back into, like, the little office that were  
 7 downstairs, so I walked up into my bedroom.  
 8 Q. Just pausing there, I think you say, at this point, when  
 9 you came back to the care home, your clothes were  
 10 covered in vomit and you were really spaced out.  
 11 A. Yeah, and, like, all my hair was wet from washing it out  
 12 over the bath, but there were still, like, chunks of  
 13 vomit in my hair and stuff.  
 14 Q. I think you've described how you were very distressed  
 15 and upset by this event and you spent several days in  
 16 your room?  
 17 A. It wasn't necessarily being distressed. My whole body  
 18 hurt. Like, I was just -- I were tired and all of my  
 19 body hurt and ached and I just felt really sleepy and it  
 20 were just like I couldn't get up and do anything.  
 21 I felt poorly. I felt genuinely really poorly, and  
 22 I didn't get out of bed for a couple of days. I didn't  
 23 even wash the vomit out of my hair or off my clothes.  
 24 I just literally laid in bed covered in vomit for days.  
 25 Q. And you think this was the effects of the drug, do you,

Page 30

1 Q. You raise a series of questions about why it was the  
 2 staff didn't spot these various signs of trauma in you,  
 3 why you were allowed to go out with these men and why,  
 4 when you'd been reported missing, the police didn't  
 5 assist any more robustly than they did. You have  
 6 expressed the view, I think, that there were plenty of  
 7 missed opportunities to investigate criminal offences  
 8 against you and overall take better care of you. Is  
 9 that a fair summary?  
 10 A. Yes. There were plenty of opportunities where they  
 11 could have intervened and actually done something before  
 12 it had got too bad. Like, when we first started going  
 13 out, we'd not been -- actually been abused by that  
 14 point. Yeah, we'd been bought stuff but no-one had  
 15 actually done anything to start off because they lulled  
 16 us into a false sense of security. If they'd have  
 17 intervened at that point, neither me nor victim 2 would  
 18 have had the mental traumas that we have from what  
 19 happened through the years after that. They could have  
 20 stopped it before anything bad even happened to us.  
 21 They could have done something before it got too bad.  
 22 By the time I left that care home, I were getting  
 23 abused left, right and centre. I didn't really even  
 24 know what a normal life were.  
 25 Q. You say in your witness statement at paragraph 15 that,

Page 32



1 without going into too much detail about what you  
 2 suffered, you were a victim of grooming, violence, drug  
 3 and alcohol exposure and sexual abuse, and then, because  
 4 you have, what you describe in your witness statement,  
 5 developed a warped perspective on sexual behaviour, did  
 6 you start a relationship of a sexual nature with another  
 7 person who lived at the care home?  
 8 **A. Yeah. We both kind of went to each other for comfort.**  
 9 **Like, we both needed that comfort in us life and,**  
 10 **because I didn't really understand how you're supposed**  
 11 **to act sexually, that comfort turned into a sexual**  
 12 **relationship.**  
 13 Q. Did you end up becoming pregnant?  
 14 **A. Yes. I was 15 and he was 17, and I conceived my child**  
 15 **inside the care home.**  
 16 Q. Were staff aware that you two were having a sexual  
 17 relationship in the home?  
 18 **A. Yes, they spoke to my mum on multiple occasions about**  
 19 **it.**  
 20 Q. Were you also, around this time, when you were 15,  
 21 regularly going out to nightclubs in the area and having  
 22 a fake ID, that doormen were offering to get you fake  
 23 IDs, and things like that?  
 24 **A. Yeah, since I was 14, I'd been going clubbing. My mum**  
 25 **had called out one of the clubs on Facebook one time,**

Page 33

1 **saying, "You're letting my underage daughter in", blah**  
 2 **di blah, di blah. The next time I went, the person on**  
 3 **the door said, "Your mum has been causing a scene. If**  
 4 **you are going to come back, bring £30 with you and I'll**  
 5 **get you a fake ID". This man has since been convicted**  
 6 **of child sex crimes unrelated to my case.**  
 7 Q. Was there also a situation whereby a doorman on one of  
 8 these clubs, or perhaps more than one occasion, gave you  
 9 ecstasy pills?  
 10 **A. Yeah, this is the same doorman that got done in**  
 11 **a different case. He would sell me ecstasy pills for**  
 12 **£10, but quite a lot of them, and then he'd also -- we'd**  
 13 **just be dancing on the dance floor and he'd walk past**  
 14 **and just pop a pill into his mouth as he were walking**  
 15 **past and stuff. He fed us with ecstasy quite a lot.**  
 16 Q. You say you went most Fridays and Saturdays in that  
 17 club; is that right?  
 18 **A. Sometimes even Sundays and Thursdays.**  
 19 Q. You say that you were a young-looking 15- or  
 20 16-year-old, but never once did the police enquire about  
 21 your age, even though there were police officers outside  
 22 the club; is that right?  
 23 **A. Yeah. There were police officers there a lot, because**  
 24 **there was a lot of violence there. Like, there were**  
 25 **shootings there and stuff like that. So the police had**

Page 34

1 **to keep quite a heavy eye on the nightclubs because of**  
 2 **stabblings and shootings and stuff along them lines.**  
 3 Q. You say you were a young-looking 15- or 16-year-old and  
 4 you used to tell people that you'd been going to clubs  
 5 regularly, but you were never once asked for ID until  
 6 your 18th birthday?  
 7 **A. Yeah.**  
 8 Q. Sorry, is that right?  
 9 **A. Yes, literally, on my 18th birthday, we went out and**  
 10 **I got asked for ID.**  
 11 Q. You raise a series of questions about why the staff at  
 12 the home didn't monitor the hallways in the evening to  
 13 see who was home, why there were not more -- why there  
 14 wasn't more investigation of concerns about you being in  
 15 these nightclubs underage, why the same nightclubs were  
 16 allowed to open when it was common knowledge that they  
 17 were letting in underage girls, and why the doormen were  
 18 able to sell you drugs and things like that. Is that  
 19 right?  
 20 **A. Yeah, well, the staff was meant -- they were meant to**  
 21 **sit on the hallway all night, they're meant to stay**  
 22 **upstairs and monitor the hallway, but they would**  
 23 **probably sit there for about 15 minutes, maybe 20, and**  
 24 **then they'd go downstairs and they wouldn't come back**  
 25 **up.**

Page 35

1 Q. So is that how you and other girls in the home were able  
 2 to leave?  
 3 **A. Well, the doors were on magnets, so they -- we could**  
 4 **never leave the care home without them knowing that we'd**  
 5 **left the care home, but we could go into each other's**  
 6 **rooms because they'd be downstairs. There's meant to be**  
 7 **a rule where you're not allowed in each other's room**  
 8 **with the door closed, but they never monitored that.**  
 9 **We'd just go into each other's rooms and have the door**  
 10 **closed and they wouldn't have no idea what were going**  
 11 **on. Bear in mind, this care home is for between**  
 12 **12-year-olds and 18-year-olds of both sexes, so they**  
 13 **were supposed to keep an eye on it because of the fact**  
 14 **it is a mixed sex and it is at the age where stuff like**  
 15 **that happens.**  
 16 Q. When you were leaving the home to go to nightclubs and  
 17 things like that, is it your understanding that the  
 18 staff would know that you had gone out?  
 19 **A. Yes, they would know because the doors -- from**  
 20 **10 o'clock, the doors were on magnets. So what we'd do**  
 21 **is we'd go and say to them we wanted to go out for**  
 22 **a last cig, but we'd be all dressed up, with us makeup**  
 23 **on and dresses on, and stuff like that, and they'd open**  
 24 **the doors, let us go for a last cig, knowing that we**  
 25 **wouldn't come back in.**

Page 36

1 Q. Were there various occasions when you, yourself, were  
 2 arrested on charges of criminal damage and assault and  
 3 things of that nature?  
 4 **A. Yeah, I think I've got at least --**  
 5 Q. You don't need to tell us the details, I don't think,  
 6 but is it right that you were prosecuted several times  
 7 for criminal damage and assault on both staff at the  
 8 care home or the police?  
 9 **A. Yeah, at least 12 times.**  
 10 Q. There was one incident, was there, where you'd been  
 11 beaten up by an older man and there was an incident  
 12 involving a knife where I think you chased him to his  
 13 car with the knife, but it was you who got arrested and  
 14 prosecuted; is that right?  
 15 **A. Yes, I was prosecuted for possession of an illegal  
 16 weapon in a public place because I had a bread knife  
 17 that I used to chase him to his car. They said if  
 18 I hadn't have left the doorstep they wouldn't have done  
 19 me, but because I stepped over the doorstep, they  
 20 prosecuted me, even though I had bust lips and a bust  
 21 nose, a black eye and I had fingerprint marks around my  
 22 arms and my throat.**  
 23 Q. You raise questions about why the police and the CPS and  
 24 the judges failed to see that your behaviour was  
 25 a result of the abuse, but instead you feel that you

Page 37

1 Q. Is that all right? You said in your witness statement  
 2 that you feel that, time and again, the people that were  
 3 meant to be looking after you didn't seem to understand  
 4 what child sexual exploitation was. Is that right?  
 5 **A. No, they didn't. They didn't have a clue. In the  
 6 adoption papers for my daughter, it literally says in  
 7 there that they're removing her because I was a victim  
 8 of a paedophile ring, and it wasn't an appropriate  
 9 environment for her, but it was all right for me to be  
 10 left there, bearing in mind I was 16-year old. They  
 11 didn't have a clue. They didn't care. I don't think  
 12 it's necessarily that they have -- that they didn't  
 13 understand. They didn't care. They didn't want to take  
 14 the time to understand. We were seen as lost causes.  
 15 We were, like, the type of people that they were willing  
 16 to sacrifice to have an easy life. Like, it mattered  
 17 about my daughter, which I'm glad it did, it mattered  
 18 about her and getting her to safety, but it didn't  
 19 matter about me or the other 50 girls that were getting  
 20 raped on a daily basis in that area.**  
 21 Q. Just a few questions, then, about a different place.  
 22 This was, I think, when you went to the refuge; all  
 23 right? So I'm just dealing with some questions about  
 24 that period of time. You say there was another  
 25 occasion -- this is paragraph 20 of your witness

Page 39

1 were punished for your own response to the trauma; is  
 2 that right?  
 3 **A. Yes. If I ever lashed out or got upset, I was either  
 4 restrained, arrested or prosecuted. Like I say, one of  
 5 the incidents, I was prosecuted because I smashed  
 6 a mirror in my bedroom. Like, I think that's quite  
 7 pathetic, really, to have someone criminally convicted  
 8 because they got a bit upset and smashed a mirror.  
 9 Like, they didn't have no lenience. No matter what you  
 10 did, they would prosecute you.**  
 11 Q. I think you gave birth to your baby in 2009; is that  
 12 right?  
 13 **A. Yes.**  
 14 Q. You eventually were in a women's refuge, I think -- is  
 15 this right -- because you'd been raped by your mother's  
 16 neighbour?  
 17 **A. Yes. Can I take a break before we go into this part  
 18 because this part gets difficult when it's to do with my  
 19 child?**  
 20 Q. I can probably not ask you any questions, in fact, about  
 21 your child, if that helps you. I can move on to the  
 22 next topic. Shall I ask you a few questions and see if  
 23 you think you can continue? All of the detail you've  
 24 given at paragraph 18 I don't think I need to go into.  
 25 **A. Yeah.**

Page 38

1 statement -- when you were raped. Is that right?  
 2 **A. Yes.**  
 3 Q. And that you managed to get a taxi back even though you  
 4 had no money. When you said to the staff on arrival,  
 5 "There's a taxi outside. You can either pay it or not,  
 6 I'm not even bothered", the staff started to tell you  
 7 that they wouldn't pay it and they could see that you  
 8 had makeup all down your face and you were crying and  
 9 you said that you think you'd been raped?  
 10 **A. I was covered in blood as well. I had blood all down my  
 11 legs and bruises all up my arms.**  
 12 Q. I'll just take this quite shortly, if I may. They asked  
 13 if you wanted the police and you said no. Then you  
 14 describe going up to your room and scrubbing yourself  
 15 for hours in the bath. Is that right?  
 16 **A. Yeah, and I took my clothes off. I was in two minds.  
 17 I always know, thinking back, I was in two minds. All  
 18 it would have taken was for a police officer to turn up  
 19 and ask me and I would have told them everything,  
 20 because, when I took my clothes off, I put them in  
 21 a carrier bag and I tied the top of the carrier bag and  
 22 I put them in the bottom of the wardrobe. I always kept  
 23 my clothes. I kept them for over a year after that.  
 24 Yeah, I went and got a bath and everything straight away  
 25 after, but I always kept my clothes in that wardrobe.**

Page 40

1 **It would have literally taken one person to ask me and**  
 2 **I would have told them everything, but no-one bothered.**  
 3 Q. Just to be clear, is this the refuge that you have  
 4 mentioned, the staff at the refuge never asked you or  
 5 never got you in contact with the police. Is that  
 6 right?  
 7 **A. Yeah, they never rang the police, they never reported**  
 8 **that I said I'd been raped. They never did anything.**  
 9 **They just let it go and never spoke about it again.**  
 10 Q. You've described how some of the staff went shopping  
 11 with you when it was near Eid to help you pick out  
 12 outfits to wear and another helped you learn how to cook  
 13 a curry --  
 14 **A. Yes.**  
 15 Q. -- knowing that you were going to spend time with these  
 16 men who were abusing you; is that right?  
 17 **A. Yeah, they knew that I was going to stay -- because**  
 18 **I got abused mainly at one property, like it all links**  
 19 **back to this one property, they kind of branch off from**  
 20 **each other, but there was this main property. They knew**  
 21 **I was going to stay at that property for three days.**  
 22 **I'd already told them I was staying for three days over**  
 23 **the Eid period. They helped me stick hair extensions in**  
 24 **my hair, they helped me dye my hair, they helped me pick**  
 25 **out my clothes and they helped me make a curry.**

Page 41

1 Q. You describe another event, I think, when you'd been  
 2 absent from the home for three days, you went back to  
 3 get a change of clothes, you were obviously intoxicated,  
 4 slurring in your words and staring at them with glazed  
 5 eyes, but, even then, there wasn't anything done to try  
 6 and protect you; is that right?  
 7 **A. I'm pretty sure, on that instance, I was actually**  
 8 **overdosing off of cocaine. I'd taken too much. I was**  
 9 **absolutely out of my head and I couldn't get my brain to**  
 10 **function. Like, things were going on in my brain but**  
 11 **I couldn't get myself to speak. They'd speak to me and**  
 12 **I'd go to speak back and I physically couldn't make**  
 13 **myself speak. I were just walking about in a daze.**  
 14 **I were -- it's one of, like, the worst times that I've**  
 15 **ever -- like, one of the worst conditions I've ever been**  
 16 **in. I was absolutely wrecked. I should have really**  
 17 **been taken to hospital because I couldn't function, and**  
 18 **I couldn't speak, I couldn't really get my words out or**  
 19 **do anything. All I did was literally walk about, pick**  
 20 **up some clothes, come back downstairs and walk back out**  
 21 **of the building because I couldn't speak to anyone.**  
 22 Q. The staff didn't get you medical or police help at this  
 23 point?  
 24 **A. No.**  
 25 Q. You've also raised a concern in your statement that you

Page 42

1 feel you were constantly changing social workers and  
 2 leaving care workers and so that you didn't have  
 3 consistency and stability of someone looking after you;  
 4 is that right?  
 5 **A. Yeah. I've had more social workers than I can remember,**  
 6 **and I've had at least five leaving care workers. So**  
 7 **altogether probably you're looking at between 12 and 15**  
 8 **social workers or leaving care workers in my life.**  
 9 Q. You've described in your witness statement that by the  
 10 time you were nearing your 18th year, something in you  
 11 just clicked, you say, and you, I think, having had this  
 12 very long period of abuse that you have described,  
 13 something in you clicked, you started cutting out drink  
 14 and drugs and trying to avoid contact with your abusers:  
 15 "This was not an easy process and my abusers made it  
 16 hard for me. I received no support in this from  
 17 Social Services and the police."  
 18 Essentially, is this right, that you have, since  
 19 then, had more support, you've had CBT and assessments  
 20 and things like that, and you did manage to escape from  
 21 this cycle that you were in, to some degree?  
 22 **A. I didn't have any support, no. I did CBT off of my own**  
 23 **bat. Basically, my -- that's -- it's during this time**  
 24 **when they decided to take my daughter and start the**  
 25 **proceedings for adoption, but they said they'd do**

Page 43

1 **a parenting assessment on me, and around this time, as**  
 2 **well, I found out I had cirrhosis of my liver and I was**  
 3 **very poorly. Basically, I'd been fed that much cocaine**  
 4 **and alcohol in a short period of time that my liver**  
 5 **couldn't function properly and it still doesn't. If**  
 6 **I go out and have a drink with my friends, the chances**  
 7 **are my liver function will drop the next day. So**  
 8 **between my liver not working properly, the court**  
 9 **proceedings with my daughter, and there was also this**  
 10 **moment where I was sat in my house and had nothing in my**  
 11 **house. I had my TV, just a tiny little TV. I had,**  
 12 **basically, no furniture, no belongings or nothing, and**  
 13 **I just realised it wasn't normal, like I was 18-year**  
 14 **old, going through family court with my daughter, had**  
 15 **liver cirrhosis and had nothing to my name, and no-one**  
 16 **actually cared about me. I just realised this wasn't**  
 17 **what happened to everyone else, so I stopped it myself.**  
 18 **I stopped taking cocaine, I stopped drinking, I went to**  
 19 **my doctor's and got a referral to [redacted] -- to the**  
 20 **mental hospital for --**  
 21 MS HILL: Pause there for a moment. In fact, I think we may  
 22 need to take a short break anyway. Chair, I think it  
 23 probably would be sensible to stop the feed now, in  
 24 light of the name that's just been given. But I think  
 25 it is appropriate to make a restriction order, perhaps,

Page 44

1 over that word and to have a short break. I have a few  
 2 more questions for the witness, but perhaps only about  
 3 five minutes that we can perhaps come back to after the  
 4 break. So could you make that order, chair, and then  
 5 have our short mid-morning break?  
 6 THE CHAIR: Yes, Ms Hill. I will make the order and we will  
 7 take our mid-morning break and return at 11.45 am.  
 8 (11.32 am)  
 9 (A short break)  
 10 (11.45 am)  
 11 MS HILL: CS-A12, can I ask you a few more questions.  
 12 I have explained to you in the break what happened  
 13 around the word I think you partially mentioned. Can  
 14 I just move on to ask you a few more questions, please.  
 15 You have confirmed in the break as well that you're  
 16 content to continue to give a bit more evidence. I have  
 17 about five minutes' more questions for you.  
 18 **A. Yes.**  
 19 Q. Can I ask you some questions about the contact that you  
 20 had with the police when police officers began to  
 21 investigate the abuse that you described. So can you  
 22 tell us, please, about when the police had contact  
 23 I think with your mother about investigating these  
 24 events. So what happened there?  
 25 **A. Well, it wasn't about investigating the events, it**

Page 45

1 **was -- I was going -- I was going missing, and once**  
 2 **I got added to the register of, you know, CSE, like, at**  
 3 **risk of CSE, they stopped reporting me as a missing**  
 4 **person the normal way. I didn't get reported as an**  
 5 **actual missing person, I got reported as something else**  
 6 **and added to a different register, so the police didn't**  
 7 **actually look for me properly, they didn't put as much**  
 8 **effort into it because I was a persistent missing**  
 9 **person. So my mum started ringing up the police station**  
 10 **and there was a conversation between her and a police**  
 11 **officer where she said that I was getting abused by**  
 12 **Asian males and he said that she was racist for saying**  
 13 **that and that she should be happy that I was getting**  
 14 **taught a different culture.**  
 15 Q. Was there also a time when your -- you had  
 16 a conversation with your mum about a care worker who'd  
 17 been recording the registration plates of cars? Do you  
 18 want to tell us about that?  
 19 **A. It was a social worker. She had had a conversation with**  
 20 **my mum about them sitting outside the care home and**  
 21 **taking down registration plate numbers so then they**  
 22 **could pass them on to the police to try and get these**  
 23 **men prosecuted. Apparently, her boss had said to the**  
 24 **social worker, if she did do that, then she would lose**  
 25 **her job and that by no means was she to get involved,**

Page 46

1 **and then not long after that, she was taken off my case**  
 2 **and I was assigned a different social worker.**  
 3 Q. You describe another incident -- I will try to explain  
 4 this as best I can. You say that there was a discussion  
 5 about the fact that you'd been using drugs, and someone  
 6 said words to this effect: "Weren't you ever young?"  
 7 Can you remember what sort of person it was who said  
 8 that?  
 9 **A. I think it was -- it was either a police officer or**  
 10 **a care home worker. It was one of them within the**  
 11 **conversation of my mum raising concerns over who I was**  
 12 **with and what I was doing, and they just basically said,**  
 13 **"Weren't you ever young? Let her enjoy herself",**  
 14 **basically.**  
 15 Q. You've explained in your witness statement that there  
 16 came a time, I think, in about 2018, when you gave  
 17 evidence in a criminal trial against some of the men  
 18 who'd sexually exploited you. Can you tell us a little  
 19 bit about what that was like, giving evidence?  
 20 **A. Well, you see, it weren't as easy as that. Basically,**  
 21 **before that, some police officers were investigating**  
 22 **a separate incident of CSE, a very big case from**  
 23 **a different area but related to my area. They had found**  
 24 **my name on a checklist in one of the perpetrators'**  
 25 **bedrooms along with my telephone number and they'd**

Page 47

1 **managed to trace me and track me down. So they turned**  
 2 **up at my house. I gave a statement to them, but when**  
 3 **they turned up at my house, I had my mother and my**  
 4 **sister staying, my partner, and everyone around me and**  
 5 **none of them really -- I'd never admitted to any of them**  
 6 **what had gone on, so they put me in a situation where**  
 7 **I was dealing with a lot of different impacts at the**  
 8 **same time.**  
 9 **They went away and I said that I would be interested**  
 10 **in speaking to them at a later date and they never came**  
 11 **back. So I kind of tried getting on with my life, but**  
 12 **this had opened a door for me where I couldn't really**  
 13 **move past it, so then, when everything started breaking**  
 14 **about other CSE cases, I'd ended up going to the news**  
 15 **with evidence backing up what I was saying about how**  
 16 **I had been failed and how I'd been treated during my**  
 17 **experience, which led to the police coming out again.**  
 18 **So they started an investigation, and it went to**  
 19 **court the first time in 2018.**  
 20 Q. Sorry to interrupt, just to put it in context, the first  
 21 contact you had with the police I think was in about  
 22 2014; is that right? Then the trial was 2018 to 2019.  
 23 Is that broadly right?  
 24 **A. I think it was -- we went through this earlier, didn't**  
 25 **we? One second. Bear with me. Where is that file?**

Page 48

1 Q. Perhaps you'll forgive me. Paragraph 29 of your witness  
2 statement.  
3 **A. I've got the exact dates here. One second. The first**  
4 **time was --**  
5 Q. You say at paragraph 29 of your witness statement 2012  
6 to 2013. Is that about right?  
7 **A. Just one second, please. The first time was in 2013,**  
8 **in July, the first time I spoke to the police, and then**  
9 **they didn't follow up on it, so the second time I went**  
10 **to the police was in August 2014.**  
11 Q. But then the trial is quite a few years later. Is that  
12 about 2019?  
13 **A. The first trial was 2018. We got to week 8 in the trial**  
14 **and, through legal loopholes, they managed to get**  
15 **a mistrial called and it got adjourned for a full year**  
16 **for a full retrial, so that the second trial started**  
17 **in January -- beginning of February 2019.**  
18 Q. Did you give evidence on both occasions in both trials?  
19 **A. Yes, full evidence.**  
20 Q. How did you find that?  
21 **A. Horrible. The first time, there -- because there's**  
22 **meant to be rules in place for how they question victims**  
23 **of rape and child abuse. The first time, the barristers**  
24 **representing the perpetrators pushed their boundaries.**  
25 **One of them was extremely aggressive with me, caused me**

Page 49

1 **to have a panic attack. I was accused of being a slag,**  
2 **I was spoken to like garbage, I was told, like, it was**  
3 **all my fault and I had wanted it all, and I was**  
4 **literally torn apart on that stand by at least one of**  
5 **the barristers. He got three verbal warnings in court**  
6 **about getting kicked out of court if he carried on**  
7 **questioning me the way he did, but he shouldn't even**  
8 **have been given three warnings. He should have got one**  
9 **warning, and then, when he carried on, he should have**  
10 **been removed.**  
11 Q. Is that from the judge? When you say "a warning", you  
12 mean from the judge?  
13 **A. Yes, from the judge. Multiple people put complaints in**  
14 **over how he questioned me, including Victim Support and**  
15 **my own barrister. They all put in complaints over it.**  
16 **Then they used legal loopholes about -- basically, what**  
17 **they did was, they dragged out the questioning. The**  
18 **trial was set to last eight weeks. They'd applied to**  
19 **question me for, say, 20 minutes but they was then**  
20 **taking all day, taking six hours to question me, dragged**  
21 **it out to the point that, eight weeks in, we were only**  
22 **just ready to close the prosecution case, so there**  
23 **wasn't enough time set aside for the trial to be**  
24 **finished because we had the whole side of the defence,**  
25 **so they had to call a mistrial after I'd been on the**

Page 50

1 **stand for a full week, been dragged through everything**  
2 **and they were at least on bail for another year and**  
3 **I had to go through it all again, every single bit of it**  
4 **all again.**  
5 Q. Ultimately, is it right that some of the men were  
6 convicted and given lengthy prison sentences after that  
7 long process?  
8 **A. All of them apart from one were found guilty of 21**  
9 **counts of abuse against me, including rape and child**  
10 **prostitution. They were sentenced to 132 and a half**  
11 **years to serve -- well, it was actually 302 years, but**  
12 **some of them were concurrent sentences and they'll be**  
13 **servng 132 and a half years.**  
14 Q. Finally, then, if I may, just to take this quite  
15 shortly, is this right, that you have spoken to quite  
16 a few other people, I think, and prepared a report, with  
17 the help of your solicitor, where you've summarised for  
18 the inquiry the accounts given by several other people  
19 of sexual exploitation along the same lines of what you  
20 have described, but with their own accounts, and you've  
21 summarised that in a report with this reference,  
22 INQ005277. I think, in total, you've described or  
23 you've summarised up to 14 accounts from different  
24 complainants. Is that right?  
25 **A. Yes. But I do know personally, if I wrote a list of**

Page 51

1 **names, I know personally at least 50 other girls that**  
2 **were getting abused, and they're just the ones that**  
3 **I know personally, that I've met, that I've interacted**  
4 **with, that I've seen the abuse, over that four-year**  
5 **period where I was getting abused, four/five years,**  
6 **I met at least 50 other girls under the age of 18 that**  
7 **was all in the same situation as me, all from the same**  
8 **area, or surrounding very close to that area. And,**  
9 **like -- there is a couple of points that I'd like to**  
10 **point out as well, if that's all right? I wrote some**  
11 **notes.**  
12 **Like, the fact, when I did get put on the CSE**  
13 **register as being a victim or potential victim of CSE,**  
14 **they started having meetings between the police and**  
15 **social workers, school and my mum, and multiple times**  
16 **them meetings were ended up postponed because people**  
17 **wouldn't turn up to the meetings. Nothing -- no plan**  
18 **was ever put in place in any of these meetings. It**  
19 **never went anywhere. Like, these meetings were put in**  
20 **place because I was at serious risk of being abused or**  
21 **that I was already getting abused, but, still, none of**  
22 **the meetings ever did anything, they never went into**  
23 **anything, they never went anywhere, they just got**  
24 **cancelled, because people couldn't be bothered turning**  
25 **up, and then, also, one of the men that abused me, who**

Page 52

1 **is now serving 20 years in prison, he was down on their**  
 2 **records as a known groomer for years while I was going**  
 3 **to his house and before I even went to his house, but,**  
 4 **yet, they never arrested him on grooming charges in**  
 5 **relation to me until 2014.**  
 6 Q. When you say "on the record", do you mean known to  
 7 police?  
 8 **A. It was said in one of the CSE meetings he was a known**  
 9 **groomer to police, not just in relation to me. Since**  
 10 **then, more people have come forward as well to do with**  
 11 **this man, I know one of them personally, and he was**  
 12 **already a known groomer and they mentioned that to me,**  
 13 **they mentioned that to my mum, they mentioned that to**  
 14 **the place -- the accommodation I was living in at the**  
 15 **time, but never once did they arrest him, even though**  
 16 **I was found at his house multiple times after that**  
 17 **information was disclosed. They still never arrested**  
 18 **him on grooming charges. I don't understand how someone**  
 19 **can have been highlighted as being a known groomer, have**  
 20 **a 14/15-year-old girl in his house for days on end,**  
 21 **absolutely drunk and out of her head on drugs, but still**  
 22 **not get arrested for grooming.**  
 23 MS HILL: Those are all the questions I had to ask you.  
 24 Chair, if you or the panel members have any  
 25 questions -- I'll just double-check, but I don't believe

Page 53

1 there have been any rule 10 applications. I can't see  
 2 that there have been any. Chair, those are all the  
 3 questions I have. Do you or the panel members have any  
 4 questions for this witness?  
 5 THE CHAIR: Thank you, Ms Hill. We have no questions for  
 6 the witness. But on behalf of the panel, I would like  
 7 to thank her very much. You have given us a truly  
 8 shocking account of your awful experiences; sadly, not  
 9 unfamiliar. We are very grateful to you for having the  
 10 courage to tell us all about it, and you have assisted  
 11 the inquiry.  
 12 **A. Thank you.**  
 13 MS HILL: Thank you very much for your evidence.  
 14 Chair, we will just need to take a very short break  
 15 now to allow for CS-A2 to leave the hearing room and for  
 16 the next witness to be brought in. Could I invite you  
 17 to rise for a short period of time, a few minutes, and  
 18 perhaps the core participants can just keep an eye on  
 19 the screen for when they are invited back into the  
 20 hearing room?  
 21 Thank you very much again, CS-A12.  
 22 (The witness withdrew)  
 23 THE CHAIR: Yes, we will take a five-minute break.  
 24 (11.59 am)  
 25 (A short break)

Page 54

1 (12.07 pm)  
 2 MS HILL: Chair, our next witness is CS-A371.  
 3 WITNESS CS-A371 (affirmed)  
 4 Examination by MS HILL  
 5 MS HILL: Good afternoon, CS-A371. Can you see and hear me  
 6 all right?  
 7 **A. I can, yes.**  
 8 Q. The inquiry has been provided with a statement from you  
 9 with reference INQ005852. The chair and panel have  
 10 a copy of that statement. I will take you through  
 11 certain parts of it and ask you certain questions about  
 12 topics that I think you've seen in a topics list that  
 13 I've sent to you. But if, at any point, you don't  
 14 understand the question or you'd like to have a break,  
 15 then please let me know.  
 16 **A. Yes.**  
 17 Q. If you have any difficulties seeing or hearing, then  
 18 please let me know.  
 19 **A. Yes.**  
 20 Q. Your statement indicates that you were born in 1993.  
 21 **A. Yes.**  
 22 Q. While we don't need to know anything about the  
 23 geographical area in question, is this right: you are  
 24 going to describe to the panel your experiences of child  
 25 sexual exploitation between 2003 and 2011?

Page 55

1 **A. Yes -- sorry, I think it started about 2005. I'm not**  
 2 **100 per cent sure on the actual year that it started.**  
 3 Q. Perhaps I can just ask you a few questions, then, about  
 4 your family background.  
 5 **A. Yes.**  
 6 Q. Can you tell us a little bit about your early years,  
 7 until about the age of 10?  
 8 **A. Yes. I was -- I mean, from what I've heard and what**  
 9 **I've, like, you know, like, found out and what I can**  
 10 **remember, like, I was born with a heroin addiction and**  
 11 **alcohol in my system, and then I think -- I've always**  
 12 **had a problem with shaking, so when I was 2, my parents**  
 13 **took me to a doctor, and the doctor diagnosed me with**  
 14 **anxiety, but I don't think there was ever any follow-up**  
 15 **from that.**  
 16 **My parents -- my dad was -- he was a heroin addict**  
 17 **and my mum was a heroin addict and an alcoholic, so it**  
 18 **was quite an unstable household from the beginning.**  
 19 **Then, when I was about 4, we -- my parents made the**  
 20 **decision to move away from the area because they thought**  
 21 **it would help with their addiction, so we moved to**  
 22 **a different area at that point. I think I was about 4.**  
 23 **Sorry, I'm just referring back to, like, my statement as**  
 24 **well.**  
 25 Q. I think you say that that was the area, I think, near

Page 56

1 your mother's family; is that right?

2 **A. Yeah, yeah. That was where most of the family was and**

3 **stuff, so she wanted to be back with the family to, you**

4 **know, have some moral support.**

5 **When we moved from this area, there was myself, my**

6 **mum, my dad, and I do have an older sister as well, and**

7 **a sister that I've never met from my dad's side. So**

8 **just us four, like, moved to the area, and then things**

9 **seemed to get a little bit worse because the area was**

10 **quite -- it was easy to find, you know, substances, and**

11 **they was, like, around every corner, kind of thing.**

12 **So I feel like, when we moved from the first area to**

13 **the second, that's when things, you know, got really,**

14 **really chaotic.**

15 **Q. You say, I think, in your witness statement that you**

16 **remember drug dealers coming around to the house?**

17 **A. Yes.**

18 **Q. You remember Education Welfare officers knocking on the**

19 **door to find out why you were absent from school?**

20 **A. Yes.**

21 **Q. And being told by your parents not to open the door, but**

22 **to hide if they came; is that right?**

23 **A. Yes, because sometimes they'd look through the window,**

24 **so we'd get told to hide, like, behind the couch, or,**

25 **like, sometimes we'd also get told to go out of the back**

Page 57

1 **door because the back door led onto, like, a ginnel,**

2 **like, you had to go to the end of the street and around**

3 **for -- unless you went through the back garden, so**

4 **sometimes we'd go out that and then go around to the**

5 **front.**

6 **Q. I think you say that there wasn't very much food around**

7 **in the house, that it was very difficult, that sometimes**

8 **you had to eat food off the floor or steal food from**

9 **shops and friends' houses; is that right?**

10 **A. Yeah. That's correct, yes. There was -- sometimes my**

11 **mum, when she would get paid, she would, like, blow all**

12 **the money in one, and then not, you know, provide for**

13 **throughout the time, like, in between that she next gets**

14 **paid, so, you know, sometimes we would struggle quite**

15 **a lot.**

16 **Q. You remember police coming to the house and your father**

17 **at one point being put in prison; is that right?**

18 **A. Yeah. I am aware that my dad was a drug dealer as well,**

19 **and I think -- I remember us being raided, and we was**

20 **just in the house, and then, like, the door, like, came**

21 **through -- I think I was about 7 at this point, and**

22 **I remember, like, trying to stand in front of**

23 **the doorway to stop them from coming in, and then**

24 **I think they'd, like, searched and then they'd found**

25 **some drugs under the floorboards upstairs, and then they**

Page 58

1 **arrested my dad and then they took him to prison, but**

2 **then, while he was in prison, my mum met another man**

3 **that my dad didn't know about, and he was more of, like,**

4 **a drinking partner rather than an actual partner. He**

5 **provided the alcohol. And then -- so while this was**

6 **going on, and my dad was still in prison, my mum told us**

7 **that we wasn't allowed to speak to our dad or go to see**

8 **him, so that really affected us.**

9 **And my dad was kind of -- he was unstable, he was**

10 **a heroin addict, but he was the one who kind of held it**

11 **together, like, made sure we were in school and made**

12 **sure we was clean and made sure we was, you know, fed,**

13 **so then, when he went to prison, like, we didn't --**

14 **I think we missed quite a lot of school, probably like**

15 **amounting to a couple of years, and then I think my dad**

16 **come out after a while and then it wasn't long after**

17 **that that he ended up passing away from an illness that**

18 **he'd suffered with from -- like, since quite young.**

19 **Q. You were about -- were you 10 years old at that point?**

20 **A. No, I was 8 when he died. I turned 9 that year. But**

21 **then, like, when he passed away, that's when things kind**

22 **of got, like, from bad to worse.**

23 **Q. Did you move in with your mother's new partner?**

24 **A. Yes. What happened was, when my dad died, he died,**

25 **like, in his sleep, and then, when we went to the**

Page 59

1 **funeral, we came back and someone had broke into our**

2 **house and stole the bed that he passed away on. So we**

3 **left the house with everything in it and we went to stay**

4 **with one of my mum's friends, who was also a drug**

5 **addict, and she ended up hitting my sister, so we went**

6 **from there and then that's when we went to my mum's new**

7 **partner's home where he lived with his son.**

8 **He was quite elderly, my mum's partner, and his son**

9 **was, like, mid age, and they both drank quite a lot and**

10 **it was, you know, quite a physical situation, and there**

11 **was an altercation at one point where my mum, I think,**

12 **was drunk or something and her partner and his son was**

13 **arguing about my mum, and then it got in a physical**

14 **altercation, and then the neighbour had rang the police,**

15 **and then, when the police came and they seen -- because**

16 **they'd had a physical fight, they seen that it wasn't**

17 **safe for myself and my sister and my mum to be there,**

18 **they took us to -- I think it was like a women and**

19 **children's refuge, and then, from there, we -- my mum**

20 **said that she needed to go back to the area that we was**

21 **living at that time to go and get some stuff, and what**

22 **it actually was was she was going back to go and get**

23 **drugs, and she never returned.**

24 **Then the -- because it was a women and children's**

25 **refuge, there was people who safeguarded, so they kept**

Page 60

1 asking us questions, like, "Where's your mum?" And, you  
 2 know, like, "We've not seen her for a couple of days",  
 3 so we just kept saying, like, "She's in the shower.  
 4 She's in the bath. She's gone to the shop. She's gone  
 5 out. She's in bed", and then after, I think it was  
 6 about five days, there was some social workers called,  
 7 and then they rang my mum and said, you know, "You need  
 8 to come back within the hour or we're going to take your  
 9 children", but she didn't come back within the hour, she  
 10 came back I think it was three hours late, so they said,  
 11 "We are going to be taking your children because you've  
 12 left them for this amount of time. We've rang you and  
 13 told you that we're here and you've still failed to  
 14 come".

15 Q. To put this in context, it is about 2003 that, you say  
 16 in your witness statement, you were placed in foster  
 17 care, so you must have been about 10 when this was  
 18 happening, is that right, roughly?

19 A. **In the order I remember it in is, my dad passed away and  
 20 then we went in to live with the partner and then we  
 21 went to the, like, women and children place, and then,  
 22 from there, we went to live with an auntie, but she  
 23 couldn't really handle us. We only went there for,  
 24 like, a day or two and then we ended up going to another  
 25 auntie's who lived in the original area where we was**

Page 61

1 with my mum, and because I wanted to go back with my  
 2 mum, that's why I stopped running away, but I originally  
 3 was running away because I didn't want to be in the home  
 4 because, you know, I was made to feel like an outcast,  
 5 and for a very long time I actually thought that that  
 6 was in my head and maybe I was just -- you know, because  
 7 I was a child and a lot of things happened, that it was  
 8 maybe me, but then when I originally did my trial, it  
 9 was confirmed by, you know, a few professionals that the  
 10 foster carer wasn't very interested in, you know,  
 11 talking about me and what happened and stuff. She was  
 12 more interested in my sibling and what she was doing,  
 13 rather than how -- you know, what was going on with me,  
 14 even though the trial was about me.

15 Q. I'm sorry if I misunderstood your witness statement.  
 16 I'm sorry if I got that wrong.

17 A. **No, that's okay.**

18 Q. You say in your witness statement, though, dealing still  
 19 with this period of time when you were about 11, that  
 20 from the age of 11 you were using illegal drugs such as  
 21 cannabis and sniffing glue. Just before turning 12, you  
 22 started to self-harm by cutting your arms every day.

23 A. **Yes.**

24 Q. You knew another girl who did this, and you realised  
 25 that, when you did this, it made you feel better?

Page 63

1 actually from, so it was quite a way away from, like, my  
 2 mum and, you know, everything that, like, I knew and,  
 3 like, started going to school a little bit then, but she  
 4 already had three children of her own, so -- and because  
 5 I was -- I think I was about -- I think I was 9 at this  
 6 point, and then, when -- I think it got to about April  
 7 or May and then she couldn't really, like, handle us.  
 8 I think this might have been about 2004. And then we  
 9 got taken to -- we got -- the social workers got rung  
 10 and then we got taken to a foster carer's house and then  
 11 from there I think I stayed in foster care from --  
 12 I think I remember, just before I went into foster care,  
 13 I had my birthday. So I think that would have been my  
 14 10th birthday, just, like, three months after I'd moved  
 15 into foster care.

16 Q. You describe in your witness statement that you did not  
 17 have a good relationship with that foster carer, and you  
 18 describe how you were repeatedly told that if you  
 19 misbehaved you'd be sent back to your mum, but you  
 20 wanted to go back to your mum and so you did start to  
 21 misbehave by running away. Is that right?

22 A. **No. It's a bit mixed up. They did -- they said that if  
 23 I kept running away, then they'd put me in a secure unit  
 24 and I'd get beat up, raped and robbed every day. They  
 25 said, if I stopped running away, that I could go back**

Page 62

1 A. **Yes.**

2 Q. Is that accurate?

3 A. **Yeah. I remember she was another young person who was  
 4 also -- she wasn't in foster care, she was in a group  
 5 home, but it was the same, like, company, so we all went  
 6 on a group trip, like, together to Blackpool and I got  
 7 to know her on this trip and I got really close with her  
 8 and, you know, good friends with her. And then  
 9 I noticed, like, you know, she had lots of marks on her  
 10 arms and I asked her what was it from and she told me  
 11 that she did it because, when everything that happened  
 12 happened to her and she gets upset, that's when she does  
 13 it. It takes her mind off it and it makes her feel  
 14 better, and then I tried it and it worked, and then,  
 15 from then on, I just -- you know, I carried on and  
 16 carried on.**

17 Q. Can I ask you some questions now about the relationship  
 18 that you describe with a neighbour of yours, I think,  
 19 who was 19 when you were 11.

20 A. **Yes.**

21 Q. Was this your first relationship of a sexual kind?

22 A. **I think so, yeah. Yeah, as far -- yeah, yeah, it was.**

23 Q. You say you didn't actually have sexual intercourse with  
 24 him. On one occasion, he was about to do this but he  
 25 heard people coming and so stopped. Have I got this

Page 64



1 right: were you 11 at that time and he was 19?  
 2 **A. Yeah. What it was is, he lived next door but one to**  
 3 **where I was living with my foster carer, and he was**  
 4 **friends with my foster carer, friendly, and friendly**  
 5 **with my sister, and my foster carer was friends with the**  
 6 **family and stuff. So he said to me one night do I want**  
 7 **to come to, like, a family barbecue, I think it was his**  
 8 **auntie's house, which was up near my school at the time.**  
 9 **So I said, "Yeah, okay then", because I just thought of**  
 10 **him as my friend.**  
 11 **Then, while we was at this barbecue, he gave me some**  
 12 **cans of Carling, and I had a bit -- I remember, like,**  
 13 **really not liking it, you know, and it just not tasting**  
 14 **nice, and then -- but I tried to drink it because**  
 15 **everyone else was doing it and I just thought that's**  
 16 **what you did. So at this point, he -- I think I went up**  
 17 **to the toilet, and he went upstairs -- like, he was**  
 18 **upstairs when I come out of the bathroom and he asked me**  
 19 **to go into his bedroom, and I remember there being,**  
 20 **like, a bench, like a weights bench that you, like, use**  
 21 **to, like, lift weights, and he sat on there and, like,**  
 22 **he was, like, "Come over here", so I stood in front of**  
 23 **him and said, "What?", and then he pulled me towards him**  
 24 **and then started kissing me, and then I was, like, "What**  
 25 **are you doing? I don't, like, understand", and he was,**

Page 65

1 **he was just a friend of my foster carer's, and then**  
 2 **I think, when I got home, I think I told my foster carer**  
 3 **about it and then I remember the police coming around**  
 4 **and me showing them, you know, where the party was and**  
 5 **where the table was in the back garden, where we walked**  
 6 **and, you know, the directions we went and stuff and what**  
 7 **he was wearing, and then I remember giving the statement**  
 8 **and then that's the last, like, I really remember of it.**  
 9 **But then the thing that really, really sticks with**  
 10 **me with that was, for the rest of, like -- I think it**  
 11 **was another, like, two or three years that I was in**  
 12 **foster care, he still lived next door but one. You**  
 13 **know, like, even after I moved. And, you know, it's**  
 14 **just confusing how they wouldn't have, you know, moved**  
 15 **him or if they can't him, then at least move me, you**  
 16 **know, just to be safe.**  
 17 **Q. You say in your witness statement that, looking back,**  
 18 **you didn't really understand what was happening with**  
 19 **this man, but he showed you affection and love --**  
 20 **A. Yes.**  
 21 **Q. -- which was otherwise lacking in your life and you felt**  
 22 **he was your friend.**  
 23 **A. Yes.**  
 24 **Q. But you also say that the foster carer repeatedly called**  
 25 **you a slag and --**

Page 67

1 **like, "It's okay, you can trust me. Like, you know,**  
 2 **obviously you know me and you know I'm a good person and**  
 3 **I'll look after you", and I was, like, "Yeah, but**  
 4 **I don't see you like that," like, because to me being --**  
 5 **you know, that, it was like, "Eugh, that's horrible",**  
 6 **you know, like -- like you are as a child, and then,**  
 7 **like, I started talking to him more throughout the night**  
 8 **and I just felt like he understood what I was going**  
 9 **through and I was -- I spoke to him for, like, a good**  
 10 **couple of hours about everything that had happened and**  
 11 **the stuff that I'd gone through and I just felt like he**  
 12 **understood and when I was with him I was safe. And he**  
 13 **took me back to -- he walked me back to my house where**  
 14 **I lived and his own house, and then he said he wanted me**  
 15 **to come into the back garden with him so we could lie**  
 16 **down on the grass and talk. I remember him telling me**  
 17 **to lie down underneath the table and then he got on top**  
 18 **of me and then he took my pants down and then we heard**  
 19 **someone coming, just as, like -- he'd got his pants and**  
 20 **underwear down and he was just about to go ahead when**  
 21 **I think he heard, like, noises or, like, voices or**  
 22 **someone coming, and then he quickly got up and pulled**  
 23 **his pants up, so I, like, quickly did it as well. And**  
 24 **then he said, "Right, go home", and then -- so I went**  
 25 **home. But, obviously, it didn't look suspicious because**

Page 66

1 **A. Yes.**  
 2 **Q. -- didn't give you any support over this?**  
 3 **A. Yes.**  
 4 **Q. Then you describe a relationship then with somebody,**  
 5 **a different man, that you met at the gym?**  
 6 **A. Yes.**  
 7 **Q. You say that you were 12 by this point and, again, you**  
 8 **felt that he loved you and he bought you beer and**  
 9 **cigarettes, and you had sexual intercourse with him on**  
 10 **two occasions --**  
 11 **A. Yes.**  
 12 **Q. -- but didn't see him after that. Is that right?**  
 13 **A. Yeah. He -- I was going to -- so where the gym is,**  
 14 **there's a drug and alcohol place [redacted], and they**  
 15 **have, like, a centre and it's like --**  
 16 **Q. Just pause there a moment. Just bear with me a second.**  
 17 **I'm not sure, if we can just check, whether the name**  
 18 **that's just been given is going to be linked with**  
 19 **a geographical area or not.**  
 20 **A. Sorry.**  
 21 **Q. No, no, don't worry. Just pause there.**  
 22 **MR SCORER: Chair, it is linked with that geographical area.**  
 23 **MS HILL: Just pause there, please, and, chair, can I ask**  
 24 **you to make a restriction order over that evidence and**  
 25 **we'll take a very short break while we address those**

Page 68

1 issues.  
 2 **A. Sorry.**  
 3 MS HILL: Not at all.  
 4 Chair, can we just take a short break to deal with  
 5 that matter?  
 6 (12.30 pm)  
 7 (A short break)  
 8 (12.46 pm)  
 9 THE CHAIR: Please go ahead, Ms Hill.  
 10 MS HILL: Thank you, chair. CS-A371, are you all right now  
 11 to continue with your evidence?  
 12 **A. Yes. I think it's just been a while since I've spoke**  
 13 **about it, so it just brings some things up sometimes.**  
 14 Q. Of course. I think, chair, you have made a restriction  
 15 order around that detail. We had a short chat in the  
 16 break. I'm just going to take you through some of  
 17 the key points, if you like, to get to some other parts  
 18 of your witness statement. Just before the break, you  
 19 were describing a situation where you'd been going to  
 20 let's just say a gym, it was near, I think, the drug and  
 21 alcohol place that you just mentioned, and is this  
 22 right, that you met an adult man there?  
 23 **A. Yes.**  
 24 Q. He befriended you?  
 25 **A. Yes.**

Page 69

1 THE CHAIR: Ms Hill?  
 2 MS HILL: CS-A371, can I just take you forward in your  
 3 witness evidence to help anchor this a little bit. Is  
 4 this right, that when you were 13, you were placed back  
 5 with your mother?  
 6 **A. It was just before my 13th birthday. I would have been**  
 7 **12.**  
 8 Q. Just to summarise, before that happened, you'd had  
 9 a difficult relationship with your foster carer?  
 10 **A. Yes.**  
 11 Q. You were feeling, you say in your witness statement,  
 12 angry all the time, arguing a lot with your foster  
 13 mother and your sibling, you were throwing things,  
 14 punching walls and self-harming?  
 15 **A. Yes.**  
 16 Q. Just to be clear, you have described two incidents with  
 17 men, one who was 19, one who was an adult, when you were  
 18 respectively about 11 or 12, but there was no police  
 19 investigation in relation to either of those events of  
 20 sexual contact. Is that right?  
 21 **A. Yeah. I think the police was contacted and informed**  
 22 **because, at that point, I had quite a different number**  
 23 **of support workers, as well as, like, the general social**  
 24 **worker and stuff. So I -- when I would meet with them,**  
 25 **they would ask me how things had gone, but because, in**

Page 71

1 Q. You felt he loved you and he brought you beer and  
 2 cigarettes?  
 3 **A. Yes, and sometimes he would, like, he would speak to the**  
 4 **people from the [redacted]. It was the [redacted] that**  
 5 **I attended.**  
 6 Q. Forgive me. Is that the same name that we had before  
 7 the break. Is that the name of the centre?  
 8 **A. Oh, my God, I'm so sorry.**  
 9 Q. I'm sorry, I wonder if your solicitor can help with  
 10 that.  
 11 **A. It's not the name of the centre. It's the**  
 12 **organisation's name.**  
 13 MS HILL: I know, but I think, Mr Scorer, is that not in  
 14 a similar category?  
 15 MR SCORER: It is the same, so it will be covered by the  
 16 same restriction order.  
 17 **A. I'm sorry.**  
 18 MS HILL: Not at all. Chair, can you make a restriction  
 19 order over that evidence and we will take a short break  
 20 before we resume?  
 21 THE CHAIR: Yes, I will do that.  
 22 MS HILL: Thank you.  
 23 (12.48 pm)  
 24 (A short break)  
 25 (12.54 pm)

Page 70

1 **my head, I seen myself -- like, these was my boyfriend,**  
 2 **so I didn't see anything wrong with telling them what**  
 3 **would happen between me and, like, my boyfriend. So**  
 4 **I would tell them what had happened and then I think**  
 5 **they would, like, report back to, like, either the**  
 6 **Social Services while I was in foster care or, you know,**  
 7 **police and other services as well while I was in, and**  
 8 **when I come out of, foster care.**  
 9 Q. I think you have already said -- forgive me if I have  
 10 got this wrong -- that the second of those men we have  
 11 talked about, you had sexual intercourse with him twice,  
 12 when you were 12. Is that right?  
 13 **A. Yeah. The first time was in one of his friends' cars.**  
 14 **I'd just been, like, to a session at the gym and I seen**  
 15 **him and he's, like, speaking -- at this point, like, I'd**  
 16 **just known him to, like, speak to him, like passing, and**  
 17 **then, like, was just chatting to him as, like, friends,**  
 18 **and then he asked me if I wanted to come and see his**  
 19 **friend's car, and, like, have a drink and stuff, so**  
 20 **I said yeah. Because, to me, it was either that or it**  
 21 **was going back home to my foster carer. So I went with**  
 22 **him and then we had sexual intercourse in the car and**  
 23 **then I think -- I think his friends was there, but**  
 24 **I can't remember where they was. I think it was around**  
 25 **near the car. And then, the second time was, I think,**

Page 72

1 a couple of weeks after that, and that was in the gym  
 2 that he would -- that he worked in.  
 3 Q. You say in your witness statement that you'd started  
 4 taking contraceptives from the age of 11; is that right?  
 5 A. Yeah. As soon as the first incident happened with the  
 6 19-year-old, I -- when the police and everyone was  
 7 informed, that's when I received a sexual health worker,  
 8 support worker, and then they advised me to start on  
 9 contraceptives.  
 10 Q. Then moving to the period of time when you were living  
 11 back with your mother, so I think you say in your  
 12 witness evidence that you lived with your mum until you  
 13 were 19. So that's from about the age of 13 to about  
 14 the age of 19.  
 15 A. Yes.  
 16 Q. You say that, looking back, she didn't really have the  
 17 ability to care for you properly?  
 18 A. Yes.  
 19 Q. And you question why Social Services had placed you back  
 20 with her; is that right?  
 21 A. Well, it was quite strange the way it happened.  
 22 I was -- I'd gone missing for a couple of days, and  
 23 I was found in a flat and I was taken back to my foster  
 24 carers. My foster carer was quite upset this time.  
 25 I think my sister had recently been in an accident. So

Page 73

1 I had respite carers at this point who I'd go to  
 2 sometimes just to get away from the area and people who  
 3 I knew and what was going on. So I ended up staying  
 4 with them. And then it was from there that I found out  
 5 that I was going living back with my mum.  
 6 Q. I see.  
 7 A. And at first I was excited, and then I -- like, I moved  
 8 in -- back in with her and then I think two days after,  
 9 I was supposed to be going to school, but my mum was --  
 10 she'd got drunk in the morning, and when -- I think just  
 11 after we'd got put in foster care, my mum had an  
 12 accident. She ended up falling down the stairs and she  
 13 ended up in a coma, and they told us that she wasn't  
 14 going to make it out. Luckily, she made it out, but  
 15 then she carried on drinking and abusing drugs and  
 16 stuff, so it made her, like, have epilepsy, and then,  
 17 when I was supposed to go in school and she was really  
 18 drunk, I was worried about her falling down the stairs  
 19 while I was at school or, you know, having a fit,  
 20 because I thought, if she falls down the stairs when  
 21 she's drunk the first time and she's ended up in a coma  
 22 with all these problems and then she does it again, she  
 23 probably won't make it through, so -- and I knew  
 24 I wouldn't be able to cope, like, with knowing that and  
 25 leaving, so I stayed at home, and then my social worker

Page 74

1 rang me and she asked me why I wasn't in school, and  
 2 I ended up crying and getting really upset on the phone,  
 3 and she was asking me what's wrong, and I explained that  
 4 my mum had been drinking and she was really drunk and  
 5 she was being nasty and I didn't want to go to school  
 6 because I was scared of her hurting herself or  
 7 something, so, at that point, my social worker came over  
 8 to see me, and she said, "The reason that your mum's  
 9 drinking is because you're not going into school and  
 10 you're stressing her out when she is trying to do the  
 11 right thing, and she's not as drunk as you're making out  
 12 that she is. You just don't want to go into school".  
 13 At that point, I got really upset. I swore at her and  
 14 I told her to leave, and then I think it was about  
 15 a week after, she phoned my mum and told my mum that,  
 16 due to me being back home and everything working out  
 17 well, that I would no longer be under the care of  
 18 Social Services, and I remember -- I think it was a few  
 19 weeks after that, I met with my foster carer and my  
 20 sister, because my sister was still living with my  
 21 foster carer, and I more or less begged her to take me  
 22 back because I was so upset and I was so scared, and  
 23 then -- but obviously she couldn't, but I just didn't --  
 24 I didn't know what was going on, and then everything  
 25 just, like, went from bad to worse.

Page 75

1 Q. Just to perhaps help you with some dates, you have  
 2 explained in your witness statement, just going forward  
 3 in time a little bit, eventually you have brought  
 4 a claim, I think, for damages against the local  
 5 authority, against the council.  
 6 A. Yes.  
 7 Q. We are in about 2007, I think, that you were back with  
 8 your mum, and you've raised questions about the extent  
 9 to which the Social Services were aware of  
 10 the difficulties that you were in.  
 11 A. Yes I have recently found out -- it was when we moved  
 12 back to -- when we moved from the original area to the  
 13 second area, we -- my mum had a sister who lived near to  
 14 us and I didn't know, but she was making a lot of  
 15 reports to Social Services and police regarding, like,  
 16 my mum and dad's drug use and the alcohol issues and  
 17 the -- you know, criminal side of things, and there were  
 18 a lot of reports made but nothing ever sufficed.  
 19 I think when -- I think it was about -- it was just  
 20 after my dad passed away, we was living at my mum's  
 21 partner's, and my mum was physically abusive to my  
 22 sister, and this one day, something happened and my mum  
 23 was -- ended up hitting my sister. My sister ran to her  
 24 friend's house, who lived about 20 minutes away, and she  
 25 told her everything that happened and everything, you

Page 76

1 **know, "It's been going on for a while", and stuff.**  
 2 **I think they rang the police and then Social Services**  
 3 **came out, and they came back with my sister to my mum's**  
 4 **partner's and they asked -- they sat us all down and**  
 5 **they asked if any physical harm had been happening to my**  
 6 **sister, but because I was -- like, I was scared,**  
 7 **I didn't know what to say, so I said, no, my sister was**  
 8 **the same, so she said no. My mum obviously said no and**  
 9 **then my mum's partner said no. So nothing was really,**  
 10 **like, done after that.**  
 11 Q. You describe in your witness statement that through this  
 12 period of time -- I'm just going to read out a bit of  
 13 your witness statement to see if this helps you. You  
 14 say:  
 15 "During this period, from the age of 13 up to 16,  
 16 I was repeatedly sexually exploited by adult men."  
 17 **A. Yes.**  
 18 Q. "A group of adult men befriended me. They took me to  
 19 some flats and introduced me to some other male friends.  
 20 They started buying me alcohol, cannabis and cigarettes.  
 21 I think the alcohol they provided to me was probably  
 22 spiked. I saw these men as my friends. From the age of  
 23 13, I was having regular sex with them."  
 24 Is that right?  
 25 **A. Yes.**

Page 77

1 **the house again, then you'll be stuck, or you can come**  
 2 **with us, but if you come with us, then you have to take**  
 3 **this", so at that point as well, I'd been in about three**  
 4 **fires with my mum, so, like, that was -- you know, one**  
 5 **of my really, really biggest fears, is fire.**  
 6 Q. I think in your witness statement you describe other  
 7 occasions when they threatened you, saying that they  
 8 would kidnap you, they'd get their friends to gang rape  
 9 you, they'd smash windows in your house. On one  
 10 occasion, somebody -- men did break the windows, locked  
 11 you in a house with some of their friends?  
 12 **A. Yes.**  
 13 Q. And also that sometimes they would give you the  
 14 impression that they were keeping an eye on you or  
 15 watching you, and that also frightened you into going  
 16 along with what they wanted; is that right?  
 17 **A. Yeah. The first time I ever actually tried to break off**  
 18 **was with this one older man, an Asian male, and he was**  
 19 **quite violent whilst we was in a relation -- well,**  
 20 **whilst we was together, anyway, and then he would, like,**  
 21 **kind of make it out to be a joke, so he'd hit me and**  
 22 **laugh about it and pull my hair and stuff, and he would**  
 23 **threaten -- because I'd told him about my past, he would**  
 24 **threaten to put -- plant drugs in my house and get my**  
 25 **mum arrested and spike my mum with heroin and crack**

Page 79

1 Q. You have described that the sex that you had with these  
 2 men -- you had vaginal sex and oral sex, they would  
 3 penetrate you with their fingers. On most of these  
 4 occasions, you say that you were drunk and you didn't  
 5 know what was happening?  
 6 **A. Yes.**  
 7 Q. Is that right?  
 8 **A. Yes.**  
 9 Q. You describe being forced, on one of these occasions, to  
 10 take amphetamines?  
 11 **A. Yes. That happened just before I went into --**  
 12 **I lived -- I went to live back with my mum. I went**  
 13 **missing for a couple of days in a flat in another town,**  
 14 **and at that point I was with an older female and an**  
 15 **older male, and they was taking amphetamine, but**  
 16 **I didn't really know what it was at this point because**  
 17 **I was 12, so they said to me that the house had been**  
 18 **burnt, tried to be set on fire, which it had been, all**  
 19 **the door was burnt and things, and if I didn't -- they**  
 20 **would be out all night walking around the streets**  
 21 **because they was taking this -- they called it a "bomb",**  
 22 **so they was taking this bomb. So if I didn't take it,**  
 23 **I wouldn't be able to go with them because I wouldn't be**  
 24 **able to keep up with them. So they said, "You can**  
 25 **either stay here and if they come back to try and burn**

Page 78

1 cocaine and stuff, and then, at one point, I'd just had  
 2 enough, so he told me that he would sexually assault me  
 3 if I tried to leave him or -- and at one point he was  
 4 with a girl -- or his friend was with a girl, and she  
 5 was seen walking around with a male friend and him and  
 6 his friends took her to a flat and they gang raped her  
 7 and they left her for dead.  
 8 **When he made the threats of, like, smashing my**  
 9 **windows and then he actually went through with that**  
 10 **threat, I then believed he would go through with all the**  
 11 **other threats, and then he -- we -- I tried to leave him**  
 12 **and I said I didn't want to be with him anymore, I tried**  
 13 **to change my number, and he managed to get hold of my**  
 14 **number and I was in the town centre of where I was**  
 15 **living at the time, and I got a phone call, and it was**  
 16 **him and he described what I was wearing, like, right**  
 17 **down to the earrings, makeup, shoes, who I was with,**  
 18 **what they was wearing, all, like, how they looked, how**  
 19 **I had my hair, everything, where I'd been all day, like,**  
 20 **where I was stood at that point. So I got really,**  
 21 **really worried, and I was, like, I'm going to have to**  
 22 **get back with him because, you know, it's just not going**  
 23 **to get any better.**  
 24 **And then I was going to get back with him but then**  
 25 **I didn't want to and then he'd sent a bag of clothes to**

Page 80

1 **my house, and it just felt like it was a threat, so**  
 2 **I just felt like I had to remain in that relationship.**  
 3 Q. Paragraph 42 of your witness statement. I will just  
 4 read this out. You say this:  
 5 "On a number of occasions, I refused to have sex.  
 6 I was raped against my will. I was also physically  
 7 assaulted by being slapped, punched and kicked by the  
 8 men. I would be verbally abused by the men, who would  
 9 call me a bitch and a fat slag."  
 10 Is that correct?  
 11 **A. Yes, yes.**  
 12 Q. You say that, although you had been taking  
 13 contraceptives from the age of 11, that while you were  
 14 having sex with these different men, you didn't use any  
 15 precautions -- these are your words I'm using -- "and  
 16 I was very lucky not to contract any  
 17 sexually-transmitted disease or get pregnant"?  
 18 **A. Yes.**  
 19 Q. You complained to the police on a number of occasions  
 20 for many years "but nothing was done to protect me". In  
 21 paragraph 44 you say:  
 22 "Numerous services were involved with me but nobody  
 23 seemed able to help me."  
 24 **A. Yes.**  
 25 Q. You describe how, for many years, you suffered from

Page 81

1 Chair, I've got one more topic of questions that I'd  
 2 like to ask the witness about, moving to the issue of  
 3 her experiences of giving evidence at the criminal  
 4 trial. I think that's probably about five minutes'  
 5 worth of questioning. I see the time, but, chair, are  
 6 you content for me to continue with that final topic?  
 7 THE CHAIR: Yes, just go ahead.  
 8 MS HILL: Thank you. Can I try and help you in this way, to  
 9 anchor this in the chronology. I think you indicate in  
 10 your witness statement that it was in 2010 that a proper  
 11 police investigation got under way.  
 12 **A. Yes.**  
 13 Q. Then you say there was a long period of time during  
 14 which your allegations were investigated and  
 15 eventually -- sorry, just in terms of the dates, a large  
 16 number of adult males were prosecuted in 2013/2014.  
 17 **A. Yes.**  
 18 Q. You gave evidence, I think, in the criminal trial, and  
 19 there were some convictions of individuals for sexually  
 20 assaulting you. Is that right?  
 21 **A. Yeah. Yeah, that's correct.**  
 22 Q. Just describe, summarise, perhaps, for the panel why  
 23 you've said in your witness statement you found the  
 24 experience of giving evidence so distressing and  
 25 traumatising?

Page 83

1 nightmares and insomnia and eating problems:  
 2 "In my early teens, I would induce vomiting after  
 3 eating food and saw a dietician for being overweight."  
 4 Does that summarise some of those immediate effects  
 5 on you?  
 6 **A. Yeah, yeah, it does. When it actually -- when I was**  
 7 **first raped, I didn't realise what had happened until**  
 8 **I was speaking to my sexual health worker and**  
 9 **I explained that this man who I thought was my**  
 10 **boyfriend -- like, we spoke about having children and**  
 11 **having a family and stuff, and then -- but I kept saying**  
 12 **that I didn't want to have sex with him, and then he**  
 13 **said to me, "Well, you know, how are we going to have**  
 14 **children and have a family and be together if you don't**  
 15 **do that?" So I said okay, and then we'd got into the**  
 16 **bedroom and I changed my mind. But he carried on**  
 17 **anyway. And he used to, you know, be verbally abusive**  
 18 **and hit me and kick me and, like, pull my hair in front**  
 19 **of his friends and stuff, and I remember one of his**  
 20 **friends come around and he was, like, "Why are you**  
 21 **treating her like that? That's not a nice way to treat**  
 22 **her". And then I ended up going to this man's flat and**  
 23 **he ended up, like, buying me alcohol and we ended up in**  
 24 **a sexual relationship.**  
 25 MS HILL: Just pause there, please, for a moment.

Page 82

1 **A. I mean, the first original one is, I felt like the**  
 2 **barristers for the defence wasn't very impartial. It**  
 3 **was -- it felt like a very -- very much like I was being**  
 4 **bullied. At one point, I think there was -- I mean,**  
 5 **quite a few of the barristers was Asian, so that,**  
 6 **like -- that kind of scared me a bit as well, and then,**  
 7 **when they was questioning me, they wasn't questioning**  
 8 **me, they was, like, shouting at me, like I was a child,**  
 9 **and then I was trying to answer the questions and they**  
 10 **was, like, talking down to me. The judge had to step in**  
 11 **a couple of times.**  
 12 Q. You say, in paragraph 66 of your witness statement, that  
 13 they accused you of being confused, of being racist, of  
 14 being a slag?  
 15 **A. Yes.**  
 16 Q. You were repeatedly told by the defence barristers that,  
 17 "I had wanted sex with these men and had lied to them  
 18 about my age in order to deceive them into having sex"?  
 19 **A. Yes.**  
 20 Q. Is that the sort of questioning you got over several  
 21 days?  
 22 **A. I did. At one point, they even tried to accuse me of**  
 23 **not being able to see correctly and they wanted to get**  
 24 **my eye tests from when I was in foster care around the**  
 25 **time of, like, the abuse that was going on.**

Page 84

1 Q. Were there also some practical issues? I think you gave  
 2 evidence in different trials, and I will try and  
 3 summarise your evidence. Please tell me if I get this  
 4 wrong. I think in one of the trials you gave evidence  
 5 from behind a screen.  
 6 **A. Yes.**  
 7 Q. And there were some issues about you being told that if  
 8 you came in through a particular entrance, it would be  
 9 a safe place for you, but you actually saw the  
 10 defendants walk right past you. Is that correct?  
 11 **A. Yes. At the court where we went to, there's, like,**  
 12 **a door right round the back, where, you know, sensitive**  
 13 **witnesses and victims can come in so they're not --**  
 14 **because it was a highly publicised case, there was some**  
 15 **news at the front. So to avoid all that and to avoid**  
 16 **bumping into the defendants, they told me to go through**  
 17 **this different entrance, and the police would pick me up**  
 18 **and then take me home, you know, at the end of it, to**  
 19 **make sure that everything was secure, and on the first**  
 20 **day that we got to court, I was with my support worker**  
 21 **and I was stood outside and just getting a bit of fresh**  
 22 **air before I went in and preparing myself, and then each**  
 23 **one of the defendants walked past me one by one, and**  
 24 **I was, like, just really shocked and taken aback and**  
 25 **then I got really upset and then I was, like, really**

Page 85

1 workers had no empathy with me and my experience."  
 2 **A. Yes.**  
 3 Q. "They took the view that I was making my own choices  
 4 when, in reality, I was trapped in a horrendous  
 5 situation and needed help and support to get out of it.  
 6 They repeatedly describe me as engaging in risky  
 7 behaviour as if the situation was my fault and my  
 8 choice. I don't think they made any real effort to  
 9 understand what I was going through."  
 10 **A. Yes.**  
 11 Q. Is that how you feel?  
 12 **A. Yes, yes, I do, and I've said -- and I still stick by**  
 13 **it. Like, if something was to happen similar or like**  
 14 **that again, I wouldn't report it because I wouldn't want**  
 15 **to go through a trial again. I don't think I would**  
 16 **manage to go through it.**  
 17 MS HILL: Thank you very much for giving evidence to this  
 18 inquiry.  
 19 Chair and panel, those are all the questions I have  
 20 for this witness. Do you or the panel members have any  
 21 questions, chair?  
 22 THE CHAIR: No, we have no questions, but on behalf of  
 23 the panel, I, too, want to thank the witness very much  
 24 for her evidence. We know in this inquiry how  
 25 distressing it can be to go over the terrible

Page 87

1 **flustered and then I went in to give my video evidence,**  
 2 **and because -- I was giving video evidence because**  
 3 **I said, "Obviously, if I see the defendants, I will feel**  
 4 **intimidated to not say everything that actually**  
 5 **happened", so they said, "That's fine, you won't see**  
 6 **them at all". But then, when I went and I was waiting**  
 7 **for the court to start through video, the person who had**  
 8 **control of the camera did a 360 of the courtroom, so**  
 9 **I seen everything. So that, like, kind of --**  
 10 Q. Could you see the defendants on the video then, in that  
 11 way?  
 12 **A. Yeah, I seen the defendants and I seen the public**  
 13 **gallery and I seen the -- you know, all, like,**  
 14 **everything.**  
 15 Q. Just finally, at the end of your statement -- I will  
 16 just summarise paragraph 69 and paragraph 71 of your  
 17 statement, if I may. You say there are a large number  
 18 of occasions when Social Services, in the area in  
 19 question, had opportunities to protect you that were  
 20 missed?  
 21 **A. Yes.**  
 22 Q. You have ultimately settled, I think, a damages claim,  
 23 and you say:  
 24 "I believe the reason I suffered from sexual  
 25 exploitation over such a long period was because social

Page 86

1 experiences of the past. It was very brave of you to do  
 2 so. So thank you very much.  
 3 **A. Thank you.**  
 4 MS HILL: Thank you very much.  
 5 **A. Thank you.**  
 6 **(The witness withdrew)**  
 7 MS HILL: I see the time, chair. It is obviously perhaps  
 8 time for a lunch break. I don't know if you want to  
 9 rise until 2.15?  
 10 THE CHAIR: Yes. We will return at 2.15 pm. Thank you.  
 11 MS HILL: Thank you very much.  
 12 (1.19 pm)  
 13 (The short adjournment)  
 14 (2.15 pm)  
 15 (Proceedings delayed)  
 16 (2.20 pm)  
 17 THE CHAIR: Thank you very much, Mr Livingston?  
 18 MR LIVINGSTON: Thank you, chair. This afternoon, we are  
 19 going to be hearing evidence from Dr Helen Beckett and  
 20 Dr Sophie Hallett.  
 21 DR HELEN BECKETT (affirmed)  
 22 MR LIVINGSTON: You have provided a statement to the inquiry  
 23 at INQ005150. Is that statement true, to the best of  
 24 your knowledge and belief at the time you signed it?  
 25 DR BECKETT: Yes, it is.

Page 88

<p>1 DR SOPHIE HALLETT (affirmed)</p> <p>2 MR LIVINGSTON: Dr Hallett, you have provided the statement</p> <p>3 at INQ006087. Was that statement true, to the best of</p> <p>4 your knowledge and belief, at the time you signed it?</p> <p>5 DR HALLETT: Yes, it is.</p> <p>6 MR LIVINGSTON: Chair, I would like to formally adduce the</p> <p>7 entirety of both witnesses' statements.</p> <p>8 Examination by MR LIVINGSTON</p> <p>9 MR LIVINGSTON: To both of you, Dr Hallett and Dr Beckett,</p> <p>10 I will usually address questions directly to one or the</p> <p>11 other of you, but please do feel free to speak up if you</p> <p>12 have -- if you would like to comment on an answer given</p> <p>13 or you have something particularly different to say on</p> <p>14 an issue. We are going to go from now until about</p> <p>15 3.15 pm, but if, for any reason, you need a break before</p> <p>16 then, just let me know.</p> <p>17 Dr Beckett firstly, I just want to summarise your</p> <p>18 professional background. Dr Beckett, you are a director</p> <p>19 of the International Centre on Research and Child Sexual</p> <p>20 Abuse Exploitation, Violence and Trafficking at the</p> <p>21 University of Bedfordshire; is that correct?</p> <p>22 DR BECKETT: Yes.</p> <p>23 MR LIVINGSTON: You have a particular expertise in child</p> <p>24 sexual exploitation?</p> <p>25 DR BECKETT: That's correct.</p> <p style="text-align: center;">Page 89</p>	<p>1 MR LIVINGSTON: How long have you worked in that area?</p> <p>2 DR BECKETT: I have worked in the field of children and</p> <p>3 young people's rights in child protection doing research</p> <p>4 for 25 years nearly, and specifically in the field of</p> <p>5 child sexual exploitation since 2009.</p> <p>6 MR LIVINGSTON: Dr Hallett, you provide some more detail in</p> <p>7 your statement, but in summary, you're a senior lecturer</p> <p>8 at Cardiff University with expertise in child sexual</p> <p>9 exploitation, and you have undertaken research into this</p> <p>10 issue in Wales since 2008; is that right?</p> <p>11 DR HALLETT: That's correct.</p> <p>12 MR LIVINGSTON: I want to start with the issue of</p> <p>13 understanding and conceptualising CSE. Dr Beckett, in</p> <p>14 your statement at paragraph 2.2, which is page 2, you</p> <p>15 refer to the lack of clear definitional parameters</p> <p>16 around what CSE, child sexual exploitation, actually is</p> <p>17 and how it relates to the wider concept of child sexual</p> <p>18 abuse. You say that that has resulted in local areas</p> <p>19 defining the concept in a variety of ways. You give</p> <p>20 some examples such as some agencies categorising</p> <p>21 something as CSE if the perpetrators are a group, but</p> <p>22 CSA, child sexual abuse, if there is an individual</p> <p>23 perpetrator. Another example is agencies categorising</p> <p>24 it depending on whether the victims are adolescents or</p> <p>25 if they're younger, and another example is whether it is</p> <p style="text-align: center;">Page 90</p>
<p>1 nonfamilial abuse or familial abuse. Are those all</p> <p>2 examples you have actually come across of local</p> <p>3 authorities or police services in practice?</p> <p>4 DR BECKETT: Yes, they are, so that is not to say that they</p> <p>5 are not using the statutory definition of child sexual</p> <p>6 exploitation, but because of the lack of clear</p> <p>7 parameters around that and where the difference is from</p> <p>8 what falls within that and what constitutes another form</p> <p>9 of child sexual abuse, in terms of operationalising</p> <p>10 their response, so deciding which service a young person</p> <p>11 is referred to, deciding which police force -- which</p> <p>12 unit within the police responds to it, for example, they</p> <p>13 are all ways in which we have seen people do that, and</p> <p>14 they have linked this to the lack of clarity and</p> <p>15 confusion that both Dr Hallett and my work has</p> <p>16 documented around -- confusion amongst practitioners</p> <p>17 around what actually constitutes child sexual</p> <p>18 exploitation.</p> <p>19 MR LIVINGSTON: Thank you. You go on to mention, at</p> <p>20 paragraph 2.8 of your statement, that the key</p> <p>21 distinction between child sexual exploitation and child</p> <p>22 sexual abuse, at least from the government's definition,</p> <p>23 is that it involves an element of exchange, although</p> <p>24 that doesn't have to be financial.</p> <p>25 Dr Beckett, do you think that the government's</p> <p style="text-align: center;">Page 91</p>	<p>1 definition from 2017, with this emphasis on the concept</p> <p>2 of exchange, is still a sensible one, or do you think</p> <p>3 that it needs to be changed in some way?</p> <p>4 <b>A. Well, firstly, I would say that the 2017 definition</b></p> <p>5 <b>certainly was some improvement on the previous</b></p> <p>6 <b>definition introduced in 2009, which is where we first</b></p> <p>7 <b>had the definition of child sexual exploitation and</b></p> <p>8 <b>linking that to exchange, because it made some revisions</b></p> <p>9 <b>that actually narrowed down the circumstances in which</b></p> <p>10 <b>perpetrator gain could constitute child sexual</b></p> <p>11 <b>exploitation, so that was a welcome development.</b></p> <p>12 <b>However, when I look at all of the research that</b></p> <p>13 <b>I and others in my centre have done and case reviews</b></p> <p>14 <b>that we have looked at, et cetera, from my perspective,</b></p> <p>15 <b>using exchange as the only sole defining feature to</b></p> <p>16 <b>determine whether a child or young person falls under</b></p> <p>17 <b>one definition versus another doesn't actually reflect</b></p> <p>18 <b>the reality of children and young people's experiences.</b></p> <p>19 <b>Now, that is not to say that exchange is not important,</b></p> <p>20 <b>and it absolutely is. In fact, I have written a chapter</b></p> <p>21 <b>recently on the importance of looking at the exchange</b></p> <p>22 <b>and working with the exchange where the child or young</b></p> <p>23 <b>person is the one who receives something in that</b></p> <p>24 <b>circumstance, but the current definition defines</b></p> <p>25 <b>exchange so broadly that I think it is unhelpful.</b></p> <p style="text-align: center;">Page 92</p>

1 **As you note yourself, it includes tangible gain,**  
2 **intangible gain and the absence of a negative where the**  
3 **young person is --**  
4 MR LIVINGSTON: Dr Beckett, sorry to interrupt you.  
5 I think, for the benefit of those watching, if I can  
6 just sort of read out part of the definition itself. It  
7 says:  
8 "Child sexual exploitation is a form of child sexual  
9 abuse which occurs when an individual or group takes  
10 advantage of an imbalance of power to coerce, manipulate  
11 or deceive a child or young person under the age of 18  
12 into sexual activity:  
13 "(a) in exchange for something the victim needs or  
14 wants; or  
15 "(b) for the financial advantage or increased status  
16 of the perpetrator or facilitator ..."  
17 It goes on to say that it can even appear consensual  
18 but still be child sexual exploitation. So are you  
19 saying that the idea that it is for the financial  
20 advantage or increased status of the perpetrator, that's  
21 the bit that's too broad?  
22 DR BECKETT: No. I think the whole definition is too broad.  
23 So I think the fact that it includes gain for  
24 a perpetrator -- so it can be CSE if only the  
25 perpetrator is receiving something in exchange without

Page 93

1 perspective, and so all about really looking at how we  
2 best serve and protect children and young people, and  
3 from my perspective, if we are going to have  
4 a child-centred approach, then we need to look at all of  
5 the defining features of their experience, and make sure  
6 that we respond in an appropriate way, and not solely  
7 categorise them and therefore define which service  
8 response they receive solely by the fact of, is there an  
9 exchange present or not, even though that exchange can  
10 be completely different across all of the cases.  
11 MR LIVINGSTON: So putting it quite bluntly, would you say  
12 that child sexual exploitation as a concept, as a single  
13 thing, isn't a particularly useful idea?  
14 DR BECKETT: In its current format, yes, I would say that,  
15 and I think the fact that when we train in local areas  
16 and they tell us that they have had to operationalise it  
17 differently -- I noticed recently people are using it as  
18 shorthand for extrafamilial abuse, but there is nothing  
19 in the definition that says it had to be extrafamilial.  
20 It is basically put on a layer of labelling that doesn't  
21 reflect the holistic experience that children and young  
22 people have, and it is unhelpfully defining a response.  
23 The fact people interpret it differently means it's  
24 skewing our data. We don't know -- because everyone is  
25 using a different definition of the same term, and this

Page 95

1 the young person receiving something as well. Or it can  
2 be CSE if the young person is the one receiving. So the  
3 "and/or" part of the definition you read out there is  
4 very important.  
5 Now, what that means is that there are lots of  
6 different scenarios that can constitute CSE, and I think  
7 the fact that it is the only subcategory we currently  
8 have within child sexual abuse suggests that somehow  
9 this presence of exchange means that these cases are  
10 somehow all similar and somehow all different from other  
11 cases that would not be defined as CSE. As I say, the  
12 exchange is important and I absolutely argue we need to  
13 engage with that and look at what that means for what's  
14 going on and how we need to respond. But I think we  
15 have elevated that beyond other features that also  
16 define a child or young person's experience of child  
17 sexual exploitation or any other form of abuse. Things  
18 like: whether they are in relationship with the person  
19 who is perpetrating against them or if it is a stranger;  
20 if it is a one-off assault or an ongoing basis; if it is  
21 by a group; if it is by individual; if it is online; if  
22 it is offline.  
23 For me, these features are also all important and  
24 need to be considered alongside exchange, and from my  
25 perspective, I come from a children's rights

Page 94

1 has been further complicated -- very briefly -- by two  
2 things. One, when the language was changed in the  
3 Sexual Offences Act and we now have offences called  
4 "abuse of a child through sexual exploitation", that  
5 only considered -- they only apply when the gain is  
6 tangible. So that's very different and much narrower  
7 than the policy definition that we currently have. And  
8 I know Dr Hallett has also commented on this, I think  
9 this is also further complicated by moves we see across  
10 the sector in recent months and years about trying to  
11 look at child exploitation in its holistic sense and  
12 combining child sexual exploitation with other forms,  
13 such as child criminal exploitation, and that move  
14 concerns me in taking child sexual exploitation away  
15 from the fact it is child sexual abuse. Whilst there  
16 are commonalities between CSE, which I will use as  
17 shorthand for child sexual exploitation, and other forms  
18 of exploitation, certainly there are commonalities, but,  
19 actually, the research shows that the sexual nature of  
20 the harm is important, and it is really important that  
21 we maintain a focus on what that means for how we need  
22 to respond.  
23 MR LIVINGSTON: Thank you, Dr Beckett. Dr Hallett, in your  
24 statement at paragraph 2 you say that, on the basis of  
25 your research, you have concluded that sexual

Page 96



<p>1 exploitation is distinct as a form of child sexual 2 abuse, centring around this element of exchange. So 3 would it be fair to summarise that, in fact, your view 4 is that exchange is the key distinguishing factor and is 5 a useful one? 6 DR HALLETT: I would agree that it's a useful way of making 7 a distinction. So I agree with Dr Beckett on a number 8 of conclusions that she draws, but I think, from my own 9 research, particularly two large-scale pieces of 10 research -- so one was my doctoral research and one was 11 the review into the CSE Wales definition and the risk 12 assessment and guidance. So there were key issues that 13 were raised, but these issues were more about 14 a confusion and an understanding rather than about 15 whether and how people would refer young people. 16 Some of those issues, if I have space and time to 17 relay, were that people were confused about the emphasis 18 on grooming and CSE becoming synonymous with grooming. 19 There was a focus on CSE occurring through and because 20 of relationships. And this was seen as too narrow and 21 narrowing and it wasn't drawing attention to the 22 complexity of CSE, including its connection to other 23 problems experienced by young people, and relatedly, 24 a denial of, or obscuring and continued obscuring of, 25 young people's agency.</p> <p style="text-align: center;">Page 97</p>	<p>1 What I would say about the definition, actually, is 2 that, what we found is that -- I mean, it's about why 3 are these definitions unhelpful. I think it is what 4 people were saying to us in the review was that these 5 were protracted, these were wordy, they were actually 6 quite oblique, so it wasn't actually getting to grips 7 with what was it that professionals should be looking 8 for and how might they identify a young person at risk. 9 I think because it circles around the difficulty of 10 young people's agency, and there is a long history, as 11 I'm sure the inquiry is well aware, of the exclusion of 12 CSE from other forms of sexual abuse and not seeing 13 young people as victims of harm. 14 What people did say was, they actually found young 15 people's definitions of sexual exploitation the most 16 helpful way of understanding, so, for example, taking 17 advantage -- sexual exploitation is the taking advantage 18 of an unmet need or a vulnerability for sex, and that 19 seemed to make sense and resonate with professionals. 20 If I could explain, if I have time to explain, why 21 I think exchange is so important, what I would say is 22 that, when we talk about definitions, we are talking in 23 a UK context, but there is actually no global definition 24 of CSE, so there isn't one within the UK but there isn't 25 a global one. However, there are three components that</p> <p style="text-align: center;">Page 98</p>
<p>1 arguably feature across all these definitions. So 2 whether these -- the definitions are related more to 3 trafficking or commercial sexual exploitation, this is 4 that it is a form of abuse that occurs to children and 5 young people and involves exchange. 6 So retaining the term "child sexual exploitation", 7 defined in those terms, matters because acknowledging 8 the exchange occurring within this form of sexual abuse 9 is important for two connected reasons about unmet needs 10 and about young people's agency. 11 So firstly it brings attention to and recognition of 12 the wider context surrounding sexually exploitative 13 relationships and encounters, and positions 14 vulnerabilities and unmet needs as a central part of 15 the problem that requires attention. So it was very 16 clear in my research from those young people that took 17 part that they did not separate out sexual exploitation 18 from, as they termed it, "the things going on in their 19 lives". 20 So if I can sum this up in a quote from one of 21 the young people, they said: 22 "Sexual exploitation doesn't just happen. It 23 happens because people don't get the help that they need 24 and sometimes it does take them there. And if people 25 are there to help them in the first place, then this</p> <p style="text-align: center;">Page 99</p>	<p>1 wouldn't happen." 2 And they insisted that any young person could become 3 caught up in sexually exploitative relationships or 4 encounters if they, too, were facing and dealing with 5 the sorts of difficulties, circumstances and complex 6 issues that they faced without the means of help, 7 support and care that other people have. 8 The second point which I think is really important 9 is that exchange as a model, as a term, allows space to 10 consider and understand young people's sense of agency, 11 however troubling this may be. I realise, again, that 12 there is a whole history around this as well, but we 13 need to support practitioners to understand this in 14 a way that provides them to feel that they are in no way 15 undermining or denying the abuse that is occurring, so 16 it is important that we recognise, for example, young 17 people who engage in or who are abused through what they 18 would call survival sex or selling sex as a response to 19 need. It is very clear from mine and others' research 20 involving young people that sexual exploitation can 21 occur because exchanging sex can be seen by a child or 22 a young person as the last resort or the least worst 23 option. 24 If I give you some examples -- 25 MR LIVINGSTON: Dr Hallett, sorry, I'm going to butt in</p> <p style="text-align: center;">Page 100</p>

1 there. Thank you. I just want to try to summarise,  
 2 because we have limited time as you understand. Would  
 3 I be right in thinking, then, that the reason why you  
 4 think exchange is so important is really -- there are  
 5 two headlines. One is that it's practical, so it  
 6 actually means that practitioners can put things into  
 7 two piles, and one of those piles is CSE, which has  
 8 exchange; and then the second thing is that it makes  
 9 sense because of -- it works against children in  
 10 the sense of agency and actually focuses on what's  
 11 important. Is that about right?  
 12 DR HALLETT: Almost about right. I would say absolutely it  
 13 provides that understanding of how young people see  
 14 sexual exploitation, but I think where exchange has  
 15 become confusing is people have been focusing and  
 16 centring on what is the thing that's being exchanged,  
 17 and I think obviously, with all these phrases and  
 18 terminologies, it's about the support that's provided  
 19 around that and, for me, exchange provides a neutral way  
 20 in understanding those kinds of situations where young  
 21 people are engaged in survival sex and that's why  
 22 I think it's a helpful concept and that's why I think  
 23 it's there, sitting there, and retained as a distinct  
 24 way of understanding child sexual abuse.  
 25 MR LIVINGSTON: Thank you. You will be aware from the

Page 101

1 comes from. But I also can also -- I think from my own  
 2 research, I'm pretty aware that I think this idea of  
 3 agency, people are very afraid and very concerned about  
 4 referring to agency because it seems to be associated  
 5 directly with blame, and I think it's really important  
 6 that within any kind of understanding of sexual  
 7 exploitation, when we refer to young people's agency, we  
 8 allow that representation, it reflects how young people  
 9 understand sexual exploitation, but there is in no sense  
 10 that this is about blaming or minimising harm.  
 11 MR LIVINGSTON: Thank you. Am I right in thinking, very  
 12 briefly, that the approach that you have outlined, which  
 13 is moving away from a definition towards exchange being  
 14 the distinguishing factor, that's now the approach that  
 15 the Welsh Government takes as well? Is that right?  
 16 DR HALLETT: Yes, that's right. So --  
 17 MR LIVINGSTON: Thank you. I just wanted to check, what's  
 18 the difference between having a definition and having  
 19 whatever the alternative that you say is? What's the  
 20 difference between saying it's for exchange or just  
 21 defining it by calling it a definition.  
 22 DR HALLETT: I think the difference is that, as I said, you  
 23 know, one of the problems with understanding sexual  
 24 exploitation was getting into this long trawl of these  
 25 very wordy definitions, and I think part of the reason

Page 103

1 documents that are available to you that there is  
 2 a witness statement from Amanda Naylor from Barnardo's,  
 3 whom we are going to hear from next week, and she says  
 4 in her statement that Barnardo's do not incorporate the  
 5 concept of exchange into their definition of child  
 6 sexual exploitation because they feel that this is  
 7 misleading, has its roots in victim blaming and does not  
 8 fully take into account the imbalance of power and  
 9 coercive approaches that offenders use.  
 10 Just for the record, that's at BRD000275\_003.  
 11 So, Dr Hallett, briefly, how do you meet the  
 12 suggestion that exchange has its roots in victim  
 13 blaming?  
 14 DR HALLETT: I actually would like to see the evidence for  
 15 that claim because, in any research that I have ever  
 16 seen where people have referred to the concept of  
 17 exchange as a way of making sense of sexual  
 18 exploitation, there is no way any sense that this is  
 19 about blaming young people. In fact, the terminology of  
 20 sexual exploitation with the underpinning use of  
 21 the term "exchange" was introduced to do the exact  
 22 opposite. It was a way of trying to move away from  
 23 ideas of child prostitution towards an understanding  
 24 that this is the sexual exploitation.  
 25 So I would be interested to understand where that

Page 102

1 was -- part of the move in practice has been to really  
 2 reaffirm consistently that this is a form of child  
 3 sexual abuse. I think the reason why we retain some  
 4 distinction is because there are some very different  
 5 kinds of practice challenges that might occur in  
 6 relation to child sexual exploitation. I also think it  
 7 is about a recognition of what young people have said  
 8 throughout research, my own research, but other research  
 9 that involves children and young people. I understand  
 10 it is very important that young people are able to see  
 11 themselves represented in those understandings of sexual  
 12 abuse.  
 13 MR LIVINGSTON: Thank you. We heard from Dr Beckett earlier  
 14 that she had concern about child sexual exploitation  
 15 being sort of encompassed within this wider discussion  
 16 of child exploitation, and you say in your statement as  
 17 well, at paragraph 13, that you don't -- you think there  
 18 needs to continue to be a distinction between those two  
 19 things. So the inquiry will hear evidence over the next  
 20 couple of weeks that some areas have moved away from  
 21 having child sexual exploitation meetings or child  
 22 sexual exploitation risk registers and moved to  
 23 a broader child exploitation model. Briefly, do you  
 24 also think that that's the wrong move?  
 25 DR HALLETT: Yes, I do. I concur with what Dr Beckett says.

Page 104

<p>1 So I think it's really important to recognise what are 2 the sorts of challenges for practitioners, but also what 3 are the needs that young people are going to have, and 4 I think it's very clear that there is a difference where 5 there has been sexual harm and assault, and so I think 6 we really do need to recognise that within an 7 understanding for practitioners to think of, how do 8 I understand the care and support needs of this child 9 and young person, and making them aware that they really 10 do need to recognise some of the consequences and the 11 trauma experienced through sexual assault. 12 MR LIVINGSTON: Do you think, on the other hand, that there 13 might be a risk that separating these two forms of 14 exploitation will make it more difficult to identify 15 sexual exploitation where, for example, it occurs in the 16 context of a gang or a county lines group or some sort 17 of organised crime group? Is that a risk? 18 DR HALLETT: It is a risk. I think with all of these 19 things, the problem -- the reason why it is a risk is 20 because of the sorts of challenges that Dr Beckett has 21 relayed. So it becomes a risk when these sorts of 22 definitions are used to exclude, rather than as a way of 23 recognising social phenomena and as a way of directing 24 practice. So when they are used to exclude, they then 25 become a means of, is this a form of criminal</p> <p style="text-align: center;">Page 105</p>	<p>1 exploitation or is it sexual exploitation? And 2 practitioners, if they are directing on the basis of 3 that understanding, then I think that is the risk. 4 I think where we have a practice approach and 5 a structure of responding to children and young people 6 that is actually about recognising what the care and 7 support needs for this child or young person, and it 8 could be multiple overlapping forms of exploitation and 9 abuse, as well as other forms of harm occurring within 10 the family and outside of the family, I think what we 11 really need to do is make sure that, within any kind of 12 practice response to sexual exploitation, is to 13 recognise, actually, this is really about recognising 14 the care and support needs of a child, and there could 15 be multiple ways in which those children are being 16 harmed or even harming others. 17 I think that's what definitions should do. They 18 should be there to aid understanding. I don't think 19 these should necessarily be there to then put a tick box 20 against a young person and start to say, "You're this or 21 you're that". 22 MR LIVINGSTON: Thank you, Dr Hallett. 23 Dr Beckett, in March 2020, the Centre of Expertise 24 on Child Sexual Abuse published a report on developing 25 a new typology of child sexual abuse offending. The</p> <p style="text-align: center;">Page 106</p>
<p>1 report itself is at INQ005373, but I think we can most 2 helpfully look at the witness statement of Ian Dean, the 3 director of the centre, which is at INQ005170_013, if we 4 could have that up on screen. 5 Dr Beckett, as you would be aware, at paragraph 32 6 Mr Dean sets out this typology which has nine different 7 types of child sexual abuse perpetrated by adults. It 8 goes on to the next page, but some of the examples are 9 child sexual abuse within the family environment; child 10 sexual abuse through online interaction; child sexual 11 abuse through groups and networks; arranged and 12 perpetrated for payment; or child sexual abuse through 13 attack by an unknown person. 14 You said before that, given the current broad 15 definition of child sexual exploitation, you thought it 16 wasn't a particularly useful concept. Do you think 17 a typology like this, where we have these nine different 18 types of child sexual abuse, is a more useful way of 19 looking at child sexual abuse, Dr Beckett? 20 DR BECKETT: I think there are a number of positive things 21 about this typology, mainly around the fact that it does 22 recognise that child sexual abuse takes many different 23 forms and exchange can be part of that and also, as the 24 centre recognises, itself, in this document, it is not 25 about saying that these are distinct forms of abuse, but</p> <p style="text-align: center;">Page 107</p>	<p>1 actually they can overlap and they can interplay. 2 I think that's positive. 3 I am, however, very anxious about a typology-type 4 model because the manifestations of CSE or any other 5 form of child sexual abuse are constantly changing and 6 developing, and what we have seen in practice is that, 7 in the same way that Dr Hallett has just outlined, that 8 people unhelpfully use definitions to categorise and 9 therefore create or give or restrict access to resources 10 and support, I think we will see the same with a tight 11 typology. 12 So I think this is helpful in moving the 13 conversation forward to recognise that there are 14 different forms, but what I would highlight is a couple 15 of omissions in this that I would like to see taken 16 forward. This was, and they do recognise this, based on 17 what we know about perpetration, and in a wide range of 18 research that we do with children and young people, they 19 repeatedly tell us about many forms of sexual abuse that 20 they experience that aren't known to the authorities or 21 that they don't recognise as sexual abuse and therefore 22 they are not reporting. So for me there will be many 23 other forms of this that children and young people are 24 experiencing but that are not going to be captured in 25 a typology that is being devised around official</p> <p style="text-align: center;">Page 108</p>

<p>1 statistics and cases that have reached the attention of 2 authorities. 3 I do note one particular omission in this, and I am 4 going to pick it up because it comes back to what 5 Dr Hallett said, and for me this is the nub of 6 the challenge around child sexual exploitation. 7 I raised my concern about the definition, in that it 8 also includes perpetrator gain where there is no need 9 for a child or young person also to be receiving. I'm 10 going to park that because that's a separate concern. 11 If we think about the fact and the importance of 12 recognising where a child or young person is receiving 13 something in exchange for the abuse, that strikes me as 14 a very obvious omission in this typology. So although 15 it allows for CSA arranged and perpetrated by payment, 16 it only looks at when that is being received by the 17 perpetrator. I would absolutely reiterate what 18 Dr Hallett has talked about, the importance of being 19 able to work with agency. It is very interesting, the 20 English definition that we have ended up with in 2017 is 21 actually an adapted version of one we tried to introduce 22 in Northern Ireland in 2014, and we actually got very 23 significant pushback at that time to the fact that the 24 phrase, "what a child needs or wants", was in the 25 definition. The essence of that pushback said, you</p> <p style="text-align: center;">Page 109</p>	<p>1 cannot say in a definition of abuse that a child is 2 getting something they want or need, because people 3 won't recognise it as abuse. Now, for me, that's the 4 nub of the problem, that we have created some idealised 5 victim scenario where we can only see a child as being 6 abused if we see them as being entirely groomed, 7 manipulated, controlled by other people. We do, as 8 Dr Hallett says, really need to find a way to recognise 9 that the reality of many children and young people's 10 experiences of abuse is that they are concurrently 11 experiencing horrendous -- horrendous -- harm, but they 12 may be gaining or getting a need or want met at the same 13 time. I don't think we can overemphasise the importance 14 of this, because to just say, we can't talk about what 15 a child needs or wants because, therefore, it is not 16 abuse, means we are going to continue to see Serious 17 Case Reviews that find that children are being written 18 off as making active lifestyle choices, et cetera, 19 et cetera. 20 We need to understand that, for the reasons that 21 Dr Hallett outlined -- economic, social, all of these 22 other reasons -- sometimes children and young people are 23 initiating exchange and are being sexually abused 24 because of a need or want. I find it a real omission in 25 a typology that we can't engage in that nuance of</p> <p style="text-align: center;">Page 110</p>
<p>1 children and young people, some children and young 2 people's lives. 3 MR LIVINGSTON: Thanks, Dr Beckett. I suppose the question 4 which leads on from this is that both you and Dr Hallett 5 have said that one of the difficulties with definitions 6 is that they're too wide, but that they shouldn't be 7 used in an exclusionary way, so it should be about 8 a sort of practice response. I think the practical 9 difficulty -- or you may disagree -- is, when it comes 10 down to counting, it's that when a police force or 11 a local authority is asked "How many cases of child 12 sexual exploitation do you have this year?", how do you 13 say that they should count that, or do you say that they 14 shouldn't be asked to count that? Sorry, that's to 15 Dr Hallett. Sorry, I should have said. 16 DR HALLETT: I have concerns about the focus on the need to 17 establish numbers, and often that is -- often the reason 18 for that is about direction of resources. But I have 19 concerns because I know with other forms of crime it's 20 not necessarily about the numbers, but it's about the 21 significance of the harm caused through that crime. 22 I think it is possible to -- I think we should 23 retain an understanding of child sexual exploitation, 24 and that's -- I'm very clear about that. I think we 25 should have that. I think we need to equip</p> <p style="text-align: center;">Page 111</p>	<p>1 professionals with the understanding of what we mean by 2 a form of exchange in relation to child sexual 3 exploitation, and I think it is possible to do that. 4 I don't think we should be driven by the need to 5 collect data. I think, really, if we are really trying 6 to think about ways in which we can create a change in 7 institutional response and culture, it really needs to 8 be about leading from an understanding of child sexual 9 exploitation that comes from young people themselves who 10 have experienced this, and so I think sometimes the -- 11 not -- "obsession" is too strong a word, but sometimes 12 the focus and attention given towards asking people to 13 evidence, I think that can be really problematic, and 14 sometimes that is part of -- forming part of the sort of 15 system that is -- that then leads practitioners to do 16 the same. 17 So they then start to say, "Can I categorise in this 18 way and, therefore, is that about the resourcing and can 19 I direct that young person to this resource or that 20 resource or that form of help?" 21 MR LIVINGSTON: Thank you, Dr Hallett. 22 Dr Beckett, at paragraph 4.4 of your statement, you 23 refer to the fact that in your research you have still 24 observed the presence of victim-blaming language and 25 actions within institutional responses to CSE. You go</p> <p style="text-align: center;">Page 112</p>

1 on to say that a consequence of this is a failure to  
 2 identify and respond to the CSE itself. Do you have  
 3 a view on what can be done to improve that situation?  
 4 Is it -- I say simple, but is it really a case of  
 5 training/education to drive practice response?  
 6 DR BECKETT: What I would say is, actually, in the training  
 7 work we do, we do see a real difference when we engage  
 8 in that. So I don't think it is about simplistic  
 9 resources saying, "Don't use this word, use this word  
 10 instead". It has to be more nuanced than that. When we  
 11 train -- we do a lot of training professionals. When we  
 12 do that, we try to unpack what's going on behind that.  
 13 We talk a lot about unintended consequences and that's  
 14 what we see in this field. People are using language --  
 15 I have already talked about active lifestyle choices.  
 16 Instead, we try to help them understand that concurrent  
 17 presence of gain and harm and the concept of constrained  
 18 choice which, as Dr Hallett talks about, is recognising  
 19 that, just because we recognise agency doesn't mean that  
 20 that goes alongside blame. We have to recognise that,  
 21 yes, they may be making a choice, but they are making  
 22 a choice from severely constrained circumstances that  
 23 any of the rest of us would not want ourselves to be in  
 24 and would not want to be making that choice.  
 25 So we try to actually -- if done well, training and

Page 113

1 experienced by adolescents, but a lot of it is -- is the  
 2 societal intolerance to adolescents to start off with.  
 3 We inherently see them as problematic, and we interpret  
 4 their behaviours in a problematic way. You only have to  
 5 look at the rules we have in society around young people  
 6 -- "Only two in the store at the same time. Leave your  
 7 schoolbag at the door". You are never going to say that  
 8 to me as an adult woman and that's because you assume  
 9 they are going to do something wrong and we are not.  
 10 There are really significant attitudes I think we  
 11 have to get to the heart of if we are going to change  
 12 this victim blaming of young people who are experiencing  
 13 the CSE.  
 14 MR LIVINGSTON: Thank you.  
 15 DR HALLETT: Could I add to that? Just to add to --  
 16 I concur with what Dr Beckett said and I would just like  
 17 to add that I think there is something systemic about  
 18 this, which is about how sexual exploitation has evolved  
 19 in ways that, as a problem, it became constructed around  
 20 certain risk indicators and those risk indicators are  
 21 essentially about the behaviours that young people  
 22 engage in, and I think because inadvertently, however  
 23 the history occurred, is that suddenly it moved from,  
 24 this is how to see it and to see what's hidden. These  
 25 actually became a focus of concern and risk reduction.

Page 115

1 education does help unpack that, and also helping people  
 2 recognise the implications of using that language. So  
 3 it influences how other professionals respond.  
 4 If one professional uses victim-blaming language, we  
 5 see that in the case files, that has a knock-on effect  
 6 for how other people read or hear what is being said and  
 7 how the young person is experiencing it.  
 8 Particularly importantly, and young people  
 9 repeatedly tell me this, over the years in research, it  
 10 makes them not want to engage. And fair play to them:  
 11 why would you? If I come to talk to you about what's  
 12 going on and I think you think it is my fault or you use  
 13 language that somehow suggests it is my fault, of course  
 14 I am not going to want to engage with you. So actually,  
 15 this use of blaming language, inadvertently,  
 16 purposefully, whatever it is, I think it is very often  
 17 inadvertently, but it is creating a barrier to young  
 18 people being able to receive the support they need from  
 19 us. It is creating a barrier to us being able to see  
 20 the problems of what are going on.  
 21 So I think it is about training and education, but  
 22 it has to not just be simply about changing language, it  
 23 has to be about understanding attitudes. We can't  
 24 ignore the fact that kind of what is really playing into  
 25 all of this as well -- this is not that CSE is only

Page 114

1 So a lot of the work that has existed -- this is  
 2 confirmation of the need for a definition and aiding of  
 3 understanding, because a lot of this work is about  
 4 educating young people about healthy relationships and  
 5 educating young people about risks and how that is  
 6 perceived by young people is that that feels punitive,  
 7 and these ideas of responses that are invoked in the  
 8 name of protection mean that young people see themselves  
 9 as being the problem and they think that other people  
 10 think they are the problem rather than an attention to  
 11 the reasons that might be at the root of the problem as  
 12 they insist it or an attention to perpetrators.  
 13 DR BECKETT: May I very briefly add to that which is just to  
 14 say in some research we just did for yourselves, the  
 15 inquiry, into how children are educated about online  
 16 harm in schools, they very clearly repeated that  
 17 message, that how we educate them is telling them it is  
 18 their responsibility to keep themselves safe. It is  
 19 locating blame for experiencing harm with them, because  
 20 they didn't do what we told them to keep themselves  
 21 safe. I can totally concur with Dr Hallett: we need to  
 22 move away from this deficit-based focus on the child and  
 23 their behaviours and look at what I talk about in my  
 24 work, the interconnected conditions for CSE, which says,  
 25 "Let's take the sole focus off the vulnerability of

Page 116

1 a child which is driving our risk assessments because  
2 a child's vulnerability is not the issue". I'm sorry,  
3 this is my mantra I always go on about. A child is not  
4 exploited because they are vulnerable. A child is  
5 exploited because there is someone who is willing to  
6 take advantage of that vulnerability and inadequate  
7 protective structures in place, and by that I don't  
8 simply mean the family, I mean everything around them  
9 and the societal conditions that feed into that. So  
10 I totally concur that we really need to move away from  
11 locating responsibility for preventing harm and  
12 responding to it with children.  
13 MR LIVINGSTON: Thank you.  
14 DR HALLETT: I would like, sorry, I do -- I agree wholly  
15 with what Dr Beckett just said, but it is so clear from  
16 the research that I've been involved in with young  
17 people that they do also centre the vulnerabilities that  
18 they have as part of the problem of CSE. So that  
19 response is not just about the exploiter but about  
20 ensuring that there is no need or -- no unmet need that  
21 can be exploited and so they're very clear about that  
22 being encompassed within any kind of understanding of  
23 sexual exploitation.  
24 MR LIVINGSTON: On a similar basis, but slightly different,  
25 we heard this morning about victims' experiences in the

Page 117

1 We had a really interesting piece of work we were  
2 funded to do where we brought young people and police  
3 together to look at how police could improve responses  
4 to CSE, and that was -- that was just a joy, to actually  
5 have police and young people come together and think  
6 about how we could better do this. They came up with  
7 a set of principles about how police could be working  
8 with young people in this field and I know others have  
9 done similar work.  
10 So for me it is about disseminating that, it is  
11 about recognising the challenges that the criminal  
12 justice system does face. But it is about pushing back  
13 on the assumptions that come with that. When I train  
14 police, I talk about giving young people choices and  
15 they say, "Well, I can't give them choice if I get  
16 called onto another case". I say, "Let's really think  
17 about that. Yes, you can. You can say, 'Would you like  
18 to reschedule and would you like someone else to come?'"  
19 I think how we start -- because, actually, the  
20 policy isn't bad. It can be tweaked and improved. But  
21 the policy isn't bad in terms of its stated intentions  
22 for young people who experience harm. But we really  
23 need to do -- and by training, yet again, I don't simply  
24 mean put someone on the course, make them read  
25 something, I mean training that gets to the attitude and

Page 119

1 criminal justice system. Dr Beckett, you say in your  
2 statement that your research shows, repeatedly shows,  
3 that empathy, concern and respect has been lacking  
4 there, although the position has improved recently. You  
5 refer to something which has been, I think, a consistent  
6 theme throughout the inquiry's hearings, which is a gap  
7 between policy and guidance on the one hand and practice  
8 on the other hand. Very simply, how do we close that  
9 gap? Is there a simple way to close the gap,  
10 Dr Beckett?  
11 DR BECKETT: Sorry, passionate academics could talk about  
12 this all day long.  
13 Yes, that is absolutely the issue. I think it is  
14 about sharing -- I don't like to use the language of  
15 "good practice" because we don't know unless we have  
16 really checked it out, but of promising practice. When  
17 you say things have improved, they certainly have. But  
18 what I would say, they have not improved consistently.  
19 There are pockets of things that are being done better,  
20 and there are pockets where it is still not.  
21 Interestingly, we do work and we do training with police  
22 forces. I have done training with prosecutors.  
23 Actually, what they talk about is the lack of -- sharing  
24 the lack of kind of ability to learn from each other  
25 about what is working.

Page 118

1 the things behind what's getting in the way of doing  
2 this.  
3 MR LIVINGSTON: Thank you. Moving on to a slightly  
4 different issue, Dr Beckett, in your statement at  
5 paragraph 3.3, you refer to a specific issue in terms of  
6 data analysis, which is that the figures for the number  
7 of children at risk of sexual exploitation is often  
8 conflated with the number of children who have actually  
9 been, or are even suspected to have been, the victims of  
10 sexual exploitation. Is the solution to this -- is it  
11 a case that people need to produce three separate  
12 figures, one for those at risk, one for those suspected  
13 to be victims and one for those who have been victims?  
14 Or is there some other way of avoiding this conflation?  
15 DR BECKETT: Well, again, I think this links back to what  
16 Dr Hallett raised about the issues with the risk  
17 assessments because a lot of those figures -- I did this  
18 in my early research myself. We used the risk  
19 assessments, we categorised, we said, "How many are at  
20 high risk?". They're based on flawed risk assessments.  
21 So there's an issue in and of themselves.  
22 Actually, they're conflating risk -- so what are  
23 vulnerability factors with actual warnings of abuse? So  
24 I repeatedly look at cases where people are being  
25 described as being at high risk of CSE, when the

Page 120

1 evidence is there clearly showing that they're being  
 2 abused. So we need to look at that understanding of  
 3 what's the difference of risk and actuality.  
 4 MR LIVINGSTON: So are you saying it's conflated both ways,  
 5 in fact, so people are described as being at risk when  
 6 they have actually been clearly victims of CSE?  
 7 DR BECKETT: Yes.  
 8 MR LIVINGSTON: Equally, people are described as victims of  
 9 CSE where they have never actually come into contact  
 10 with the perpetrator, it is just there is concern they  
 11 might do or they're vulnerable?  
 12 DR BECKETT: Yes, because in the first piece of research  
 13 I did back in 2009, the highest-scoring risk assessment  
 14 was actually a young man dealing drugs who ticked all of  
 15 the risk indicators and they did look into it and there  
 16 wasn't CSE going on. So it can work both ways.  
 17 So for me, it is about -- and I do recognise that  
 18 the Centre of Expertise is trying to bring in a data  
 19 collection tool and trialling that, because it is about  
 20 more accurate data collection -- I suppose one thing  
 21 I would say is I always challenge the use of  
 22 the language of children being at risk of CSE because  
 23 every child is at risk of CSE. I think we often use the  
 24 terminology of "at risk" as shorthand to, there is  
 25 something specific going on here makes me think they are

Page 121

1 as compared to other forms of child sexual abuse, is  
 2 less common?  
 3 DR BECKETT: What I would say is there is not a clear  
 4 evidence base that compares one to the other. One of  
 5 the members of staff in our centre has looked at what  
 6 can -- can we apply the evidence base around disclosure  
 7 of CSA to CSE more generally and what does that show us?  
 8 Actually, there is a lot that can be compared.  
 9 I do think there are unique challenges to certain  
 10 types of CSE. I'm going to say that because I only am  
 11 focusing here on what we have talked about before, which  
 12 is when the young person is receiving something in  
 13 return for the abuse, and as I talk about, that exchange  
 14 and that need is creating the conditions for the abuse.  
 15 It's what's allowing it to happen.  
 16 I do believe that -- so I can't give you figures,  
 17 but certainly the research evidence would show that that  
 18 does create an additional barrier because, actually, in  
 19 reporting it, and in services responding, it is taking  
 20 away the child's access to something that they are  
 21 needing or wanting, and so I do believe if someone is,  
 22 like Dr Hallett talked about -- you know, survival sex  
 23 is needing to sell sex because they need a roof over  
 24 their head or they need money or, in a case I talk about  
 25 in my recent writing, because, actually, they are so

Page 123

1 at heightened risk. So it think it is about people in  
 2 their reporting of cases, which then obviously impacts  
 3 data collection, being clear about, is it that they have  
 4 particular concerns because of a child's vulnerability  
 5 or because of access by a perpetrator, et cetera, or is  
 6 it actually that there are indicators that something is  
 7 going on here?  
 8 I purposefully use that language because I recognise  
 9 the challenges in proving this, but I still think people  
 10 within data collection can be clearer on, am I saying at  
 11 risk because there are these vulnerability factors there  
 12 or is there actually something going on which makes me  
 13 think -- which would indicate that CSE is happening.  
 14 MR LIVINGSTON: I suppose it is the difference between at  
 15 risk and suspected CSE.  
 16 DR BECKETT: Yes.  
 17 MR LIVINGSTON: I'm grateful. Moving on, sorry to canter  
 18 through this, I know this is something that you have  
 19 both done a lot of work on. Dr Beckett, in your  
 20 statement at paragraph 4.1, you refer to barriers to  
 21 disclosure of sexual exploitation. Now, the inquiry has  
 22 heard lots of evidence about barriers to disclosure of  
 23 abuse in various contexts. But in the context of sexual  
 24 exploitation specifically, do you know, is there any  
 25 research on whether disclosure of sexual exploitation,

Page 122

1 traumatised by prior sexual abuse, they need alcohol to  
 2 block it out on a daily basis. That reluctance or  
 3 inability to give up that thing you are getting in  
 4 return I think does add an added layer and complication  
 5 which creates another barrier to disclosure.  
 6 MR LIVINGSTON: Thank you. If we can have up on screen,  
 7 please, MPS004286\_036. I will start asking the question  
 8 while we are waiting for the document to come on screen.  
 9 Dr Beckett, you say in your evidence that, because  
 10 of these barriers to disclosure, it becomes even more  
 11 important to focus on the professional ability to  
 12 identify harm, so not just waiting for a child to speak  
 13 to a teacher or social worker, but that teacher or  
 14 social worker or police officer to identify it. I don't  
 15 know if you had the chance to consider this, but this is  
 16 part of the London CSE protocol and it is a mnemonic  
 17 called "Safeguard" which seeks to provide warning signs  
 18 to assist practitioners. Do you have a view on whether  
 19 this type of thing would help professionals to identify  
 20 harm?  
 21 DR BECKETT: I think anything that gets people to think  
 22 about it is helpful. I do, however -- and this is from  
 23 a number of years ago, I think three years ago -- think  
 24 this is slightly of its time and reflects an outdated  
 25 understanding of CSE. This mnemonic I think replicates

Page 124

<p>1 some of the concerns that both Dr Hallett and I have  2 already raised about its conflating a vulnerability  3 factor and an actual indicator of harm, as in something  4 is going on here I want to be responding to. It is not  5 directly linked to CSE. There has been good work done  6 by the Centre of Expertise around the problems with risk  7 assessment and the fact that most of these vulnerability  8 factors don't actually necessarily indicate CSE. They  9 certainly indicate something may be going on we want to  10 look at, but not necessarily CSE.</p> <p>11 I think, also, with things like this, we just need  12 to be really cautious around stuff like the use of  13 gendered language, around kind of looking for  14 boyfriends, because I think that inadvertently feeds  15 into assumptions that it is only males who perpetrate  16 this type of crime.</p> <p>17 So I think this is -- there is a tension, because we  18 do need professionals to recognise, and I see this in  19 the work I'm doing, work on how we improve risk  20 assessments at the minute, and I see and people are  21 saying, "There is a real desire, give us a checklist,  22 give us something we need, give us a list we can go  23 through and see is this going on". Unfortunately, the  24 problem is, and I have noted that others have said this  25 in their witness statements, there is not the evidence</p> <p style="text-align: center;">Page 125</p>	<p>1 base to support that. We don't have an evidence base  2 that says, "Look for these eight things and these will  3 tell you CSE is going on".</p> <p>4 MR LIVINGSTON: I'm going to come on to that in a second,  5 Dr Beckett. I'm going to come on to risk assessment in  6 a minute. Before we do that, the document can come off  7 screen, Dr Hallett, we have heard evidence before the  8 inquiry from the Angelou Centre and from others -- and  9 for the record that's at INQ006185_014 to _015, but we  10 don't need that up on screen. Essentially, this is the  11 suggestion that, because of a lack of black and minority  12 ethnic workers in agencies like social work and police,  13 that due to lack of appropriate understanding of these  14 communities, the Angelou Centre say they witness  15 statutory agencies and social workers being groomed into  16 collusion by perpetrators. Is that sort of lack of  17 understanding of community something that you have come  18 across in your research, Dr Hallett?</p> <p>19 DR HALLETT: No, not specifically. However, I did -- when  20 I looked another that witness statement, I did think  21 that that aligned with a number of the reasons why some  22 young people are not going to be identified as being at  23 risk or young people who might be more likely to be  24 perceived as trouble.</p> <p>25 Dr Beckett has already relayed this, but I do think</p> <p style="text-align: center;">Page 126</p>
<p>1 this, again, relates to concepts of sexual exploitation  2 that undermine young people's agency. Because what we  3 have -- and it is well reported within the studies of  4 CSE -- there are limiting stereotypes and understandings  5 of vulnerability and this can depend on commonsense  6 ideas of innocence and those who are kind of socially  7 imagined as subjects. So what I mean by that is, young  8 people for whom -- they are seen as having agency. So  9 this can mean young people such as males, transgender  10 young people, those involved with services as young  11 offenders, and also young people who are persons of  12 colour or black, and so they can fall into being what  13 Julia O'Connell Davidson calls "victims of victimhood",  14 meaning they are less likely to be recognised as victims  15 of abuse and in need of care and support and they're  16 more likely to be recognised as potential threats.</p> <p>17 I think young people know when they feel as if they are  18 going to be listened to. I think you made the point at  19 the beginning about where are the crossovers and where  20 are the differences, and I think those crossovers, those  21 consistent messages, about being listened to, being  22 heard, given time, being able to share your story and to  23 have that received and recognised, but also, as  24 Dr Beckett has said, I think I would follow on from what  25 she said. It is not just about young people being</p> <p style="text-align: center;">Page 127</p>	<p>1 afraid to -- not wanting to give up whatever it is, the  2 need that's being met, but it is also the concern that  3 if they go to someone and they say, "I may have been  4 involved in this" or they feel themselves to have been  5 involved in it, that they won't be seen as victims.</p> <p>6 I think that, again, is where concepts and definitions  7 are really important. Young people need to recognise  8 themselves as being seen as victims.</p> <p>9 MR LIVINGSTON: Thank you, Dr Hallett. To summarise the  10 position, looking at risk assessment, you both already  11 talked about it. I think you both agree and set out in  12 detail in your statements and cited research that,  13 essentially, there is a lot of problems with risk  14 assessment tools and scoring tools. There is loads of  15 research which sets that out. You both think that the  16 way that they are currently framed or were framed, at  17 least in Wales, was a bad idea.</p> <p>18 Dr Hallett, you have set out helpfully the position  19 in Wales going forward, so I don't think I need to ask  20 you about that now. But Dr Beckett, what do you see as  21 the future of risk assessment in England or what should  22 it be?</p> <p>23 DR BECKETT: The researcher in me does not want to commit to  24 something that we have not fully researched. But what  25 I would say, what needs to happen, and what is starting</p> <p style="text-align: center;">Page 128</p>



<p>1 to happen, is a conversation around how we more                  2 helpfully risk assess, and there are key underpinning                  3 principles for me around that. It is about avoiding                  4 scoring, avoiding categorisation, avoiding assumptions.                  5 You know, there are a lot of assumptions that underpin                  6 risk assessments. For example, we assume if a child is                  7 not in school, that that is a negative thing. Well,                  8 actually, we have had a programme of research that has                  9 been looking at the presence of harmful sexual behaviour                  10 in schools and the level of abuse that children are                  11 experiencing in school, and so for that child, not being                  12 in school may actually be them protecting themselves.                  13 So we need to move beyond this kind of list of                  14 indicators that assume simplistic interpretations of                  15 something. What we need to actually move towards is                  16 a holistic understanding of what's going on for that                  17 child, what's changing for that child, what's the                  18 context. We talked earlier about the interconnected                  19 conditions of abuse. I feel very strongly that risk                  20 assessments that only look at a child's behaviours and                  21 vulnerabilities are only partial and I totally agree                  22 with Dr Hallett: it is important to engage with the                  23 vulnerabilities and what we can do about them but it is                  24 also really important that we look at the other contexts                  25 of the abuse.</p> <p style="text-align: center;">Page 129</p>	<p>1 The other, very briefly, thing is, we need to engage                  2 children and young people in conversations. They know                  3 what's going on for them. We need to stop making                  4 decisions about them on their behalf without engaging                  5 them and without engaging non-abusing parents who are                  6 trying to protect them as well.                  7 MR LIVINGSTON: Thank you. Two more questions. One for                  8 each of you. Dr Hallett, both you and Dr Beckett have                  9 written about the use of out-of-area placements for                  10 children in response to concerns about child sexual                  11 exploitation, and we heard yesterday in some of                  12 the opening statements that there is this tension                  13 between the idea that it might make a child safer if                  14 they are physically removed from the people or location                  15 in which they are being exploited. But, on the other                  16 hand, there is the negative implications about moving                  17 them away from all the things that safeguard them and                  18 moving them to a different place. Is that just                  19 a tension that is resolved on a case-by-case basis, in                  20 your view, Dr Hallett?                  21 DR HALLETT: I think there are practices that we can put in                  22 place about this. So one thing that we found from the                  23 Keeping Safe research when we did a statistical analysis                  24 on this was actually it was almost 50/50 split about                  25 whether the removal to a secure unit or out-of-county</p> <p style="text-align: center;">Page 130</p>
<p>1 placement had a positive impact and a positive outcome                  2 and for those whom it didn't. I think when we look at                  3 why did it not have a positive impact, I think it was                  4 about the support that was put in place surrounding that                  5 young person, and I know from young people's narratives                  6 in my own research, young people will say, unless they                  7 are addressing -- unless people are addressing the                  8 problems as they see it, then -- in their words, it will                  9 just happen again.                  10 So I think what we can learn from those kinds of                  11 responses, and I have to admit, I was very surprised to                  12 see that there can be positive outcomes from the removal                  13 to a secure unit, but I think it really is about the                  14 relationships that are maintained and I think it's the                  15 way in which young people are involved in any decisions                  16 that are made about their care.                  17 MR LIVINGSTON: Thank you. Dr Beckett, finally, you talk                  18 a little bit in your statement about this idea of                  19 contextual safeguarding. I think the inquiry is going                  20 to hear quite a bit about this over the next two weeks                  21 because both Bristol and Swansea are two of the early                  22 adopters of this. Can you try and explain what the                  23 purpose of contextual safeguarding is, but, more                  24 importantly, what does it mean in practice?                  25 DR BECKETT: Yes. So this is actually a programme of work</p> <p style="text-align: center;">Page 131</p>	<p>1 headed up by Dr Firmin, one of my leadership teams, so                  2 I hope I do it justice. In essence, this came about as                  3 a result of Dr Firmin's doctoral research looking at                  4 extrafamilial harm and, in doing so, discovering that                  5 when assessing harm to a child that was coming from                  6 outside of the home environment, the traditional child                  7 protection procedures were doing the default of                  8 assessing the risk to the child in the home and parental                  9 capacity to safeguard and trying to highlight the fact                  10 that, actually, when the source of harm is outside the                  11 home, to not consider what is going on in those                  12 environments doesn't actually allow you to holistically                  13 understand the harm that the child's incurring, and what                  14 protective and preventative measures could be put in                  15 place.                  16 So contextual safeguarding is about encouraging                  17 a more holistic, ecological approach to considering harm                  18 that occurs and it is only focused on harm that occurs                  19 outside of the family environment, but saying, well, if                  20 it is occurring in the school environment, it is                  21 important to look at what's going on in the school                  22 environment as well. If it is occurring in the                  23 community, it is important to look at what's going on in                  24 the community. If we are to properly risk assess and                  25 respond, we need to look at all of those spheres of</p> <p style="text-align: center;">Page 132</p>

<p>1 a child's life and how they interconnect and what we and                  2 a range of partners -- because that opens up work for                  3 a range of different partners working in the                  4 community -- can be doing to create safer spaces as well                  5 as to just be responding to individual cases of harm of                  6 a child.                  7 MR LIVINGSTON: Very briefly, just following on from that,                  8 is there a way in which the effectiveness of contextual                  9 safeguarding will be measured or are there just a lot of                  10 factors that will be measured?                  11 DR BECKETT: Yes. So contextual safeguarding is one of                  12 three kind of innovative initiatives that is actually                  13 just -- a programme of work funded by the ESRC has just                  14 started looking at the impact of that work and that's                  15 going to be being tracked over the next couple of years.                  16 It was also evaluated under the DfE funding that was                  17 provided to Hackney, which was the first local authority                  18 that implemented it. There was an evaluation of that                  19 and that is actually still kind of ongoing at the                  20 minute.                  21 The one thing that's probably really important to                  22 emphasise at this point and I think one of the things                  23 that gets confused about contextual safeguarding is,                  24 contextual safeguarding is not a model. It is not a way                  25 of doing things. It is a set of principles and a way of</p> <p style="text-align: center;">Page 133</p>	<p>1 trying to understand an issue, and so one of the things                  2 that is being evaluated as we go forward is the many                  3 different ways those principles can be implemented so                  4 they are relevant to local context.                  5 MR LIVINGSTON: Thank you. Dr Beckett, Dr Hallett, those                  6 are all the questions I have for you. The chair and                  7 panel may have a few questions.                  8 THE CHAIR: Thank you, Mr Livingston. I will pose                  9 a question and then I will ask the other panel members                  10 if they have any questions.                  11 Questions from THE PANEL                  12 THE CHAIR: A question for both of you, if you don't mind.                  13 How do you suggest, at the most basic level, that                  14 institutions will know if the problem of child sexual                  15 exploitation is getting better or worse in their own                  16 localities and, indeed, whether the responses are                  17 achieving better outcomes? Or do you think it doesn't                  18 matter and it is the wrong way to approach it?                  19 DR HALLETT: I think it can be the wrong way to approach it                  20 if -- I think where an approach towards work with young                  21 people is actually about recognising and tackling the                  22 care and support needs of a child, and included within                  23 that is those risks around a young person and those                  24 abuses and harms. I'm not sure whether actually trying                  25 to look at the particular numbers is really beneficial</p> <p style="text-align: center;">Page 134</p>
<p>1 for children or for practitioners. I have heard that --                  2 I have heard the arguments that this is beneficial                  3 because it is about directing resources, but I think if                  4 we have a children's services and a social care system                  5 that is really driven by well-being and child-centred                  6 practice and moves away from purely a focus on risk,                  7 I think that opens up a whole range of different ways to                  8 support and respond to children and young people, and so                  9 I think, actually, because alongside this, as we have                  10 both been relaying, young people will be experiencing                  11 many number of different harms. I think trying --                  12 I think what we need to move away from is this single                  13 issue-based assessment or single issue-based practice.                  14 I really think, if you begin to have social care systems                  15 that are about the care and support needs and                  16 well-being, it's that that's going to provide the kind                  17 of response that young people deserve and want and                  18 I think -- and that will, in itself, relay a whole range                  19 of concerns that are being identified for those children                  20 and young people.                  21 So, no, I'm not sure whether trying to identify                  22 sexual exploitation on its own is particularly helpful.                  23 I think we can almost obliterate that by encompassing                  24 all of this within that different -- I guess what I'm                  25 talking about is a cultural shift and a change in ethos</p> <p style="text-align: center;">Page 135</p>	<p>1 in terms of how we do safeguarding work with                  2 adolescents.                  3 THE CHAIR: Thank you. Dr Beckett?                  4 DR BECKETT: So I would agree that there is going to be no                  5 obvious numerical count: (a) we don't have the baseline                  6 data; (b) everybody is defining it differently; and (c)                  7 actually an increase in cases may be a positive because                  8 what it means is an increased reporting in cases, not                  9 necessarily an increase in incidents. So I don't think                  10 we are able to do that.                  11 I do agree, though, I do think areas can get better                  12 at measuring what difference they are making and I do                  13 think that is, again, building on what Dr Hallett has                  14 said. That's about actually learning from children and                  15 young people what difference we have made in their                  16 lives. So not have we gotten back into education -- you                  17 know, not those simple measures that actually may be                  18 much more nuanced in terms of what's going on, but                  19 really moving towards a way to assess, to evaluate, what                  20 difference we make, that hears directly from children                  21 and young people themselves as to what difference we                  22 have made to their lives. So I think really moving                  23 towards an outcomes measure.                  24 I think in some ways for me it is also just about                  25 stripping it back. When we do this work around risk</p> <p style="text-align: center;">Page 136</p>

1 assessments with local areas and I say, "Look, it is not  
2 just that I don't think your risk assessment is good, it  
3 is that I actually think it is problematic. You are  
4 screening children out because this is based around one  
5 particular model that isn't capturing other forms of  
6 CSE". They say, "Well, what do we do instead?" I take  
7 them back to the principles of the Scottish approach of  
8 getting it right for every child and those questions are  
9 simply down to: what is going on; what does this child  
10 need; what does the child need from me; how can I make  
11 a difference? I would totally agree with Dr Hallett  
12 that definitions have been getting in the way of --  
13 sorry if I'm misquoting you, Dr Hallett, but for me it  
14 is less about the definition we apply and the difference  
15 we are making to a child's life and I think it is  
16 getting back to those simple questions of what is going  
17 on and what difference are we making.

18 THE CHAIR: Thank you very much. Ms Sharpling, do you have  
19 any questions?

20 MS SHARPLING: Yes, thank you, chair. Building on the  
21 question that you have just asked, if I may, to either  
22 Dr Beckett or Dr Hallett, I don't mind which. It is an  
23 inevitability, as this inquiry is dealing with  
24 institutions, that institutions must account for what  
25 they have done or what they have not done, and much of

Page 137

1 and one of the things I have found in my research is  
2 that, actually, what's happening is, through risk  
3 assessments, this becomes about risk protection for the  
4 organisation, and not really about tackling the  
5 well-being and care and support needs for children and  
6 young people. So scrutiny and continued scrutiny, that  
7 is a problem for young people, but it is also a problem  
8 for organisations, because people become paralysed in  
9 making decisions because they are in real fear of doing  
10 the wrong thing, they are in real fear of the worst-case  
11 scenario that might occur and they don't want to be the  
12 next case in the media.

13 So I really think that, in the discussions for the  
14 inquiry, it really is about looking at what are the ways  
15 in which a cultural shift towards social care services  
16 that are supported through policies towards the  
17 well-being and the care and support needs of children  
18 and young people would be a start.

19 MS SHARPLING: Thank you. Dr Beckett?

20 DR BECKETT: That's exactly what I have just written down,  
21 actually. I think it is about moving away from this  
22 risk aversion culture, which is about kind of -- all  
23 about minimising risk to the organisation. I think it  
24 is about -- everywhere I go and do training, I meet  
25 passionate, really committed workers who really want to

Page 139

1 the evidence we have heard throughout all our  
2 investigations has been suggestions that they have not  
3 accounted properly for their performance in relation to  
4 protecting children and young people.

5 I'm interested in your view about, what are the  
6 hallmarks, what are the characteristics, of good  
7 accountability in an institution tasked with the  
8 responsibility of protecting our children?

9 DR HALLETT: I think one of the key hallmarks is, what do  
10 young people say about the care and support that they  
11 have received? I don't think, at the moment, that young  
12 people are -- enough space is given to young people to  
13 share those views.

14 I guess the hallmarks are also about ensuring that  
15 not just individual young people are reporting on their  
16 own individual experiences, but there are external  
17 bodies or independent agencies who are able to hold  
18 local authorities to account. So, for example, the role  
19 of the Children's Commissioner, for example, they can  
20 have a very prominent role in ensuring that local  
21 authorities and Welsh Government are providing  
22 child-centred practice, but I suppose, in some ways,  
23 what is it that we are asking people to report against?  
24 I think we -- I can't emphasise enough that I think we  
25 have had a system that is about risk and managing risk

Page 138

1 make a difference to children and young people but who  
2 feel stymied in what they can do because of the system  
3 and because of the fear of what's going to happen. So  
4 I think it is about moving to a system that supports  
5 workers to work in a way that isn't about simply  
6 eradicating risk, because, really, all you're doing with  
7 a lot of these -- the actions that we take to eradicate  
8 risk are ensuring what I talk about being -- it's  
9 enforced compliance, it is not meaningful change.

10 Because if you don't do the wrap-around work and don't  
11 change the circumstances, things go back to how they  
12 were before. So it is about creating a learning  
13 culture, a proactive learning culture and supporting our  
14 practitioners to work in a way that may accept that,  
15 actually, the better thing to do here is hold some risk,  
16 but work in a meaningful way towards longer-term change.

17 One of the things they repeatedly tell us is they  
18 want to do that, the system needs to change to allow  
19 that, but also inspection frameworks need to change to  
20 allow that because that's what they're reporting  
21 against. So I think it is about kind of changing that  
22 framework of how we hold people to account of how they  
23 work in this field.

24 MS SHARPLING: Thank you.

25 THE CHAIR: Thank you. Mr Frank?

Page 140

<p>1 MR FRANK: Yes, one question, please, and it is for either                  2 of you or both of you, as you wish. Please feel free to                  3 take the question away and respond in writing if it is                  4 a bit more detailed than you were expecting.                  5 But the question of definitions and terminology is                  6 not merely an academic one. Obviously, as we all are                  7 aware, it has potentially quite serious practical                  8 consequences, and I have in mind, for example, that the                  9 definition of sexual exploitation that was adopted by                  10 the Council of Europe in 2016 was very largely based on                  11 recognitions from the UK Working Group on child                  12 exploitation, which included the underlying concept of                  13 exchange, which we have already talked about this                  14 afternoon.                  15 What I would like to understand from either of you,                  16 if I may, is, if that definition that we have put                  17 forward and has been adopted by our near neighbours in                  18 Europe, with whom we must co-operate in order to try to                  19 protect children in the international sphere, is                  20 deficient, in what ways should it be improved? In what                  21 way can it be made better and more applicable, bearing                  22 in mind the researches that you have told us about? So,                  23 please, I would be grateful for any information that you                  24 could share on that, and I well understand it may not be                  25 possible to do that instantly this afternoon.</p> <p style="text-align: center;">Page 141</p>	<p>1 DR HALLETT: I would be really happy to provide a written                  2 response to that. A lot of my work, most of my work,                  3 has been around defining sexual exploitation and around                  4 the concept of exchange. So I'd be really happy to                  5 provide a written statement around that.                  6 DR BECKETT: Yes, likewise. I'm embarrassed. I feel                  7 I should know off the top of my head what the Council of                  8 Europe definition is, but it's not coming to me, so I'm                  9 very happy to respond in writing to that.                  10 MR FRANK: Thank you very much.                  11 THE CHAIR: Thank you. And Sir Malcolm?                  12 PROF SIR MALCOLM EVANS: Yes, just two questions, briefly,                  13 if I may. Indeed, it may be easier to address them in                  14 the same way as the other witnesses propose to answer                  15 the question from Mr Frank, because in some ways it                  16 builds on precisely the point he has just made.                  17 I was just wondering whether, if we were going to                  18 move away from the definitions as we currently have them                  19 around child sexual exploitation, this actually would                  20 have -- what consequences this might have for the other                  21 side of the coin, if one can put it that way, which is                  22 the holding perpetrators to account and the extent to                  23 which that might, shall we say, impact on our                  24 understanding of the offences for which those                  25 responsible are currently capable of being prosecuted?</p> <p style="text-align: center;">Page 142</p>
<p>1 Because I fully understand the points that you're                  2 making, but it did strike me that there may be some                  3 potentially negative implications for that move in that                  4 way.                  5 Similarly with the questions concerning contextual                  6 safeguarding. Again, I understand the points that you                  7 are making about the shortcomings in data collection                  8 around child sexual exploitation because of                  9 the differential approaches in understanding of that,                  10 but I suppose my question would be, and perhaps you                  11 could answer this one now, whether that would not be                  12 potentially even more magnified in the context -- if one                  13 moved to a contextual safeguarding approach. You know,                  14 what would be, if you like -- if you are going to                  15 report, you need to report against something, and                  16 context is a very difficult thing to have a reporting                  17 framework based upon.                  18 DR HALLETT: I think, in relation to the first part of                  19 the question, I would like to respond to that in                  20 writing, because there is a lot that I would say, and                  21 I'm aware of time.                  22 I think I would also like to point out that, in                  23 Wales, it is quite a different situation. We have                  24 a very different -- we have got new statutory guidance                  25 that's about to be published and I think that sits</p> <p style="text-align: center;">Page 143</p>	<p>1 within different responsibilities and it sits alongside                  2 a different social care policy. So contextual                  3 safeguarding, although it features within Swansea at the                  4 moment, it is not something that's been rolled out                  5 across Wales, as I understand it. I think it is really                  6 important to recognise that, in Wales, what we have                  7 within this new statutory guidance is something that                  8 really is about -- as you say, it is not about                  9 additional assessment and it is not about looking at                  10 extrafamilial harm. I think what we have arrived at in                  11 Wales is a different kind of response to the fact that                  12 there can sometimes be a lack of recognition that -- of                  13 the needs of young people that may be separate to                  14 parenting issues or within the home and the way that                  15 I see it within this new statutory guidance is that,                  16 actually, this drive towards well-being and the                  17 recognition of care and support needs and without being                  18 single-issue based or context based, that's what I feel                  19 is the right approach and I think that's supported                  20 within other policies within Wales, particularly the                  21 Well-being of Future Generations Act and also the                  22 Social Services and Well-being Act within Wales.                  23 So I don't quite agree with contextual safeguarding                  24 and the need for contextual safeguarding within Wales as                  25 Dr Beckett has detailed.</p> <p style="text-align: center;">Page 144</p>

1 PROF SIR MALCOLM EVANS: Thank you.  
 2 DR BECKETT: So if I could request the question about  
 3 contextual safeguarding in writing, I will liaise with  
 4 Carlene Firmin, whose programme of work it is, and  
 5 respond to that. My submission was on behalf of my own  
 6 work and the work of the centre that I'm director of and  
 7 she leads that programme of work, so I don't want to  
 8 misanswer on that.  
 9 I will, however, briefly comment on the first one.  
 10 For me, actually, the definitions are negatively getting  
 11 in the way of holding perpetrators to account. So when  
 12 I do training, we do exercises as part of the training,  
 13 looking at the difference between how we define child  
 14 sexual exploitation in policy and how the offences of  
 15 abuse of a child through sexual exploitation are  
 16 defined, and people are completely confused, and  
 17 I include police in that when I do it. So I think the  
 18 renaming of the offences, whilst I absolutely agree with  
 19 the removing of the language of "prostitution", the  
 20 simply substituting in of a new label I think has caused  
 21 confusion and is causing people to fail to recognise  
 22 that, actually, although there are certain  
 23 manifestations of CSE that do fall under the offences of  
 24 sexual exploitation, actually many other cases of CSE  
 25 fall under a range of other offences. So I actually

Page 145

1 think that the definitions and labelling at the minute  
 2 are getting in the way of actually looking at how we  
 3 most successfully hold perpetrators to account through  
 4 legislation, and I think that kind of getting rid of  
 5 that extra layer would actually help people to look at,  
 6 again, what is the harm that's going on, which of these  
 7 range of offences are the best ways in which we can  
 8 respond to the harm that's going on.  
 9 PROF SIR MALCOLM EVANS: Thank you very much.  
 10 THE CHAIR: Thank you. Thank you to both witnesses.  
 11 MR LIVINGSTON: Thank you, chair. Because we still have  
 12 Sheila Taylor to come this afternoon and because we had  
 13 some problems this morning, chair, would it be possible  
 14 to sit until 4.30 pm and have a 10-minute break this  
 15 afternoon?  
 16 THE CHAIR: I will confer with my colleagues and get back to  
 17 you briefly. Thank you.  
 18 MR LIVINGSTON: Thank you very much. I think we will return  
 19 then, after the break, with Sheila Taylor's evidence.  
 20 (3.38 pm)  
 21 (A short break)  
 22 (3.48 pm)  
 23 MS HILL: Our next witness is Sheila Taylor MBE, please.  
 24 MS SHEILA TAYLOR MBE (affirmed)  
 25

Page 146

1 Examination by MS HILL  
 2 MS HILL: You are Sheila Taylor, CEO of the NWG Network; is  
 3 that right.  
 4 **A. That's correct.**  
 5 Q. If you can't see or hear me or don't understand any of  
 6 the questions, please let me know. But I am going to  
 7 broadly follow the topics list you have been sent in  
 8 advance. Ms Taylor, you have provided the inquiry with  
 9 two statements, one which is reference INQ005149 and one  
 10 INQ005320. Chair, with your permission, I would like to  
 11 adduce those statements in full.  
 12 Ms Taylor, in the first of those statements you went  
 13 through each of the key themes that this investigation  
 14 is looking at, and I propose to do the same in asking  
 15 you some questions. In the second statement, you dealt  
 16 solely with some issues around disability, and I will  
 17 come to that in due course.  
 18 Ms Taylor, just give us a brief summary, if I could  
 19 ask you for that, please, of the work of the NWG?  
 20 **A. It is predominantly about working with professionals and**  
 21 **helping them to increase their capacity and**  
 22 **understanding when dealing with issues of child sexual**  
 23 **exploitation, and now, because the platform around**  
 24 **exploitation has expanded to include modern slavery,**  
 25 **trafficking, county lines and other forms of**

Page 147

1 **exploitation, that has to be part of that narrative**  
 2 **because it's too difficult to separate everybody out**  
 3 **from different things.**  
 4 **We do it by shared learning events, by -- I have**  
 5 **a team, they visited more than 200 units across the UK**  
 6 **now to look at practice and to see how they're**  
 7 **delivering things in their area, and that allows us**  
 8 **a really good grounding for understanding what people**  
 9 **are doing, how they're trying to improve their practice.**  
 10 Q. Just give us a little bit of information, please, about  
 11 your own professional background. You are obviously  
 12 very well recognised in this field. But just tell us  
 13 a little bit more about your own background, please?  
 14 **A. I'm not professionally qualified in anything, but I am**  
 15 **more -- I came to this in 1998 because a parent drew my**  
 16 **attention to her daughter at that point. It was known**  
 17 **as "children involved in prostitution" in 1998. It's**  
 18 **been a long journey. I have been listening to the**  
 19 **definition. I was part of the team around the 2003**  
 20 **Sexual Offences Act. And it's moved a long way from**  
 21 **1998. We have still got a long way to go, but the**  
 22 **understanding and the growth has been really**  
 23 **interesting. It's been a very fast-moving picture and**  
 24 **still is a very fast-moving picture.**  
 25 Q. How do you understand, or indeed recollect, that the

Page 148

1 issue of child sexual exploitation itself became  
 2 specifically recognised or identified?  
 3 **A. As an informal group, the NWG existed then, and we were**  
 4 **a group of front-line practitioners who came together.**  
 5 **Now, there was a team in Sheffield that had**  
 6 **Operation Glover that took place in Sheffield, which was**  
 7 **one of the very first of these, but I think taking over**  
 8 **a front-line service and putting together all of**  
 9 **the information that we had within our organisation**  
 10 **challenging Derbyshire Police to respond appropriately**  
 11 **to 81 cases of child sexual exploitation that we'd got**  
 12 **in Derby City resulted in two particular operations --**  
 13 **Operation Zinc(?), which was all about how information**  
 14 **was developed into intelligence and how we needed to**  
 15 **alter systems in order to be able to capture information**  
 16 **that was not deemed intelligence, but also that then led**  
 17 **to Operation Retriever, which was a very large case of**  
 18 **28 girls starting the process of three court cases and**  
 19 **nine men, two other court cases with two men in, so**  
 20 **a total of 11 men going to prison for more than 80 years**  
 21 **around that.**  
 22 **So I was part of Derbyshire's police team to help**  
 23 **all of that to develop, and because I then took to the**  
 24 **media to talk about the whole issue of child sexual**  
 25 **exploitation and what it looks like and how we needed to**

Page 149

1 today because it is on the agenda, but we clearly have  
 2 not got to grips with the issue properly because we  
 3 still are getting cases coming through, so there's still  
 4 a lot of work to do.  
 5 **MoRiLE is a piece of assessment work that was done,**  
 6 **and it was a pilot project, a risk assessment for**  
 7 **forces, and it went to people like Operation Stonewood**  
 8 **where it was trialled, but then unfortunately was halted**  
 9 **due to, I guess, funding, resource. It was developed**  
 10 **locally, so it was -- I think one of the difficulties**  
 11 **that we experience is that, with risk assessments,**  
 12 **with -- with anything that you kind of develop to help**  
 13 **people to put a picture together, is that it's then**  
 14 **adopted locally and developed locally according to their**  
 15 **demographics or their needs, and then it becomes almost**  
 16 **impossible to evaluate because the datasets become**  
 17 **different, and that -- I think the inconsistency around**  
 18 **the UK makes it very difficult to -- as Dr Beckett said**  
 19 **earlier, they're not clear datasets and what have you.**  
 20 **I think, because we haven't got that platform that is**  
 21 **one national dataset, one national assessment, one**  
 22 **national platform to go through, that makes it really**  
 23 **difficult to see (a) whether we're making it any better;**  
 24 **(b) what's working and what isn't.**  
 25 **So I think that's it.**

Page 151

1 **respond to it, within a matter of weeks I had 73 police**  
 2 **units contact me to ask me for support, and one of those**  
 3 **was what became Operation Span, another became**  
 4 **Operation Bullfinch. So the Rochdale case, the Oxford**  
 5 **case and many others that weren't quite so well**  
 6 **publicised.**  
 7 **Q. The first theme for this investigation combines both**  
 8 **profiling and disruption, and you have given detailed**  
 9 **evidence at section 2 of your first witness statement**  
 10 **about a series of different models, and my apologies if**  
 11 **I pronounce these incorrectly, but you have described**  
 12 **the MoRiLE -- management of risk in law enforcement**  
 13 **model -- the Cessian Project(?), which is partly also**  
 14 **around identifying children, and various other models**  
 15 **that are aimed at better identifying both children and**  
 16 **potential perpetrators. How important do you consider**  
 17 **it is, Ms Taylor, that nationally and locally there is**  
 18 **a well-understood profile of both children and**  
 19 **perpetrators in this area?**  
 20 **A. I think it's vitally important. Unless we start to**  
 21 **profile offenders and children alongside that to be able**  
 22 **to understand drivers and risks and where we might put**  
 23 **disruption in place and prevention, then we are not**  
 24 **going to get it right.**  
 25 **I feel very pleased with the progress from 1998 to**

Page 150

1 **The Cessian Project is trilateral; Lincolnshire**  
 2 **Police and ourselves. That's a vision to identify**  
 3 **children vulnerable, at risk, involved, victim and**  
 4 **perpetrator profiling so that we can sift through the**  
 5 **police evidence, the police information, children's**  
 6 **services information and what have you. I think my --**  
 7 **and it will be piloted soon and it is -- it looks very**  
 8 **exciting. It needs to develop in the future, I feel, to**  
 9 **incorporate all of that information that NGOs have, the**  
 10 **voluntary sector, those charities that work on the**  
 11 **ground, because they are not always included in quite**  
 12 **the same way around collecting information and data.**  
 13 **That's twofold. Sometimes they are feeding the**  
 14 **information in, but it isn't in -- it's not necessarily**  
 15 **in a way that makes it onto systems.**  
 16 **Q. I think the way that you have described this in your**  
 17 **witness statement is that this project will aim to use**  
 18 **technology partly to improve that sort of sharing of**  
 19 **information; is that right?**  
 20 **A. That's right. I keep my fingers crossed that it works.**  
 21 **There was a similar project following**  
 22 **Operation Retriever called Edis(?), and I think it was**  
 23 **probably a little bit too early for its time for people**  
 24 **to get behind it and adopt it. So this seems to be**  
 25 **something quite similar, but a bit later, perhaps, when**

Page 152

1 people feel able.

2 I think the importance of this is that profiling

3 offenders and children that are vulnerable, children

4 that are vulnerable, and that vulnerability, so not

5 placing the risk with them, but looking at their

6 vulnerabilities and what have you. Because exploitation

7 takes so many different forms.

8 For me, it's about making sure that, in that wider

9 exploitation arena, so trafficking, forced labour, all

10 of those different things, is that somehow or other we

11 have got CSE, we have got sexual exploitation, embedded

12 in it as a core element. So that it doesn't get lost

13 altogether. Because I think that's what the danger is

14 at the moment.

15 I think one of the things that we are seeing is, and

16 I wrote it somewhere, and you might come back to it

17 later, an under-reporting of sexual exploitation cases

18 now, and that, to us, is, is this a flagging issue? Is

19 this because now people are seeing the same children but

20 they're being flagged as county lines or trafficked? Is

21 it that they're now -- we are chasing the issue? Is it

22 that we have dealt with child sexual exploitation, now

23 we need to deal with county lines? And there is a move

24 to look at county lines as the latest kind of emerging

25 theme, whereas we should be looking at the whole of

Page 153

1 being significantly harmed at that current time, and had

2 we have used that language -- instead of saying "at

3 risk", had we have used the language saying, "I believe

4 this young person is being significantly harmed at this

5 current time", we would evoke a very different response

6 from those professionals.

7 Q. You've explained how there has perhaps been an

8 improvement in profiling over time, although there is

9 still, I think, more to learn from what you have said.

10 Do you think there have been improvements in disruption

11 over time as well?

12 A. Oh, definitely. I think we had a very long journey 2009

13 to get young people seen as victims of trafficking,

14 indigenous young people seen as victims of tracking, in

15 the UK, and that was a national debate about what the

16 legislation was for. I think that was a whole difficult

17 period of time, in terms of getting the message of what

18 these young people go through fitting into legislation

19 so that you can respond to it.

20 The disruption tool that my police and justice lead

21 has put together --

22 Q. While you're talking, in fact, it's INQ005317. Because

23 I'm hoping that if we look at that document, we will

24 see, perhaps in one place, a list of the disruption

25 options that have been set out in the guide. Is this

Page 155

1 exploitation, the vulnerabilities.

2 I was listening to the risks debate just with

3 Dr Beckett and Dr Hallett. Very interesting. Because

4 children have got to know the risks to be able to build

5 resilience against them, but we never seem to have the

6 same conversations about the drivers of this, the

7 perpetrators. It's all about the children and the risk

8 and how they are perceived and how they engage. Yet

9 there's an awful lot to be known about the drivers of

10 offenders, because that's where the education needs to

11 go to, not for children to be able to manage their risk,

12 but for young people to know what is a healthy

13 relationship, what is acceptable and what is

14 unacceptable across all of our society.

15 There's one thing about the risks that made me

16 think -- I have a very simple mind, forgive me, and

17 they're talking about the risk. I think if I -- one of

18 the things that I felt when I was in Safe and Sound,

19 Derby, was, when we put a referral forward saying, "This

20 young person is at high risk" and the person on the

21 other end receiving that and doesn't know the young

22 person, is receiving somebody at risk, therefore the

23 message is, this is something you can prevent because it

24 is "at risk", whereas, actually -- both the doctors were

25 right earlier -- quite often, that young person was

Page 154

1 the document you are referring to?

2 A. That is the document that I'm referring to, yes.

3 Q. If I could ask Danny just to go to the second and third

4 page, and just perhaps scroll down them. Can we see

5 here, if we just scroll in, the contents list here gives

6 under broad sections firstly the "child victim" section,

7 section 5. So we can see a range of different legal

8 options or issues that might lead to disruption. If we

9 scan back, we can see under section 6 "Adult victims",

10 and then under 7 "perpetrators". That's a very long

11 section that goes over to the next page. Then I think

12 the guide itself then takes each of these issues and

13 provides further guidance on them. Is that right?

14 A. That's correct, yes. My team have been out across the

15 UK talking to practitioners about how they use this

16 tool, and I think one area came back and said it was

17 their new Bible because it was so helpful in terms of

18 helping them to understand the range of things that they

19 can use and utilise, and it includes civil orders as

20 well as criminal legislation, and things that

21 partnerships can do themselves, safety partnerships can

22 do themselves.

23 So it has been a very, very well-received support to

24 disruption and prevention, and I think this is where we

25 have to go. We have got to look at the fact that we

Page 156

<p>1 need to prevent adults in our society offending against                  2 our children, rather than asking our children to keep                  3 themselves safe.                  4 Q. At paragraph 2.26 of your first witness statement, you                  5 talk about the practice being a postcode lottery,                  6 suggesting that there are disparities or different                  7 practices around the country. Does that description                  8 apply to both local profiling and local disruption?                  9 <b>A. I think it applies to almost everything, really. One of                  10 the difficulties, I think, is that we have seen, whilst                  11 I have been with the NWG since 2011, is that you will                  12 see an area become really, really good at tackling child                  13 sexual exploitation, child exploitation. They will                  14 become really, really good. They will really understand                  15 it. They will know the local demographics, et cetera,                  16 et cetera. But it's almost always driven by somebody                  17 who's got passion and commitment and a real wish to get                  18 this right, and then you see that fluidity of movement                  19 within organisations, particularly police organisations.                  20 They are very fluid, and you lose that expertise. It                  21 goes. And it's -- and then you see the project kind                  22 of -- not diminished, but not as proactive and probably                  23 less effective in doing it. And that's such a shame,                  24 because there are some fantastic individuals around                  25 there that drive projects and units, and then we lose</b></p> <p style="text-align: center;">Page 157</p>	<p>1 <b>them. So that's it.</b>                  2 <b>It's definitely a postcode lottery. Some people</b>                  3 <b>it's more of a tick-box exercise, other people are more</b>                  4 <b>professionally curious about everything. It's on some</b>                  5 <b>people's higher agenda than others. It is definitely --</b>                  6 <b>how young people are responded to is definitely</b>                  7 <b>a postcode lottery, really.</b>                  8 Q. I think in your witness statement, in fairness, at                  9 various parts under each of the themes you have given                  10 some notable good examples, including relating to,                  11 I think, Warwickshire and Bristol, who feature in this                  12 particular investigation. Can I ask, Danny, to bring up                  13 INQ005149_009. Ms Taylor, this is just the concluding                  14 part of your evidence in your witness statement about                  15 profiling and disruption. Can we look at 2.34 and bring                  16 up the following page as well, just to scroll down to                  17 2.38. I think, Ms Taylor, what you are doing here is                  18 proposing improvements or reform in this area, and                  19 I think at 2.34 you're talking about a need for                  20 consistency, perhaps from a national level. Just to try                  21 and headline it, the panel can read your evidence. Over                  22 the page, 2.35 and onwards, you describe the need for                  23 a national framework, solution-focused approaches learnt                  24 from national operational implementations, and that's                  25 the broad thrust of what you are saying here. Is there</p> <p style="text-align: center;">Page 158</p>
<p>1 anything else that you would like to add on how you                  2 think profiling and disruption can be improved in the                  3 future?                  4 <b>A. No. I think we wrote everything that we wanted to write</b>                  5 <b>in that. But I do think one of the problems that we</b>                  6 <b>have got, probably less so in the last year or two than</b>                  7 <b>a few years ago, was that there was such a focus on</b>                  8 <b>Serious Case Reviews and everything that everybody had</b>                  9 <b>done wrong, and I don't think -- and it becomes very</b>                  10 <b>demoralising for members of the teams that are trying</b>                  11 <b>really hard to get things right, and that somehow or</b>                  12 <b>other we have got to get better at sharing what has gone</b>                  13 <b>really well and what has worked, so that people can</b>                  14 <b>build on that and know what's out there and have those</b>                  15 <b>conversations with people to say, "Well, this worked</b>                  16 <b>really well. How can we make it work even better next</b>                  17 <b>time?"</b>                  18 Q. We can bring that down, Danny. Can I move then to the                  19 next theme, which is that of empathy and concern for                  20 child victims. I will take this a little bit more                  21 briefly, if I may, Ms Taylor. You have given some                  22 evidence in your witness statement about how committed                  23 the NWG is, obviously, to challenging victim-blaming                  24 language and you have explained in your witness                  25 statement the damage that can be done by that kind of</p> <p style="text-align: center;">Page 159</p>	<p>1 language. I think you have been asked to review some                  2 evidence from the Angelou Centre. Have you had a chance                  3 to read the statement from that organisation, Ms Taylor?                  4 <b>A. I haven't, no. I apologise, I haven't.</b>                  5 Q. I'm just going to read out part of it, then.                  6 Paragraph 22 of that witness statement talks about one                  7 key issue being -- I will just read it out -- "a lack of                  8 cultural competence within local authorities. In other                  9 words, the lack of workers with the expertise or                  10 knowledge to support the specific needs of women from                  11 black and minoritised communities". INQ006185_006.                  12 I don't think we need to bring it up, Danny. But do you                  13 have a view on that, Ms Taylor, whether that is an issue                  14 that you think falls to be considered under empathy and                  15 concern for child victims?                  16 <b>A. Yes, I totally agree with that. I think that we --</b>                  17 <b>language is really key here. Dehumanising some of our</b>                  18 <b>young people in this process is definitely one of those</b>                  19 <b>things. So "at risk" rather than talking of them as</b>                  20 <b>being significantly harmed. I would expand it past BME</b>                  21 <b>communities. I think those young people within special</b>                  22 <b>educational needs and those young people exploring their</b>                  23 <b>sexuality -- LGBTQ -- have all got issues that we need</b>                  24 <b>to explore in terms of being able to recognise them as</b>                  25 <b>well as those from our ethnic minority backgrounds.</b></p> <p style="text-align: center;">Page 160</p>



<p>1 Q. Can I bring up, then, please, Danny, INQ005149_013, and  2 scroll in, Ms Taylor, on 3.14, which is your proposals  3 for improvement under this theme. Again, I think you  4 have said here that you flagged the need for the  5 benefits of organisational culture, I think. So that  6 having a significant potential impact. And you have  7 talked here about the impact of cuts in youth service  8 and Connexions service. But is there anything else that  9 you would like to add that you think might lead to  10 improvement in the way in which child victims receive  11 empathy and concern?</p> <p>12 <b>A. Just probably the transition. So I think it is really  13 encouraging that we are starting to see local  14 authorities and organisations looking at their culture  15 and attitude and how they might lead around that.</b></p> <p>16 <b>One of the other things that we really have to get  17 to grips with is the fact that there is a real gap in  18 children and young people, 16 to 18, and that transition  19 into adult services. So at 18, everything stops. And  20 unless there is a really, really good  21 conversation/communication between adult services and  22 children's services, that young person at 18 will still  23 be a victim at 18 but loses all the services behind  24 them.</b></p> <p>25 <b>I think that's why Warwick is particularly good as</b></p> <p style="text-align: center;">Page 161</p>	<p>1 <b>one example, because they have, in their exploitation  2 unit, brought in a worker from adult services to help  3 bridge that gap. So I think that is really important.  4 Culture and attitude is definitely being looked at now,  5 and I think that's really encouraging.</b></p> <p>6 Q. The third theme that we are looking at is that of risk  7 assessment. You have obviously heard the evidence  8 earlier this afternoon about that, and your witness  9 evidence sets out very clearly the work done by the NWG  10 in designing its revised assessment, why it was felt  11 that was necessary, and so on. But is there anything  12 else that you would like to add, looking forward, on the  13 issue of risk assessment, either because of what you  14 heard from the two academics, or just in any event?</p> <p>15 <b>A. I definitely concur with both doctors earlier, that we  16 have to get away from scoring and a tick-box exercise.  17 That's not helpful for anybody.</b></p> <p>18 <b>The narrative and what those young people are  19 experiencing, the environments they sit in, their family  20 environment, as well as their geographical environment,  21 along with all of the things that impact on them have to  22 be part of a narrative when you're looking at assessing  23 their risk.</b></p> <p>24 <b>I think we've gone that bit further now to help  25 organisations to benchmark how they work, so evaluating</b></p> <p style="text-align: center;">Page 162</p>
<p>1 <b>the value of having a parent engaged in those processes  2 as a valuable safeguarding partner, rather than sitting  3 on the edge of all of this, is definitely something.</b></p> <p>4 <b>How we benchmark our missing is something that we  5 are just looking at and piloting at the moment. And  6 those things are really, really important. Those things  7 are really important when you're looking at risk  8 assessments and looking at all of the things together.</b></p> <p>9 Q. Can I bring up, then, please, INQ005149_016,  10 paragraph 4.10, where I think, Ms Taylor, you have made  11 the point here that the NWG's position strongly  12 advocates for the voice of child and other family  13 members to be included in risk assessment, disruption  14 should also feature and the assessment tool should be  15 amended to incorporate perhaps a wider recognition of  16 diverse groups. Are those also important elements of  17 your views on improvement in this area?</p> <p>18 <b>A. Absolutely. I don't know if you are coming to special  19 educational needs and disabilities at the end, but if we  20 don't -- there is such an overrepresentation of children  21 and young people in exploitation that have undiagnosed,  22 unstatemented -- particularly autism, ADHD, that type of  23 thing, where they have got a limited capacity to  24 understand what's happening to them, consent --</b></p> <p>25 Q. Perhaps we will just bring up your second statement on</p> <p style="text-align: center;">Page 163</p>	<p>1 this, please, INQ005320, and just perhaps scroll in on  2 paragraphs 1 to 7. I think here, Ms Taylor, you talk  3 about the particular risks posed to these children.</p> <p>4 <b>A. Yes, that's exactly it. Unless we incorporate all of  5 these things into our risk assessments, then we are  6 doing the child an injustice.</b></p> <p>7 Q. If you perhaps just scroll down, Danny, at paragraphs 8  8 to 9, is one of the points you have made here,  9 Ms Taylor, that you often see a child's ADHD or ASD  10 being mentioned in a risk assessment but they are not  11 perhaps factored in to how they might process  12 information or what the significance of that is?  13 I think what you are saying is you see their disability  14 labelled but it doesn't go much further than that. Is  15 that a fair summary?</p> <p>16 <b>A. I think that's a fair summary. I think we're expecting  17 our professionals to be well versed in how to work with  18 children with a limited capacity to understand, and  19 that's not always the case.</b></p> <p>20 <b>The Ann Craft Trust do some really, really good work  21 around helping people to work through how they might  22 work alongside families and young people who have got  23 autism, ADHD and any of the things that might help them  24 to understand more.</b></p> <p>25 Q. Because those sort of issues in a child might mean that</p> <p style="text-align: center;">Page 164</p>

1 prevention work and awareness raising needs to be framed  
 2 differently; is that broadly right?  
 3 **A. Awareness -- yes, so the education definitely needs to**  
 4 **be framed differently. How you teach somebody with ADHD**  
 5 **or autism is very different to how you would teach**  
 6 **somebody who is an A\* student. But it is also about how**  
 7 **practitioners engage with those individuals and those**  
 8 **families too, because they will behave in a different**  
 9 **way to perhaps others, and you have to understand all of**  
 10 **that to be able to put the right preventative measures**  
 11 **in place.**  
 12 **Q.** Can I go back, then, please. I have dealt with our  
 13 sixth theme, which is children with a disability, as  
 14 best I can. Can I ask you some questions about male  
 15 victims, please, and pull up, Danny, INQ005149\_023.  
 16 I think you have given evidence, Ms Taylor, about  
 17 how the NWG strongly advocates that the assessment and  
 18 response to boys should be exactly the same as it is for  
 19 girls and women, but here your proposals for  
 20 improvement, at 6.6, are that there should also be  
 21 a focus on LGBTQ, transgender groups and transient  
 22 populations as well. Is there anything else you want to  
 23 say about the issue of male victims or victims from  
 24 other groups?  
 25 **A. I think we have seen a change in the way we see young**

Page 165

1 **men. When we started, we had a particular forum around**  
 2 **boys and young men because they were so underrepresented**  
 3 **in reports of child sexual exploitation, and yet we knew**  
 4 **it affected them the same, and there was that**  
 5 **stereotypical response as well.**  
 6 I can remember having a case of a 15-year-old boy  
 7 who was having a relationship, and I think she was 19,  
 8 but I can stand to be corrected on that, it's memory,  
 9 and she was taking photographs of him and sharing them,  
 10 and the response was a bit like, "he was sowing his wild  
 11 oats". Had we have taken the genders away from that  
 12 particular situation and presented it as a narrative,  
 13 the response would have been totally different, had they  
 14 thought that younger person was a girl.  
 15 We have seen improvements on that. We now see  
 16 overrepresentation in county lines of boys and young  
 17 men, and perhaps an underrepresentation of young women  
 18 and how they are victims within county lines. So  
 19 I think there's been a change there.  
 20 **Q.** In your witness evidence, Ms Taylor, you have given some  
 21 views about improvements to ensuring greater uptake of  
 22 Return Home Interviews and greater consistency, about  
 23 how the NWG advocates local areas having protocols for  
 24 looked-after children working closely with care homes.  
 25 Is there anything else about Return Home Interviews,

Page 166

1 missing children or looked-after children that you would  
 2 like to add?  
 3 **A. We have heard of local authorities buying cheaper**  
 4 **premises outside of their area to place their children**  
 5 **in care in, and they're often unregulated. We still get**  
 6 **reports of local authorities and police not knowing**  
 7 **children in care are in their area. There are areas**  
 8 **that -- where there is much more of a tick-box exercise**  
 9 **when they're on a Return Home Interview, and yet there**  
 10 **are some other areas where they're really, really**  
 11 **professionally curious and take their time to learn**  
 12 **about it. So, again, it is that postcode lottery, and**  
 13 **it is that varied response that actually would benefit**  
 14 **from being consistent.**  
 15 **Q.** Then, finally, Danny, INQ005149\_025, paragraph 8.4,  
 16 dealing with the topic of partnership working,  
 17 Ms Taylor. I think you make a similar point that,  
 18 again, under this theme, partnerships are often reliant  
 19 on personalities. Transitional safeguarding should  
 20 feature in every area's priority. Is there anything  
 21 else you would like to say about improvements to  
 22 partnership working in this area?  
 23 **A. Exactly what I was saying before: the need for adult**  
 24 **services to come together with children's services, for**  
 25 **that transition of the safeguarding priorities for that**

Page 167

1 **particular young person. Partnerships is often based on**  
 2 **personalities. Embedding the sexual exploitation within**  
 3 **the whole exploitation package is really, really**  
 4 **important too.**  
 5 **Q.** Then, finally, over the page, please, Danny, on \_026,  
 6 paragraph 9.8, our final theme is that of audit review  
 7 and performance improvement. You have already touched  
 8 on this idea of accepting change or reviews as  
 9 a positive, and you have talked here about independent  
 10 reviews, evidence-based practice. Is there anything  
 11 else that might lead to improvements in audit review and  
 12 performance improvement generally that you would like to  
 13 say?  
 14 **A. I think it is about sharing when we find things that**  
 15 **have gone really well. I don't think we are very good**  
 16 **at that. I think we are excellent at sharing what has**  
 17 **gone badly, and certainly the media like that, and then**  
 18 **it becomes a bigger issue. But we really are not very**  
 19 **good at sharing that positive interaction that we have**  
 20 **with young people, that positive engagement, that**  
 21 **positive prevention and disruption, in the same way, and**  
 22 **by sharing those stories and by sharing that narrative,**  
 23 **which is what we do through our shared learning events,**  
 24 **we share what is going on well with our organisations,**  
 25 **so that other people can learn from it and go -- and**

Page 168

<p>1 <b>take away a boost to their commitment, rather than</b>                  2 <b>feeling as though it's hard work and they can't get it</b>                  3 <b>right.</b>                  4 <b>It's good to share that -- each of our events that</b>                  5 <b>we have put on forward, for example, No Wrong Door from</b>                  6 <b>Newcastle, who have got an excellent, excellent</b>                  7 <b>programme of how they work with young people in the</b>                  8 <b>fostering community, and all of those professionals and</b>                  9 <b>that -- and how there is no wrong door, and how it's</b>                  10 <b>approached and how it's brought everybody in is such</b>                  11 <b>a good story and such a good way of working, and I'm</b>                  12 <b>sure if we went into it in-depth, it's probably not</b>                  13 <b>perfect, but it's relatively new and it's doing</b>                  14 <b>something innovative and very positive, that we should</b>                  15 <b>be looking at that and going, "How can we make this even</b>                  16 <b>better because it's working really well?", and those</b>                  17 <b>stats are amazing at the moment.</b>                  18 MS HILL: Thank you very much, Ms Taylor. At various parts,                  19 in fairness, in your witness evidence, and I haven't                  20 been able to adduce them, you have given some good                  21 examples of good practice that I'm sure the chair and                  22 panel will read in due course. But, Ms Taylor, those                  23 are all the questions I have for you. Chair, unless you                  24 or the panel members have any questions for Ms Taylor?                  25 THE CHAIR: Thank you. I have no questions, but I will</p> <p style="text-align: center;">Page 169</p>	<p>1 check with my colleagues. Ms Sharpling?                  2 MS SHARPLING: No, thank you.                  3 THE CHAIR: Mr Frank?                  4 MR FRANK: No, thank you.                  5 THE CHAIR: Sir Malcolm?                  6 PROF SIR MALCOLM EVANS: Just one very quick one, if I may,                  7 chair.                  8 Questions from THE PANEL                  9 PROF SIR MALCOLM EVANS: Ms Taylor, you had some fairly                  10 interesting things to say about risk assessments                  11 earlier. To take your approach just one step further,                  12 do you think it would be helpful if we didn't even call                  13 them "risk assessments" and actually considered them in                  14 a conceptually completely different way, given what,                  15 from the way you describe them, they are meant to                  16 achieve?                  17 <b>A. I'm really not sure what the word "risk" brings us of</b>                  18 <b>value, because it's presented -- the word "risk" is</b>                  19 <b>presented as something that you can prevent happening,</b>                  20 <b>and quite often when we are doing a risk assessment</b>                  21 <b>around a child exploited -- whether criminally</b>                  22 <b>exploited, trafficked, sexually exploited -- what we are</b>                  23 <b>doing is looking at how we can prevent that from</b>                  24 <b>happening, whereas quite often it's already happening.</b>                  25 <b>So I would personally, on a very personal level,</b></p> <p style="text-align: center;">Page 170</p>
<p>1 <b>wonder what the word "risk" brings us, and I'd like to</b>                  2 <b>see it dropped, really.</b>                  3 PROF SIR MALCOLM EVANS: So there is a bit of shutting the                  4 door after the horse has bolted, so to speak?                  5 <b>A. Absolutely. Absolutely. Very often, if it's classed as</b>                  6 <b>high risk, what we really mean is, that child is being</b>                  7 <b>significantly harmed at this current time, and we have</b>                  8 <b>to take into account, when we're talking about risk and</b>                  9 <b>all of those things, that a child may be being made to</b>                  10 <b>have sex, being exploited, being abused, and we should</b>                  11 <b>be saying, "What are the consequences to that child if</b>                  12 <b>they said 'no', because of the coercion and the control</b>                  13 <b>and the aggression and the violence that goes with it".</b>                  14 <b>Sometimes they just don't have a choice. It is the</b>                  15 <b>consequences of saying no.</b>                  16 PROF SIR MALCOLM EVANS: Thank you very much.                  17 <b>A. Thank you.</b>                  18 THE CHAIR: Thank you very much for your evidence,                  19 Ms Taylor.                  20 <b>A. Thank you.</b>                  21 MS HILL: Thank you. Thank you very much.                  22 (The witness withdrew)                  23 MS HILL: Chair, there was one further matter I was hoping                  24 to deal with at the end of today. As I indicated in                  25 opening, the inquiry has gathered a significant amount</p> <p style="text-align: center;">Page 171</p>	<p>1 of evidence in relation to this investigation, and our                  2 intention had been, at the end of each day, to formally                  3 apply for permission to adduce some further evidence                  4 that relates to that day's evidence.                  5 I do have a list of evidence that fits, if I can say                  6 that, if you like, within the national evidence from                  7 today. It will take me about five or six minutes just                  8 to give you some context for it. Are you content for me                  9 to do that now? Thank you, chair.                  10 As I indicated, chair, the inquiry's methods of                  11 adducing evidence are varied. In addition to adducing                  12 in-person evidence, some evidence is read and some                  13 evidence is published on the inquiry's website. So at                  14 the end of today, chair, I would ask your permission to                  15 adduce evidence from the following witnesses, and I will                  16 just give you some very brief context about each of                  17 them.                  18 The core participants, chair, have this list, so                  19 I won't read out the URNs, but I apply for permission,                  20 please, to adduce evidence from Gill Gibbons from the                  21 Parents Against Child Sexual Exploitation. As you heard                  22 yesterday, this group aims to enable parents and carers                  23 to safeguard and stop their children being exploited and                  24 to demonstrate that parents and carers have an essential                  25 safeguarding role, and Ms Gibbons suggests a number of</p> <p style="text-align: center;">Page 172</p>

<p>1 recommendations in this area. I apply for permission to  2 adduce parts of that witness statement that have been  3 indicated to the core participants and also parts of  4 the following statements.</p> <p>5 A statement from Harriet Wistrich from the Centre  6 for Women's Justice. It was established by Ms Wistrich  7 in 2016, focusing on violence against women and girls,  8 including sexual exploitation. Their work includes the  9 use of strategic litigation to attempt to effect broader  10 changes in society and provision of specialist training  11 to front-line workers.</p> <p>12 Desmond Mannion from the NSPCC, which of course is  13 well known as a charity that provides particular  14 services in relation to child sexual exploitation, such  15 as its Protect and Respect services in sites across the  16 country, including in Tower Hamlets and Swansea.</p> <p>17 Evidence from Jamie Pope from the National Youth  18 Advocacy Service, a registered charity which provides  19 independent child's rights services across the UK,  20 including advocacy, visiting and return interviews,  21 socio-legal advice to children in care and independent  22 inspections of children's homes and residential schools.</p> <p>23 Jo Youle from Missing People: a national charity  24 with more than 20 years experience providing support to  25 missing people and their families. Missing People</p> <p style="text-align: center;">Page 173</p>	<p>1 provides a national telephone helpline for children, and  2 in Hertfordshire they provide a specific support service  3 to children who are at high risk or have been missing  4 multiple times.</p> <p>5 Gemma Scire -- again, apologies if I have not  6 pronounced her name correctly -- from Basis Yorkshire,  7 a charity founded in 1989 to work with the victims of  8 exploitation. The charity currently provides one-to-one  9 support services across West Yorkshire and in Hull to  10 girls and boys who have experienced sexual exploitation.</p> <p>11 Sarah Champion MP has been a member of parliament  12 for Rotherham since November 2012. She is a former  13 chair of the All Party Parliamentary Group on adult  14 survivors of child sexual abuse, Shadow Minister for  15 Preventing Abuse and Domestic Violence and Shadow  16 Secretary of State for Women and Equalities.</p> <p>17 Jon Wedger is a retired Metropolitan Police officer  18 with extensive experience of investigating child sexual  19 exploitation. He is now a high-profile campaigner on  20 behalf of victims and survivors.</p> <p>21 Margaret Oliver is a retired Greater Manchester  22 police officer with extensive experience of  23 investigating child sexual exploitation and, again, is  24 also now a high-profile campaigner on behalf of victims  25 and survivors and recently established the Maggie Oliver</p> <p style="text-align: center;">Page 174</p>
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<p>1 Foundation.</p> <p>2 Vivienne Kemp from Mountain Healthcare Limited,  3 Oakwood Place SARC. She is a former forensic nurse  4 examiner who is employed as the manager of Oakwood Place  5 Sexual Assault Referral Centre (SARC). She is one of  6 the Project Goldcrest leads.</p> <p>7 Detective Inspector Caroline Williams of  8 Essex Police is the partnership and child abuse  9 investigation team detective inspector for the west area  10 of Essex Police and is one of the Project Goldcrest  11 leads.</p> <p>12 Three further statements, please, chair. Narinder  13 Kaur Kooner from the Sikh Women's Action Network, or  14 SWAN. Ms Kooner is the founder, co-founder, and  15 executive director of that network, which is intended to  16 be a culturally sensitive service for victims of  17 domestic abuse, child sexual abuse, grooming and  18 honour-based abuse.</p> <p>19 Statement from Rosie Lewis from the Angelou Centre.  20 She is the deputy director of that centre in Newcastle,  21 which is a black-led women's organisation which supports  22 black and minority women who have been subject to  23 domestic and sexual violence.</p> <p>24 Finally, Zlaka Ahmed from Apna Haq. She is the CEO  25 and founder of Apna Haq, a women-led BME-focused</p> <p style="text-align: center;">Page 175</p>	<p>1 organisation whose work includes supporting victims and  2 survivors of CSE.</p> <p>3 Chair, I seek your permission to adduce all of that  4 evidence, which in due course will be published, in the  5 extracts that have been sent out to the core  6 participants, on the inquiry's website. That concludes  7 the evidence for today, chair.</p> <p>8 THE CHAIR: Thank you very much, Ms Hill. We will reconvene  9 tomorrow. Thank you.</p> <p>10 MS HILL: Thank you.  11 (4.33 pm)</p> <p>12 (The hearing was adjourned to  13 Wednesday, 23 September 2020 at 10.30 am)</p> <p>14  15  16 I N D E X</p> <p>17  18 WITNESS CS-A12 (affirmed) .....1</p> <p>19 Examination by MS HILL .....1</p> <p>20 WITNESS CS-A371 (affirmed) .....55</p> <p>21 Examination by MS HILL .....55</p> <p>22 DR HELEN BECKETT (affirmed) .....88</p> <p>23 DR SOPHIE HALLETT (affirmed) .....89  24 Examination by MR LIVINGSTON .....89  25 Questions from THE PANEL .....134</p> <p>MS SHEILA TAYLOR MBE (affirmed) .....146</p> <p style="text-align: center;">Page 176</p>
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- 1
- 2
- 3
- 4
- 5
- 6
- 7
- 8
- 9
- 10
- 11
- 12
- 13
- 14
- 15
- 16
- 17
- 18
- 19
- 20
- 21
- 22
- 23
- 24
- 25

Questions from THE PANEL .....170

Page 177

<b>A</b>				
<b>A12</b> 1:8,9	109:13 110:1,3	<b>accounts</b> 51:18	89:10 142:13	<b>affection</b> 67:19
<b>A2</b> 1:8	110:10,16	51:20,23	<b>addressing</b>	<b>affirmed</b> 1:12
<b>aback</b> 85:24	120:23 122:23	<b>accurate</b> 64:2	131:7,7	55:3 88:21
<b>ability</b> 73:17	123:1,13,14	121:20	<b>adduce</b> 89:6	89:1 146:24
118:24 124:11	124:1 127:15	<b>accuse</b> 84:22	147:11 169:20	176:17,19,21
<b>able</b> 11:15 35:18	129:10,19,25	<b>accused</b> 4:13	172:3,15,20	176:22,24
36:1 74:24	145:15 174:14	50:1 84:13	173:2 176:3	<b>afraid</b> 103:3
78:23,24 81:23	174:15 175:8	<b>ached</b> 30:19	<b>adducing</b>	128:1
84:23 104:10	175:17,17,18	<b>achieve</b> 170:16	172:11,11	<b>afternoon</b> 55:5
109:19 114:18	<b>abused</b> 13:10	<b>achieving</b>	<b>ADHD</b> 163:22	88:18 141:14
114:19 127:22	15:8,18,21	134:17	164:9,23 165:4	141:25 146:12
136:10 138:17	18:12 20:22	<b>acknowledging</b>	<b>adjourned</b>	146:15 162:8
149:15 150:21	25:13 32:13,23	99:7	49:15 176:12	<b>age</b> 2:17 10:7
153:1 154:4,11	41:18 46:11	<b>act</b> 12:6 19:20	<b>adjournment</b>	34:21 36:14
160:24 165:10	52:2,5,20,21	22:15 33:11	88:13	52:6 56:7 60:9
169:20	52:25 81:8	96:3 144:21,22	<b>admit</b> 131:11	63:20 73:4,13
<b>absence</b> 93:2	100:17 110:6	148:20	<b>admitted</b> 27:8	73:14 77:15,22
<b>absent</b> 42:2	110:23 121:2	<b>acting</b> 9:18	48:5	81:13 84:18
57:19	171:10	31:21,22	<b>adolescents</b>	93:11
<b>absolutely</b> 20:5	<b>abusers</b> 15:15	<b>action</b> 27:13	90:24 115:1,2	<b>aged</b> 13:24
42:9,16 53:21	18:1 43:14,15	175:13	136:2	<b>agencies</b> 90:20
92:20 94:12	<b>abuses</b> 134:24	<b>actions</b> 8:7	<b>adopt</b> 152:24	90:23 126:12
101:12 109:17	<b>abusing</b> 25:21	112:25 140:7	<b>adopted</b> 141:9	126:15 138:17
118:13 145:18	41:16 74:15	<b>active</b> 10:2	141:17 151:14	<b>agency</b> 97:25
163:18 171:5,5	<b>abusive</b> 76:21	110:18 113:15	<b>adopters</b> 131:22	98:10 99:10
<b>abuse</b> 10:8	82:17	<b>actively</b> 14:20	<b>adoption</b> 39:6	100:10 101:10
13:17 14:10	<b>academic</b> 141:6	<b>activity</b> 93:12	43:25	103:3,4,7
15:4 24:23	<b>academics</b>	<b>actual</b> 24:23	<b>adult</b> 14:2 22:6	109:19 113:19
31:19 33:3	118:11 162:14	46:5 56:2 59:4	69:22 71:17	127:2,8
37:25 43:12	<b>accept</b> 140:14	120:23 125:3	77:16,18 83:16	<b>agenda</b> 151:1
45:21 49:23	<b>acceptable</b>	<b>actuality</b> 121:3	115:8 156:9	158:5
51:9 52:4	154:13	<b>adapted</b> 109:21	161:19,21	<b>aggression</b>
84:25 89:20	<b>accepting</b> 168:8	<b>add</b> 115:15,15	162:2 167:23	171:13
90:18,22 91:1	<b>access</b> 108:9	115:17 116:13	174:13	<b>aggressive</b> 49:25
91:1,9,22 93:9	122:5 123:20	124:4 159:1	<b>adults</b> 107:7	<b>ago</b> 124:23,23
94:8,17 95:18	<b>accident</b> 73:25	161:9 162:12	157:1	159:7
96:4,15 97:2	74:12	167:2	<b>advance</b> 147:8	<b>agree</b> 97:6,7
98:12 99:4,8	<b>accommodation</b>	<b>added</b> 46:2,6	<b>advantage</b> 93:10	117:14 128:11
100:15 101:24	17:3 53:14	124:4	93:15,20 98:17	129:21 136:4
104:3,12 106:9	<b>account</b> 54:8	<b>addict</b> 56:16,17	98:17 117:6	136:11 137:11
106:24,25	102:8 137:24	59:10 60:5	<b>advice</b> 173:21	144:23 145:18
107:7,9,10,11	138:18 140:22	<b>addiction</b> 56:10	<b>advised</b> 73:8	160:16
107:12,18,19	142:22 145:11	56:21	<b>advocacy</b>	<b>ahead</b> 1:4 66:20
107:22,25	146:3 171:8	<b>addition</b> 172:11	173:18,20	69:9 83:7
108:5,19,21	<b>accountability</b>	<b>additional</b>	<b>advocates</b>	<b>Ahmed</b> 175:24
	138:7	123:18 144:9	163:12 165:17	<b>aid</b> 106:18
	<b>accounted</b> 138:3	<b>address</b> 68:25	166:23	<b>aiding</b> 116:2



148:16	30:9 31:4 34:4	114:19 123:18	105:20 106:23	87:7 129:9
<b>attitude</b> 119:25	35:24 36:25	124:5	107:5,19,20	<b>behaviours</b>
161:15 162:4	40:3,17 41:19	<b>barriers</b> 122:20	111:3 112:22	115:4,21
<b>attitudes</b> 114:23	42:2,12,20,20	122:22 124:10	113:6 115:16	116:23 129:20
115:10	45:3 48:11	<b>barrister</b> 50:15	116:13 117:15	<b>belief</b> 1:19 88:24
<b>audit</b> 168:6,11	54:19 56:23	<b>barristers</b> 49:23	118:1,10,11	89:4
<b>August</b> 49:10	57:3,25 58:1,3	50:5 84:2,5,16	120:4,15 121:7	<b>believe</b> 12:21,22
<b>auntie</b> 61:22	60:1,20,22	<b>base</b> 123:4,6	121:12 122:16	53:25 86:24
<b>auntie's</b> 61:25	61:8,9,10	126:1,1	122:19 123:3	123:16,21
65:8	62:19,20,25	<b>based</b> 108:16	124:9,21 126:5	155:3
<b>authorities</b>	63:1 66:13,13	120:20 137:4	126:25 127:24	<b>believed</b> 80:10
10:18 91:3	66:15 67:5,17	141:10 143:17	128:20,23	<b>believing</b> 10:18
108:20 109:2	71:4 72:5,21	144:18,18	130:8 131:17	<b>belong</b> 20:11
138:18,21	73:11,16,19,23	168:1	131:25 133:11	<b>belonged</b> 18:16
160:8 161:14	74:5,8 75:16	<b>baseline</b> 136:5	134:5 136:3,4	20:15
167:3,6	75:22 76:7,12	<b>basic</b> 134:13	137:22 139:19	<b>belongings</b>
<b>authority</b> 76:5	77:3 78:12,25	<b>basically</b> 5:11	139:20 142:6	44:12
111:11 133:17	80:22,24 85:12	9:4 12:12,17	144:25 145:2	<b>bench</b> 65:20,20
<b>autism</b> 163:22	109:4 119:12	18:5 21:8	151:18 154:3	<b>benchmark</b>
164:23 165:5	120:15 121:13	22:13 27:8	176:21	162:25 163:4
<b>available</b> 102:1	136:16,25	43:23 44:3,12	<b>becoming</b> 33:13	<b>beneficial</b>
<b>aversion</b> 139:22	137:7,16	47:12,14,20	97:18	134:25 135:2
<b>avoid</b> 43:14	140:11 146:16	50:16 95:20	<b>bed</b> 30:22,24	<b>benefit</b> 93:5
85:15,15	153:16 156:9	<b>basis</b> 39:20	31:6 60:2 61:5	167:13
<b>avoiding</b> 120:14	156:16 165:12	94:20 96:24	<b>Bedfordshire</b>	<b>benefits</b> 161:5
129:3,4,4	<b>background</b>	106:2 117:24	89:21	<b>best</b> 1:18 2:7,12
<b>aware</b> 33:16	25:7 56:4	124:2 130:19	<b>bedroom</b> 30:7	3:13 13:11,14
58:18 76:9	89:18 148:11	174:6	31:11 38:6	14:14 47:4
98:11 101:25	148:13	<b>bat</b> 43:23	65:19 82:16	88:23 89:3
103:2 105:9	<b>backgrounds</b>	<b>bath</b> 29:7 30:12	<b>bedrooms</b> 47:25	95:2 146:7
107:5 141:7	160:25	40:15,24 61:4	<b>beer</b> 68:8 70:1	165:14
143:21	<b>backing</b> 48:15	<b>bathroom</b> 65:18	<b>befriended</b>	<b>better</b> 15:2
<b>awareness</b> 165:1	<b>bad</b> 3:1 9:5 11:4	<b>bear</b> 36:11	69:24 77:18	22:21 28:14
165:3	22:12 32:12,20	48:25 68:16	<b>began</b> 8:4 45:20	32:8 63:25
<b>awful</b> 54:8 154:9	32:21 59:22	<b>bearing</b> 39:10	<b>begged</b> 75:21	64:14 80:23
	75:25 119:20	141:21	<b>beginning</b> 3:17	118:19 119:6
	119:21 128:17	<b>beat</b> 4:1 62:24	6:14,19 49:17	134:15,17
<b>B</b>	<b>badly</b> 5:20	<b>beaten</b> 37:11	56:18 127:19	136:11 140:15
<b>b</b> 93:15 136:6	168:17	<b>beating</b> 4:25	<b>behalf</b> 54:6	141:21 150:15
151:24	<b>bag</b> 40:21,21	13:20	87:22 130:4	151:23 159:12
<b>baby</b> 38:11	80:25	<b>Beckett</b> 88:19	145:5 174:20	159:16 169:16
<b>back</b> 5:9,9 8:18	<b>bail</b> 51:2	88:21,25 89:9	174:24	<b>beyond</b> 94:15
8:19,22 13:22	<b>barbecue</b> 65:7	89:17,18,22,25	<b>behave</b> 165:8	129:13
16:6,23 18:20	65:11	90:2,13 91:4	<b>behaviour</b> 13:11	<b>Bible</b> 156:17
18:23 19:11,12	<b>Barnardo's</b>	91:25 93:4,22	14:18,22 22:4	<b>big</b> 4:4 47:22
23:13,16,22,23	26:20 102:2,4	95:14 96:23	25:24 31:20,25	<b>bigger</b> 168:18
24:3,6 27:16	<b>barrier</b> 114:17	97:7 104:13,25	33:5 37:24	<b>biggest</b> 79:5
27:18,20 30:6				



<b>birth</b> 38:11	175:25	<b>breaking</b> 48:13	<b>Bullfinch</b> 150:4	<b>Cardiff</b> 90:8
<b>birthday</b> 3:4,25 28:4,17 35:6,9 62:13,14 71:6	<b>board</b> 28:25	<b>breathe</b> 28:23	<b>bullied</b> 84:4	<b>care</b> 5:25 7:15 10:14,16 11:2 11:5,10 13:12 13:19,23 14:1 14:8,24 15:7 15:16 16:17,18 18:4,11,15,18 19:21 20:1,10 20:14,16 21:5 23:17,22 24:8 25:14,18,19 26:2 27:16,20 29:15,20,24 30:9 32:8,22 33:7,15 36:4,5 36:11 37:8 39:11,13 43:2 43:6,8 46:16 46:20 47:10 61:17 62:11,12 62:15 64:4 67:12 72:6,8 73:17 74:11 75:17 84:24 100:7 105:8 106:6,14 127:15 131:16 134:22 135:4 135:14,15 138:10 139:5 139:15,17 144:2,17 166:24 167:5,7 173:21
<b>births</b> 21:24,25 23:7	<b>bodies</b> 138:17	<b>bridge</b> 162:3	<b>bumping</b> 85:16	
<b>bit</b> 2:18 3:6,22 4:24 5:20 7:21 10:25 12:7,16 16:5 18:2 21:21 24:2 25:25 29:4 38:8 45:16 47:19 51:3 56:6 57:9 62:3 62:22 65:12 71:3 76:3 77:12 84:6 85:21 93:21 131:18,20 141:4 148:10 148:13 152:23 152:25 159:20 162:24 166:10 171:3	<b>body</b> 30:17,19	<b>brief</b> 147:18 172:16	<b>burn</b> 78:25	
<b>bitch</b> 81:9	<b>bolted</b> 171:4	<b>briefly</b> 96:1 102:11 103:12 104:23 116:13 130:1 133:7 142:12 145:9 146:17 159:21	<b>burnt</b> 78:18,19	
<b>black</b> 37:21 126:11 127:12 160:11 175:22	<b>bomb</b> 78:21,22	<b>bring</b> 29:3 34:4 121:18 158:12 158:15 159:18 160:12 161:1 163:9,25	<b>bust</b> 37:20,20	
<b>black-led</b> 175:21	<b>boost</b> 169:1	<b>bringing</b> 22:12	<b>butt</b> 100:25	
<b>Blackpool</b> 64:6	<b>born</b> 6:15 55:20 56:10	<b>brings</b> 69:13 99:11 170:17 171:1	<b>buy</b> 23:12	
<b>blah</b> 34:1,2,2	<b>boss</b> 46:23	<b>Bristol</b> 131:21 158:11	<b>buying</b> 77:20 82:23 167:3	
<b>blame</b> 22:5 103:5 113:20 116:19	<b>bothered</b> 40:6 41:2 52:24	<b>broad</b> 93:21,22 107:14 156:6 158:25		
<b>blaming</b> 15:12 102:7,13,19 103:10 114:15 115:12	<b>bothered</b> 40:6 41:2 52:24	<b>broader</b> 104:23 173:9	<b>calling</b> 103:21	
<b>block</b> 124:2	<b>bottles</b> 23:13	<b>broadly</b> 10:11 48:23 92:25 147:7 165:2	<b>calls</b> 127:13	
<b>blocking</b> 14:3	<b>bottom</b> 5:5 40:22	<b>broke</b> 3:8 60:1	<b>calm</b> 19:8	
<b>blood</b> 40:10,10	<b>bought</b> 27:10 32:14 68:8	<b>broken</b> 13:9	<b>camera</b> 86:8	
<b>blow</b> 58:11	<b>boundaries</b> 9:9 12:9 49:24	<b>brother</b> 3:14	<b>campaigner</b> 174:19,24	
<b>bluntly</b> 95:11	<b>box</b> 25:2 106:19	<b>brought</b> 3:12 27:16 54:16 70:1 76:3 119:2 162:2 169:10	<b>cancelled</b> 52:24	
<b>BME</b> 160:20	<b>boy</b> 166:6	<b>bruises</b> 40:11	<b>cannabis</b> 63:21 77:20	
<b>BME-focused</b>	<b>boyfriend</b> 21:1 26:12 72:1,3 82:10	<b>build</b> 154:4 159:14	<b>cans</b> 65:12	
	<b>boyfriends</b> 18:13 27:3 125:14	<b>building</b> 11:15 11:23 14:6 15:17,19 31:23 42:21 136:13 137:20	<b>canter</b> 122:17	
	<b>boys</b> 165:18 166:2,16 174:10	<b>builds</b> 142:16	<b>capable</b> 142:25	
	<b>brain</b> 42:9,10		<b>capacity</b> 132:9 147:21 163:23 164:18	
	<b>branch</b> 41:19		<b>capture</b> 149:15	
	<b>brave</b> 88:1		<b>captured</b> 108:24	
	<b>BRD000275_0...</b> 102:10		<b>capturing</b> 137:5	
	<b>bread</b> 37:16		<b>car</b> 8:21 13:22 14:4 22:3,6,25 23:4,5,10,16 27:17 29:16,16 37:13,17 72:19 72:22,25	
	<b>break</b> 2:13 38:17 44:22 45:1,4,5,7,9,12 45:15 54:14,23 54:25 55:14 68:25 69:4,7 69:16,18 70:7 70:19,24 79:10 79:17 88:8 89:15 146:14 146:19,21			<b>carer's</b> 62:10 67:1
				<b>carers</b> 73:24 74:1 172:22,24
				<b>Carlene</b> 145:4
				<b>Carling</b> 65:12

<b>Caroline</b> 175:7	145:21	140:25 142:11	<b>chased</b> 37:12	129:11,17,17
<b>carried</b> 31:21	<b>cautious</b> 125:12	146:10,11,13	<b>chasing</b> 153:21	130:10,13
50:6,9 64:15	<b>CBT</b> 43:19,22	146:16 147:10	<b>chat</b> 69:15	132:5,6,8
64:16 74:15	<b>cent</b> 56:2	169:21,23,25	<b>chatting</b> 72:17	133:6 134:14
82:16	<b>central</b> 99:14	170:3,5,7	<b>cheaper</b> 167:3	134:22 137:8,9
<b>carrier</b> 40:21,21	<b>centre</b> 32:23	171:18,23	<b>check</b> 68:17	137:10 141:11
<b>carry</b> 3:22 8:22	68:15 70:7,11	172:9,10,14,18	103:17 170:1	142:19 143:8
<b>cars</b> 14:1,2	80:14 89:19	174:13 175:12	<b>checked</b> 118:16	145:13,15
21:17,18,21	92:13 106:23	176:3,7,8	<b>checklist</b> 47:24	147:22 149:1
22:23 23:13	107:3,24	<b>chairs</b> 4:7	125:21	149:11,24
25:12 46:17	117:17 121:18	<b>challenge</b> 109:6	<b>checks</b> 22:1	153:22 156:6
72:13	123:5 125:6	121:21	<b>child</b> 5:16 9:5	157:12,13
<b>case</b> 6:1 34:6,11	126:8,14 145:6	<b>challenges</b> 104:5	10:5 13:17	159:20 160:15
47:1,22 50:22	160:2 173:5	105:2,20	19:17 22:15,19	161:10 163:12
85:14 92:13	175:5,19,20	119:11 122:9	25:5 33:14	164:6,25 166:3
110:17 113:4	<b>centring</b> 97:2	123:9	34:6 38:19,21	170:21 171:6,9
114:5 119:16	101:16	<b>challenging</b>	39:4 49:23	171:11 172:21
120:11 123:24	<b>CEO</b> 147:2	149:10 159:23	51:9 55:24	173:14 174:14
139:12 149:17	175:24	<b>Champion</b>	63:7 66:6 84:8	174:18,23
150:4,5 159:8	<b>certain</b> 20:25	174:11	89:19,23 90:3	175:8,17
164:19 166:6	28:19 55:11,11	<b>chance</b> 124:15	90:5,8,16,17	<b>child's</b> 117:2
<b>case-by-case</b>	115:20 123:9	160:2	90:22 91:5,9	122:4 123:20
130:19	145:22	<b>chances</b> 44:6	91:17,21,21	129:20 132:13
<b>cases</b> 48:14 94:9	<b>certainly</b> 92:5	<b>change</b> 42:3	92:7,10,16,22	133:1 137:15
94:11 95:10	96:18 118:17	80:13 112:6	93:8,8,11,18	164:9 173:19
109:1 111:11	123:17 125:9	115:11 135:25	94:8,16,16	<b>child-centred</b>
120:24 122:2	168:17	140:9,11,16,18	95:12 96:4,11	95:4 135:5
133:5 136:7,8	<b>Cessian</b> 150:13	140:19 165:25	96:12,13,14,15	138:22
145:24 149:11	152:1	166:19 168:8	96:17 97:1	<b>childhood</b> 2:16
149:18,19	<b>cetera</b> 92:14	<b>changed</b> 82:16	99:6 100:21	2:23
151:3 153:17	110:18,19	92:3 96:2	101:24 102:5	<b>children</b> 14:20
<b>categorisation</b>	122:5 157:15	<b>changes</b> 173:10	102:23 104:2,6	19:13,14 22:6
129:4	157:16	<b>changing</b> 43:1	104:14,16,21	22:9 23:5 61:9
<b>categorise</b> 95:7	<b>chair</b> 1:3,5,7,8	108:5 114:22	104:21,23	61:11,21 62:4
108:8 112:17	1:21 44:22	129:17 140:21	105:8 106:7,14	82:10,14 90:2
<b>categorised</b>	45:4,6 53:24	<b>chaotic</b> 57:14	106:24,25	92:18 95:2,21
120:19	54:2,5,14,23	<b>chapter</b> 92:20	107:7,9,9,10	99:4 101:9
<b>categorising</b>	55:2,9 68:22	<b>characteristics</b>	107:12,15,18	104:9 106:5,15
90:20,23	68:23 69:4,9	138:6	107:19,22	108:18,23
<b>category</b> 70:14	69:10,14 70:18	<b>charges</b> 5:13	108:5 109:6,9	110:9,17,22
<b>caught</b> 100:3	70:21 71:1	19:21 37:2	109:12,24	111:1,1 116:15
<b>cause</b> 9:18	83:1,5,7 87:19	53:4,18	110:1,5,15	117:12 120:7,8
<b>caused</b> 19:19	87:21,22 88:7	<b>charities</b> 152:10	111:11,23	121:22 129:10
49:25 111:21	88:10,17,18	<b>charity</b> 173:13	112:2,8 116:22	130:2,10 135:1
145:20	89:6 134:6,8	173:18,23	117:1,3,4	135:8,19
<b>causes</b> 39:14	134:12 136:3	174:7,8	121:23 123:1	136:14,20
<b>causing</b> 34:3	137:18,20	<b>chase</b> 37:17	124:12 129:6	137:4 138:4,8

139:5,17 140:1 141:19 148:17 150:14,15,18 150:21 152:3 153:3,3,19 154:4,7,11 157:2,2 161:18 163:20 164:3 164:18 165:13 166:24 167:1,1 167:4,7 172:23 173:21 174:1,3 <b>children's</b> 10:22 10:23 11:25 12:25 13:4,5,9 13:13 15:5 16:6 17:10 60:19,24 94:25 135:4 138:19 152:5 161:22 167:24 173:22 <b>choice</b> 87:8 113:18,21,22 113:24 119:15 171:14 <b>choices</b> 87:3 110:18 113:15 119:14 <b>chronology</b> 83:9 <b>chunks</b> 30:12 <b>cig</b> 36:22,24 <b>cigarettes</b> 68:9 70:2 77:20 <b>circles</b> 98:9 <b>circumstance</b> 92:24 <b>circumstances</b> 92:9 100:5 113:22 140:11 <b>cirrhosis</b> 44:2 44:15 <b>cited</b> 128:12 <b>City</b> 149:12 <b>civil</b> 156:19 <b>claim</b> 76:4 86:22 102:15 <b>claims</b> 10:3	<b>clarify</b> 6:15 <b>clarity</b> 91:14 <b>classed</b> 26:6 171:5 <b>clean</b> 59:12 <b>clear</b> 3:17 41:3 71:16 90:15 91:6 99:16 100:19 105:4 111:24 117:15 117:21 122:3 123:3 151:19 <b>clearer</b> 122:10 <b>clearly</b> 2:12 116:16 121:1,6 151:1 162:9 <b>clicked</b> 43:11,13 <b>close</b> 50:22 52:8 64:7 118:8,9 <b>closed</b> 36:8,10 <b>closely</b> 166:24 <b>clothes</b> 30:9,23 40:16,20,23,25 41:25 42:3,20 80:25 <b>club</b> 34:17,22 <b>clubbing</b> 33:24 <b>clubs</b> 33:25 34:8 35:4 <b>clue</b> 39:5,11 <b>co-founder</b> 175:14 <b>co-operate</b> 141:18 <b>cocaine</b> 42:8 44:3,18 80:1 <b>coerce</b> 93:10 <b>coercion</b> 171:12 <b>coercive</b> 102:9 <b>coin</b> 142:21 <b>colleagues</b> 146:16 170:1 <b>collect</b> 112:5 <b>collecting</b> 152:12 <b>collection</b> 121:19,20	122:3,10 143:7 <b>collusion</b> 126:16 <b>colour</b> 127:12 <b>coma</b> 74:13,21 <b>combines</b> 150:7 <b>combining</b> 96:12 <b>come</b> 23:14 24:6 24:6 31:4 34:4 35:24 36:25 42:20 45:3 53:10 59:16 61:8,9,14 65:7 65:18,22 66:15 72:8,18 78:25 79:1,2 82:20 85:13 91:2 94:25 114:11 119:5,13 121:9 124:8 126:4,5 126:6,17 146:12 147:17 153:16 167:24 <b>come?'</b> 119:18 <b>comes</b> 103:1 109:4 111:9 112:9 <b>comfort</b> 33:8,9 33:11 <b>coming</b> 24:5 48:17 57:16 58:16,23 64:25 66:19,22 67:3 132:5 142:8 151:3 163:18 <b>comment</b> 89:12 145:9 <b>commented</b> 96:8 <b>commercial</b> 99:3 <b>Commissioner</b> 138:19 <b>commit</b> 128:23 <b>commitment</b> 157:17 169:1 <b>committed</b>	139:25 159:22 <b>common</b> 35:16 123:2 <b>commonalities</b> 96:16,18 <b>commonsense</b> 127:5 <b>communities</b> 126:14 160:11 160:21 <b>community</b> 126:17 132:23 132:24 133:4 169:8 <b>company</b> 64:5 <b>compared</b> 123:1 123:8 <b>compares</b> 123:4 <b>competence</b> 160:8 <b>complainants</b> 51:24 <b>complained</b> 81:19 <b>complaints</b> 50:13,15 <b>completely</b> 95:10 145:16 170:14 <b>complex</b> 100:5 <b>complexity</b> 97:22 <b>compliance</b> 140:9 <b>complicated</b> 96:1,9 <b>complication</b> 124:4 <b>components</b> 98:25 <b>conceived</b> 33:14 <b>concept</b> 90:17 90:19 92:1 95:12 101:22 102:5,16 107:16 113:17 141:12 142:4	<b>concepts</b> 127:1 128:6 <b>conceptualising</b> 90:13 <b>conceptually</b> 170:14 <b>concern</b> 42:25 104:14 109:7 109:10 115:25 118:3 121:10 128:2 159:19 160:15 161:11 <b>concerned</b> 103:3 <b>concerning</b> 143:5 <b>concerns</b> 16:12 16:14,20 26:17 35:14 47:11 96:14 111:16 111:19 122:4 125:1 130:10 135:19 <b>concluded</b> 96:25 <b>concludes</b> 176:6 <b>concluding</b> 158:13 <b>conclusions</b> 97:8 <b>concur</b> 104:25 115:16 116:21 117:10 162:15 <b>concurrent</b> 51:12 113:16 <b>concurrently</b> 110:10 <b>condition</b> 8:5 21:20 31:14 <b>conditions</b> 9:13 12:3 16:13 17:10 42:15 116:24 117:9 123:14 129:19 <b>confer</b> 146:16 <b>confirmation</b> 116:2 <b>confirmed</b> 45:15 63:9 <b>conflated</b> 120:8
---	--	--	--	---

121:4 <b>conflating</b> 120:22 125:2 <b>conflation</b> 120:14 <b>conflicting</b> 20:24 <b>confused</b> 84:13 97:17 133:23 145:16 <b>confusing</b> 67:14 101:15 <b>confusion</b> 91:15 91:16 97:14 145:21 <b>connected</b> 99:9 <b>connection</b> 97:22 <b>Connexions</b> 161:8 <b>conscience</b> 11:22 <b>consensual</b> 93:17 <b>consent</b> 163:24 <b>consequence</b> 113:1 <b>consequences</b> 105:10 113:13 141:8 142:20 171:11,15 <b>consider</b> 100:10 124:15 132:11 150:16 <b>consideration</b> 14:23 18:11 <b>considered</b> 94:24 96:5 160:14 170:13 <b>considering</b> 132:17 <b>consistency</b> 43:3 158:20 166:22 <b>consistent</b> 10:8 118:5 127:21 167:14 <b>consistently</b>	104:2 118:18 <b>constantly</b> 43:1 108:5 <b>constitute</b> 92:10 94:6 <b>constitutes</b> 91:8 91:17 <b>constrained</b> 113:17,22 <b>constructed</b> 115:19 <b>contact</b> 2:23 6:25 19:6 25:21 41:5 43:14 45:19,22 48:21 71:20 121:9 150:2 <b>contacted</b> 71:21 <b>contained</b> 21:19 <b>content</b> 45:16 83:6 172:8 <b>contents</b> 156:5 <b>context</b> 48:20 61:15 98:23 99:12 105:16 122:23 129:18 134:4 143:12 143:16 144:18 172:8,16 <b>contexts</b> 122:23 129:24 <b>contextual</b> 131:19,23 132:16 133:8 133:11,23,24 143:5,13 144:2 144:23,24 145:3 <b>continue</b> 4:15 38:23 45:16 69:11 83:6 104:18 110:16 <b>continued</b> 97:24 139:6 <b>contraceptives</b> 73:4,9 81:13 <b>contract</b> 81:16	<b>control</b> 86:8 171:12 <b>controlled</b> 110:7 <b>conversation</b> 19:9 26:11 46:10,16,19 47:11 108:13 129:1 <b>conversation/...</b> 161:21 <b>conversations</b> 7:17 130:2 154:6 159:15 <b>convicted</b> 5:13 34:5 38:7 51:6 <b>convictions</b> 83:19 <b>cook</b> 41:12 <b>cope</b> 74:24 <b>copy</b> 1:21 55:10 <b>core</b> 54:18 153:12 172:18 173:3 176:5 <b>corner</b> 57:11 <b>correct</b> 58:10 81:10 83:21 85:10 89:21,25 90:11 147:4 156:14 <b>corrected</b> 166:8 <b>correctly</b> 84:23 174:6 <b>couch</b> 57:24 <b>council</b> 76:5 141:10 142:7 <b>counselling</b> 7:19 <b>count</b> 111:13,14 136:5 <b>counting</b> 111:10 <b>country</b> 3:19 157:7 173:16 <b>counts</b> 51:9 <b>county</b> 105:16 147:25 153:20 153:23,24 166:16,18 <b>couple</b> 18:6	28:24 30:22 52:9 59:15 61:2 66:10 73:1,22 78:13 84:11 104:20 108:14 133:15 <b>courage</b> 54:10 <b>course</b> 69:14 114:13 119:24 147:17 169:22 173:12 176:4 <b>court</b> 20:23 44:8 44:14 48:19 50:5,6 85:11 85:20 86:7 149:18,19 <b>courtroom</b> 86:8 <b>covered</b> 30:10 30:24 40:10 70:15 <b>CPS</b> 37:23 <b>crack</b> 79:25 <b>Craft</b> 164:20 <b>craving</b> 18:12 <b>create</b> 108:9 112:6 123:18 133:4 <b>created</b> 110:4 <b>creates</b> 124:5 <b>creating</b> 15:6 114:17,19 123:14 140:12 <b>cries</b> 19:19 <b>crime</b> 17:8,9,9,9 17:9 105:17 111:19,21 125:16 <b>crimes</b> 34:6 <b>criminal</b> 4:16 5:13 19:21 31:9 32:7 37:2 37:7 47:17 76:17 83:3,18 96:13 105:25 118:1 119:11 156:20 <b>criminally</b> 38:7	170:21 <b>crossed</b> 152:20 <b>crossovers</b> 127:19,20 <b>cry</b> 8:18 <b>crying</b> 17:19 40:8 75:2 <b>CS-A12</b> 1:10,12 45:11 54:21 176:17 <b>CS-A2</b> 1:7 54:15 <b>CS-A371</b> 55:2,3 55:5 69:10 71:2 176:19 <b>CSA</b> 90:22 109:15 123:7 <b>CSE</b> 11:5,6 14:24,24 16:9 16:14,20 26:21 46:2,3 47:22 48:14 52:12,13 53:8 90:13,16 90:21 93:24 94:2,6,11 96:16 97:11,18 97:19,22 98:12 98:24 101:7 108:4 112:25 113:2 114:25 115:13 116:24 117:18 119:4 120:25 121:6,9 121:16,22,23 122:13,15 123:7,10 124:16,25 125:5,8,10 126:3 127:4 137:6 145:23 145:24 153:11 176:2 <b>cultural</b> 135:25 139:15 160:8 <b>culturally</b> 175:16 <b>culture</b> 46:14 112:7 139:22
---	--	--	---	---

140:13,13 161:5,14 162:4 <b>curious</b> 158:4 167:11 <b>current</b> 92:24 95:14 107:14 155:1,5 171:7 <b>currently</b> 94:7 96:7 128:16 142:18,25 174:8 <b>curry</b> 41:13,25 <b>custody</b> 3:9 7:9 <b>cuts</b> 161:7 <b>cutting</b> 43:13 63:22 <b>cycle</b> 43:21	<b>dataset</b> 151:21 <b>datasets</b> 151:16 151:19 <b>date</b> 6:16 21:24 21:25 23:7 26:3 48:10 <b>dates</b> 6:13 49:3 76:1 83:15 <b>dating</b> 3:14 <b>daughter</b> 34:1 39:6,17 43:24 44:9,14 148:16 <b>Davidson</b> 127:13 <b>day</b> 1:3 11:9,13 24:1,3,6 44:7 50:20 61:24 62:24 63:22 76:22 80:19 85:20 118:12 172:2 <b>day's</b> 172:4 <b>days</b> 24:22,25 30:15,22,24 31:5,8 41:21 41:22 42:2 53:20 61:2,6 73:22 74:8 78:13 84:21 <b>daze</b> 42:13 <b>dead</b> 11:12 80:7 <b>deal</b> 69:4 153:23 171:24 <b>dealer</b> 58:18 <b>dealers</b> 57:16 <b>dealing</b> 10:24 24:6 39:23 48:7 63:18 100:4 121:14 137:23 147:22 167:16 <b>dealt</b> 147:15 153:22 165:12 <b>Dean</b> 107:2,6 <b>death</b> 4:13 <b>debate</b> 154:2 155:15	<b>deceive</b> 84:18 93:11 <b>decided</b> 7:6 24:25 31:6 43:24 <b>deciding</b> 13:11 14:21 91:10,11 <b>decision</b> 14:9 56:20 <b>decisions</b> 130:4 131:15 139:9 <b>deemed</b> 149:16 <b>deep</b> 12:17 <b>default</b> 132:7 <b>defence</b> 50:24 84:2,16 <b>defendants</b> 85:10,16,23 86:3,10,12 <b>deficient</b> 141:20 <b>deficit-based</b> 116:22 <b>define</b> 94:16 95:7 145:13 <b>defined</b> 94:11 99:7 145:16 <b>defines</b> 92:24 <b>defining</b> 90:19 92:15 95:5,22 103:21 136:6 142:3 <b>definitely</b> 13:15 155:12 158:2,5 158:6 160:18 162:4,15 163:3 165:3 <b>definition</b> 91:5 91:22 92:1,4,6 92:7,17,24 93:6,22 94:3 95:19,25 96:7 97:11 98:1,23 102:5 103:13 103:18,21 107:15 109:7 109:20,25 110:1 116:2	137:14 141:9 141:16 142:8 148:19 <b>definitional</b> 90:15 <b>definitions</b> 98:3 98:15,22 99:1 99:2 103:25 105:22 106:17 108:8 111:5 128:6 137:12 141:5 142:18 145:10 146:1 <b>degree</b> 20:25 43:21 <b>Dehumanising</b> 160:17 <b>delayed</b> 88:15 <b>delivering</b> 148:7 <b>demographics</b> 151:15 157:15 <b>demonstrate</b> 172:24 <b>demoralising</b> 159:10 <b>denial</b> 97:24 <b>denying</b> 100:15 <b>depend</b> 127:5 <b>dependent</b> 18:1 <b>depending</b> 90:24 <b>depression</b> 8:10 <b>deputy</b> 175:20 <b>Derby</b> 149:12 154:19 <b>Derbyshire</b> 149:10 <b>Derbyshire's</b> 149:22 <b>describe</b> 3:15 15:24 20:7 28:6 33:4 40:14 42:1 47:3 55:24 62:16,18 64:18 68:4 77:11 78:9 79:6	81:25 83:22 87:6 158:22 170:15 <b>described</b> 4:21 6:20 7:4 30:14 41:10 43:9,12 45:21 51:20,22 71:16 78:1 80:16 120:25 121:5,8 150:11 152:16 <b>describing</b> 69:19 <b>description</b> 157:7 <b>deserve</b> 135:17 <b>designing</b> 162:10 <b>desire</b> 125:21 <b>Desmond</b> 173:12 <b>detail</b> 33:1 38:23 69:15 90:6 128:12 <b>detailed</b> 141:4 144:25 150:8 <b>details</b> 37:5 <b>detective</b> 175:7 175:9 <b>determine</b> 92:16 <b>develop</b> 149:23 151:12 152:8 <b>developed</b> 33:5 149:14 151:9 151:14 <b>developing</b> 106:24 108:6 <b>development</b> 92:11 <b>devised</b> 108:25 <b>DfE</b> 133:16 <b>di</b> 34:2,2 <b>diagnosed</b> 6:6 56:13 <b>die</b> 11:21 <b>died</b> 59:20,24,24 <b>dietician</b> 82:3
<b>D</b>				
<b>D</b> 176:16 <b>dad</b> 56:16 57:6 58:18 59:1,3,6 59:7,9,15,24 61:19 76:20 <b>dad's</b> 57:7 76:16 <b>daily</b> 39:20 124:2 <b>damage</b> 19:21 31:9 37:2,7 159:25 <b>damages</b> 76:4 86:22 <b>dance</b> 34:13 <b>dancing</b> 34:13 <b>danger</b> 14:8 153:13 <b>Danny</b> 156:3 158:12 159:18 160:12 161:1 164:7 165:15 167:15 168:5 <b>dare</b> 29:14 <b>data</b> 95:24 112:5 120:6 121:18 121:20 122:3 122:10 136:6 143:7 152:12				

<b>difference</b> 8:7 91:7 103:18,20 103:22 105:4 113:7 121:3 122:14 136:12 136:15,20,21 137:11,14,17 140:1 145:13	<b>difficulty</b> 98:9 111:9 <b>diminished</b> 157:22 <b>direct</b> 112:19 <b>directing</b> 105:23 106:2 135:3 <b>direction</b> 111:18 <b>directions</b> 67:6 <b>directly</b> 89:10 103:5 125:5 136:20 <b>director</b> 89:18 107:3 145:6 175:15,20 <b>disabilities</b> 163:19 <b>disability</b> 147:16 164:13 165:13 <b>disagree</b> 111:9 <b>disclosed</b> 53:17 <b>disclosing</b> 27:12 <b>disclosure</b> 122:21,22,25 123:6 124:5,10 <b>discovering</b> 132:4 <b>discussion</b> 47:4 104:15 <b>discussions</b> 8:14 139:13 <b>disease</b> 81:17 <b>disgusting</b> 17:22 <b>disparities</b> 157:6 <b>displaying</b> 13:11 <b>disputes</b> 3:9 <b>disruption</b> 150:8,23 155:10,20,24 156:8,24 157:8 158:15 159:2 163:13 168:21 <b>disseminating</b> 119:10 <b>distinct</b> 97:1	101:23 107:25 <b>distinction</b> 91:21 97:7 104:4,18 <b>distinguishing</b> 97:4 103:14 <b>distressed</b> 30:14 30:17 <b>distressing</b> 83:24 87:25 <b>ditch</b> 11:12 <b>diverse</b> 163:16 <b>doctor</b> 56:13,13 <b>doctor's</b> 44:19 <b>doctoral</b> 97:10 132:3 <b>doctors</b> 8:11 154:24 162:15 <b>document</b> 107:24 124:8 126:6 155:23 156:1,2 <b>documented</b> 25:6 91:16 <b>documents</b> 102:1 <b>doing</b> 12:10 14:4 15:15 17:22,23 22:21 23:2 47:12 63:12 65:15,25 90:3 120:1 125:19 132:4,7 133:4 133:25 139:9 140:6 148:9 157:23 158:17 164:6 169:13 170:20,23 <b>domestic</b> 4:2 9:25 174:15 175:17,23 <b>domino</b> 12:14 <b>door</b> 5:6,8,8,9 24:4 27:22 31:11 34:3 36:8,9 48:12 57:19,21 58:1	58:1,20 65:2 67:12 78:19 85:12 115:7 169:5,9 171:4 <b>doorman</b> 34:7 34:10 <b>doormen</b> 33:22 35:17 <b>doors</b> 11:7 36:3 36:19,20,24 <b>doorstep</b> 37:18 37:19 <b>doorway</b> 58:23 <b>double</b> 4:6 <b>double-check</b> 53:25 <b>doughnuts</b> 14:4 <b>downstairs</b> 30:7 35:24 36:6 42:20 <b>Dr</b> 88:19,20,21 88:25 89:1,2,5 89:9,9,17,18 89:22,25 90:2 90:6,11,13 91:4,15,25 93:4,22 95:14 96:8,23,23 97:6,7 100:25 101:12 102:11 102:14 103:16 103:22 104:13 104:25,25 105:18,20 106:22,23 107:5,19,20 108:7 109:5,18 110:8,21 111:3 111:4,15,16 112:21,22 113:6,18 115:15,16 116:13,21 117:14,15 118:1,10,11 120:4,15,16 121:7,12	122:16,19 123:3,22 124:9 124:21 125:1 126:5,7,18,19 126:25 127:24 128:9,18,20,23 129:22 130:8,8 130:20,21 131:17,25 132:1,3 133:11 134:5,5,19 136:3,4,13 137:11,13,22 137:22 138:9 139:19,20 142:1,6 143:18 144:25 145:2 151:18 154:3,3 176:21,22 <b>dragged</b> 50:17 50:20 51:1 <b>dragging</b> 13:22 <b>drank</b> 60:9 <b>drawing</b> 97:21 <b>draws</b> 97:8 <b>dressed</b> 36:22 <b>dresses</b> 36:23 <b>drew</b> 148:15 <b>drink</b> 27:2 28:8 29:12 43:13 44:6 65:14 72:19 <b>drinking</b> 7:25 44:18 59:4 74:15 75:4,9 <b>drinks</b> 28:12,20 <b>drive</b> 113:5 144:16 157:25 <b>driven</b> 112:4 135:5 157:16 <b>driver</b> 22:23 <b>drivers</b> 22:1,4 23:8 150:22 154:6,9 <b>driving</b> 117:1 <b>drop</b> 23:16 29:14 44:7
---	--	---	--	---

<b>dropped</b> 4:17,19 23:22 29:20,24 171:2	<b>eating</b> 82:1,3	<b>Embedding</b> 168:2	130:4,5	<b>Eugh</b> 66:5
<b>drug</b> 13:23 17:9 29:22 30:25 31:2 33:2 57:16 58:18 60:4 68:14 69:20 76:16	<b>ecological</b> 132:17	<b>emerging</b> 153:24	<b>England</b> 128:21	<b>Europe</b> 141:10 141:18 142:8
<b>drugs</b> 11:20 13:17 25:16 27:2 35:18 43:14 47:5 53:21 58:25 60:23 63:20 74:15 79:24 121:14	<b>economic</b> 110:21	<b>empathy</b> 87:1 118:3 159:19 160:14 161:11	<b>English</b> 109:20	<b>evaluate</b> 136:19 151:16
<b>drunk</b> 4:3 24:5 24:10 53:21 60:12 74:10,18 74:21 75:4,11 78:4	<b>ecstasy</b> 34:9,11 34:15	<b>emphasis</b> 92:1 97:17	<b>enjoy</b> 47:13	<b>evaluated</b> 133:16 134:2
<b>drunken</b> 21:20	<b>edge</b> 163:3	<b>emphasise</b> 133:22 138:24	<b>enquire</b> 34:20	<b>evaluating</b> 162:25
<b>due</b> 75:16 126:13 147:17 151:9 169:22 176:4	<b>Edis</b> 152:22	<b>employed</b> 175:4	<b>ensuring</b> 117:20 138:14,20 140:8 166:21	<b>evaluation</b> 133:18
<b>dye</b> 41:24	<b>educate</b> 116:17	<b>enable</b> 172:22	<b>entertain</b> 23:25	<b>EVANS</b> 142:12 145:1 146:9 170:6,9 171:3 171:16
<hr/> <b>E</b> <hr/>	<b>educated</b> 116:15	<b>encompassed</b> 104:15 117:22	<b>entirely</b> 110:6	<b>evening</b> 35:12
<b>E</b> 176:16	<b>educating</b> 116:4 116:5	<b>encompassing</b> 135:23	<b>entirety</b> 89:7	<b>event</b> 30:15 42:1 162:14
<b>earlier</b> 48:24 104:13 129:18 151:19 154:25 162:8,15 170:11	<b>education</b> 57:18 114:1,21 136:16 154:10 165:3	<b>encounters</b> 99:13 100:4	<b>entrance</b> 85:8 85:17	<b>events</b> 3:19 6:18 6:19 7:3 45:24 45:25 71:19 148:4 168:23 169:4
<b>early</b> 2:16 8:11 56:6 82:2 120:18 131:21 152:23	<b>effect</b> 12:14 31:5 47:6 114:5 173:9	<b>encouraged</b> 20:14	<b>environment</b> 18:9 39:9 107:9 132:6,19 132:20,22 162:20,20	<b>eventually</b> 6:6 16:11 38:14 76:3 83:15
<b>earn</b> 18:6	<b>effective</b> 157:23	<b>encouraging</b> 132:16 161:13 162:5	<b>environmets</b> 132:12 162:19	<b>everybody</b> 136:6 148:2 159:8 169:10
<b>earrings</b> 80:17	<b>effectiveness</b> 133:8	<b>ended</b> 18:12 19:24,24 20:4 24:8 29:19 48:14 52:16 59:17 60:5 61:24 74:3,12 74:13,21 75:2 76:23 82:22,23 82:23 109:20	<b>epilepsy</b> 74:16	<b>evidence</b> 1:6 2:4 3:18 20:24 45:16 47:17,19 48:15 49:18,19 54:13 68:24 69:11 70:19 71:3 73:12 83:3,18,24 85:2,3,4 86:1,2 87:17,24 88:19 102:14 104:19 112:13 121:1 122:22 123:4,6 123:17 124:9 125:25 126:1,7 138:1 146:19 150:9 152:5
<b>easier</b> 15:4 142:13	<b>effects</b> 10:8 30:25 82:4	<b>enforced</b> 140:9	<b>episodes</b> 5:23	
<b>easy</b> 39:16 43:15 47:20 57:10	<b>effort</b> 14:16 46:8 87:8	<b>enforcement</b> 150:12	<b>Equalities</b> 174:16	
<b>eat</b> 58:8	<b>Eid</b> 41:11,23	<b>engage</b> 94:13 100:17 110:25 113:7 114:10 114:14 115:22 129:22 130:1 154:8 165:7	<b>Equally</b> 121:8	
	<b>eight</b> 50:18,21 126:2	<b>engaged</b> 101:21 163:1	<b>equip</b> 111:25	
	<b>either</b> 3:2 38:3 40:5 47:9 71:19 72:5,20 78:25 137:21 141:1,15 162:13	<b>engagement</b> 168:20	<b>eradicate</b> 140:7 140:6	
	<b>elderly</b> 60:8	<b>engaging</b> 87:6	<b>eradicating</b> 140:6	
	<b>element</b> 91:23 97:2 153:12		<b>escape</b> 43:20	
	<b>elements</b> 163:16		<b>ESRC</b> 133:13	
	<b>elevated</b> 94:15		<b>essence</b> 109:25 132:2	
	<b>embarrassed</b> 142:6		<b>essential</b> 172:24	
	<b>embedded</b> 153:11		<b>essentially</b> 43:18 115:21 126:10 128:13	
			<b>Essex</b> 175:8,10	
			<b>establish</b> 111:17	
			<b>established</b> 173:6 174:25	
			<b>et</b> 92:14 110:18 110:19 122:5 157:15,16	
			<b>ethnic</b> 126:12 160:25	
			<b>ethos</b> 135:25	

158:14,21	102:5,12,17,21	108:24 110:11	145:14,15,24	<b>faced</b> 100:6
159:22 160:2	103:13,20	114:7 115:12	147:23,24	<b>facilitator</b> 93:16
162:7,9 165:16	107:23 109:13	116:19 129:11	148:1 149:1,11	<b>facing</b> 100:4
166:20 169:19	110:23 112:2	135:10 162:19	149:25 153:6,9	<b>fact</b> 5:12 15:13
171:18 172:1,3	123:13 141:13	<b>expertise</b> 89:23	153:11,17,22	36:13 38:20
172:4,5,6,11	142:4	90:8 106:23	154:1 157:13	44:21 47:5
172:12,12,13	<b>exchanged</b>	121:18 125:6	157:13 162:1	52:12 92:20
172:15,20	101:16	157:20 160:9	163:21 166:3	93:23 94:7
173:17 176:4,7	<b>exchanges</b> 19:2	<b>explain</b> 18:22	168:2,3 172:21	95:8,15,23
<b>evidence-based</b>	<b>exchanging</b>	47:3 98:20,20	173:8,14 174:8	96:15 97:3
168:10	100:21	131:22	174:10,19,23	102:19 107:21
<b>evoke</b> 155:5	<b>excited</b> 74:7	<b>explained</b> 5:18	<b>exploitative</b>	109:11,23
<b>evolved</b> 115:18	<b>exciting</b> 152:8	10:21 21:15	99:12 100:3	112:23 114:24
<b>exact</b> 6:16 49:3	<b>exclude</b> 105:22	27:10 45:12	<b>exploited</b> 47:18	121:5 125:7
102:21	105:24	47:15 75:3	77:16 117:4,5	132:9 144:11
<b>exactly</b> 12:6	<b>exclusion</b> 98:11	76:2 82:9	117:21 130:15	155:22 156:25
13:6 20:18	<b>exclusionary</b>	155:7 159:24	170:21,22,22	161:17
29:10 139:20	111:7	<b>exploit</b> 20:20	171:10 172:23	<b>factor</b> 97:4
164:4 165:18	<b>executive</b>	<b>exploitation</b>	<b>exploiter</b> 117:19	103:14 125:3
167:23	175:15	25:5 39:4	<b>explore</b> 160:24	<b>factored</b> 164:11
<b>Examination</b>	<b>exercise</b> 158:3	51:19 55:25	<b>exploring</b>	<b>factors</b> 120:23
1:13 55:4 89:8	162:16 167:8	86:25 89:20,24	160:22	122:11 125:8
147:1 176:18	<b>exercises</b> 145:12	90:5,9,16 91:6	<b>exposed</b> 14:8	133:10
176:20,23	<b>existed</b> 116:1	91:18,21 92:7	<b>exposure</b> 15:2	<b>fail</b> 145:21
<b>examiner</b> 175:4	149:3	92:11 93:8,18	33:3	<b>failed</b> 16:17
<b>example</b> 90:23	<b>expand</b> 160:20	94:17 95:12	<b>expressed</b> 32:6	37:24 48:16
90:25 91:12	<b>expanded</b>	96:4,11,12,13	<b>extensions</b> 41:23	61:13
98:16 100:16	147:24	96:14,17,18	<b>extensive</b> 174:18	<b>failure</b> 113:1
105:15 129:6	<b>expecting</b> 141:4	97:1 98:15,17	174:22	<b>fair</b> 32:9 97:3
138:18,19	164:16	99:3,6,17,22	<b>extent</b> 76:8	114:10 164:15
141:8 162:1	<b>experience</b>	100:20 101:14	142:22	164:16
169:5	21:22 48:17	102:6,18,20,24	<b>external</b> 138:16	<b>fairly</b> 14:14
<b>examples</b> 90:20	83:24 87:1	103:7,9,24	<b>extra</b> 146:5	170:9
91:2 100:24	94:16 95:5,21	104:6,14,16,21	<b>extracts</b> 176:5	<b>fairness</b> 158:8
107:8 158:10	108:20 119:22	104:22,23	<b>extrafamilial</b>	169:19
169:21	151:11 173:24	105:14,15	95:18,19 132:4	<b>fake</b> 33:22,22
<b>excellent</b> 168:16	174:18,22	106:1,1,8,12	144:10	34:5
169:6,6	<b>experienced</b>	107:15 109:6	<b>extremely</b> 49:25	<b>fall</b> 127:12
<b>exchange</b> 91:23	97:23 105:11	111:12,23	<b>eye</b> 35:1 36:13	145:23,25
92:2,8,15,19	112:10 115:1	112:3,9 115:18	37:21 54:18	<b>falling</b> 74:12,18
92:21,22,25	174:10	117:23 120:7	79:14 84:24	<b>falls</b> 74:20 91:8
93:13,25 94:9	<b>experiences</b>	120:10 122:21	<b>eyes</b> 9:2 42:5	92:16 160:14
94:12,24 95:9	54:8 55:24	122:24,25		<b>false</b> 32:16
95:9 97:2,4	83:3 88:1	127:1 130:11	<b>F</b>	<b>familial</b> 91:1
98:21 99:5,8	92:18 110:10	134:15 135:22	<b>face</b> 19:11 29:2	<b>families</b> 164:22
100:9 101:4,8	117:25 138:16	141:9,12 142:3	40:8 119:12	165:8 173:25
101:14,19	<b>experiencing</b>	142:19 143:8	<b>Facebook</b> 33:25	<b>family</b> 6:25



18:14 21:2 44:14 56:4 57:1,2,3 65:6,7 82:11,14 106:10,10 107:9 117:8 132:19 162:19 163:12 <b>fantastic</b> 157:24 <b>far</b> 7:8 64:22 <b>fast-moving</b> 148:23,24 <b>fat</b> 81:9 <b>father</b> 2:25 3:7 58:16 <b>fault</b> 50:3 87:7 114:12,13 <b>fear</b> 139:9,10 140:3 <b>fears</b> 79:5 <b>feature</b> 92:15 99:1 158:11 163:14 167:20 <b>features</b> 94:15 94:23 95:5 144:3 <b>February</b> 49:17 <b>fed</b> 34:15 44:3 59:12 <b>feed</b> 44:23 117:9 <b>feeding</b> 152:13 <b>feeds</b> 125:14 <b>feel</b> 10:11 14:7 18:9,19 20:6 20:12,22 37:25 39:2 43:1 57:12 63:4,25 64:13 86:3 87:11 89:11 100:14 102:6 127:17 128:4 129:19 140:2 141:2 142:6 144:18 150:25 152:8 153:1 <b>feeling</b> 28:21 71:11 169:2	<b>feelings</b> 20:24 <b>feels</b> 116:6 <b>felt</b> 10:25 11:1 15:5 18:3,3,4 18:16,17,18,19 18:25 20:11,14 20:15 28:23 30:19,21,21 66:8,11 67:21 68:8 70:1 81:1 81:2 84:1,3 154:18 162:10 <b>female</b> 31:12 78:14 <b>field</b> 90:2,4 113:14 119:8 140:23 148:12 <b>fight</b> 60:16 <b>fighting</b> 13:21 <b>figures</b> 120:6,12 120:17 123:16 <b>file</b> 48:25 <b>files</b> 114:5 <b>final</b> 83:6 168:6 <b>finally</b> 31:6 51:14 86:15 131:17 167:15 168:5 175:24 <b>financial</b> 91:24 93:15,19 <b>financially</b> 2:20 <b>find</b> 2:4 9:18 11:3 16:4 19:15,16 24:19 49:20 57:10,19 110:8,17,24 168:14 <b>fine</b> 2:3 86:5 <b>fingerprint</b> 37:21 <b>fingers</b> 78:3 152:20 <b>finished</b> 50:24 <b>fire</b> 11:8 27:22 78:18 79:5 <b>fires</b> 79:4 <b>Firmin</b> 132:1	145:4 <b>Firmin's</b> 132:3 <b>first</b> 1:7 4:1 10:21,24 15:9 25:13 32:12 48:19,20 49:3 49:7,8,13,21 49:23 57:12 64:21 72:13 73:5 74:7,21 79:17 82:7 84:1 85:19 92:6 99:25 121:12 133:17 143:18 145:9 147:12 149:7 150:7,9 157:4 <b>firstly</b> 89:17 92:4 99:11 156:6 <b>fit</b> 28:25 29:1,9 30:2 31:2 74:19 <b>fits</b> 172:5 <b>fitting</b> 155:18 <b>five</b> 2:24 14:10 43:6 45:3,17 61:6 83:4 172:7 <b>five-minute</b> 54:23 <b>flagged</b> 153:20 161:4 <b>flagging</b> 153:18 <b>flat</b> 73:23 78:13 80:6 82:22 <b>flats</b> 77:19 <b>flawed</b> 120:20 <b>floor</b> 19:11,17 34:13 58:8 <b>floorboards</b> 58:25 <b>fluid</b> 157:20 <b>fluidity</b> 157:18 <b>flustered</b> 86:1 <b>focus</b> 96:21 97:19 111:16	112:12 115:25 116:22,25 124:11 135:6 159:7 165:21 <b>focused</b> 132:18 <b>focuses</b> 101:10 <b>focusing</b> 101:15 123:11 173:7 <b>follow</b> 2:7 49:9 127:24 147:7 <b>follow-up</b> 56:14 <b>following</b> 1:17 133:7 152:21 158:16 172:15 173:4 <b>food</b> 58:6,8,8 82:3 <b>force</b> 91:11 111:10 <b>forced</b> 78:9 153:9 <b>forceful</b> 19:19 <b>forces</b> 118:22 151:7 <b>forcibly</b> 8:21,22 <b>forensic</b> 175:3 <b>forgive</b> 1:9 49:1 70:6 72:9 154:16 <b>form</b> 91:8 93:8 94:17 97:1 99:4,8 104:2 105:25 108:5 112:2,20 <b>formally</b> 89:6 172:2 <b>format</b> 95:14 <b>former</b> 174:12 175:3 <b>forming</b> 112:14 <b>forms</b> 96:12,17 98:12 105:13 106:8,9 107:23 107:25 108:14 108:19,23 111:19 123:1 137:5 147:25	153:7 <b>forum</b> 166:1 <b>forward</b> 53:10 71:2 76:2 108:13,16 128:19 134:2 141:17 154:19 162:12 169:5 <b>foster</b> 61:16 62:10,11,12,15 62:17 63:10 64:4 65:3,4,5 67:1,2,12,24 71:9,12 72:6,8 72:21 73:23,24 74:11 75:19,21 84:24 <b>fostering</b> 169:8 <b>found</b> 8:17 11:12 21:20 27:17 44:2 47:23 51:8 53:16 56:9 58:24 73:23 74:4 76:11 83:23 98:2,14 130:22 139:1 <b>Foundation</b> 175:1 <b>founded</b> 174:7 <b>founder</b> 175:14 175:25 <b>four</b> 57:8 <b>four-year</b> 52:4 <b>four/five</b> 52:5 <b>framed</b> 128:16 128:16 165:1,4 <b>framework</b> 140:22 143:17 158:23 <b>frameworks</b> 140:19 <b>Frank</b> 140:25 141:1 142:10 142:15 170:3,4 <b>freaked</b> 29:15 <b>free</b> 89:11 141:2
--	---	---	--	---

<b>freedom</b> 12:3	<b>future</b> 128:21	110:2,12 120:1	47:19 67:7	14:22 16:6
<b>fresh</b> 85:21	144:21 152:8	124:3 134:15	83:3,24 86:2	22:3,7,8,10,14
<b>Fridays</b> 34:16	159:3	137:8,12,16	87:17 119:14	24:24 25:15
<b>friend</b> 24:19		145:10 146:2,4	<b>glad</b> 39:17	26:6,9,11
65:10 67:1,22		151:3 155:17	<b>glasses</b> 28:11	27:25 28:17
80:4,5	<b>G</b>	<b>Gibbons</b> 172:20	<b>glazed</b> 42:4	32:12 33:1,21
<b>friend's</b> 3:14	<b>gain</b> 92:10 93:1	172:25	<b>glazing</b> 4:6	33:24 34:4
72:19 76:24	93:2,23 96:5	<b>giggling</b> 28:19	<b>global</b> 98:23,25	35:4 36:10
<b>friendly</b> 65:4,4	109:8 113:17	<b>Gill</b> 172:20	<b>Glover</b> 149:6	40:14 41:15,17
<b>friends</b> 27:4,21	<b>gaining</b> 110:12	<b>ginnel</b> 58:1	<b>glue</b> 63:21	41:21 42:10
44:6 60:4 64:8	<b>gallery</b> 86:13	<b>girl</b> 13:10 15:8	<b>go</b> 1:4,23 8:19	44:14 46:1,1
65:4,5 72:17	<b>gang</b> 13:20 17:8	15:12,17,19,23	11:3,14,16	48:14 53:2
72:23 77:19,22	79:8 80:6	20:7 28:17	12:14,15 16:10	55:24 59:6
79:8,11 80:6	105:16	53:20 63:24	18:6,20,21	60:22 61:8,11
82:19,20	<b>gap</b> 118:6,9,9	80:4,4 166:14	23:17,25 25:1	61:24 62:3
<b>friends'</b> 58:9	<b>garbage</b> 50:2	<b>girls</b> 21:16 22:25	25:4 26:3,8	63:13 66:8
72:13	<b>garden</b> 12:9	23:4 26:2	27:1 29:25	68:13,18 69:16
<b>frightened</b>	58:3 66:15	35:17 36:1	32:3 35:24	69:19 72:21
79:15	67:5	39:19 52:1,6	36:5,9,16,21	74:3,5,9,14
<b>front</b> 4:25 5:1,5	<b>gathered</b> 171:25	149:18 165:19	36:21,24 38:17	75:9,24 76:2
5:6,23 23:7	<b>GBH</b> 4:13	173:7 174:10	38:24 41:9	77:1,12 79:15
58:5,22 65:22	<b>Gemma</b> 174:5	<b>give</b> 2:4,18 6:13	42:12 44:6	80:21,22,24
82:18 85:15	<b>gendered</b>	6:16 10:24	51:3 57:25	82:13,22 84:25
<b>front-line</b> 149:4	125:13	21:25 23:7	58:2,4,4 59:7	87:9 88:19
149:8 173:11	<b>genders</b> 166:11	45:16 49:18	60:20,21,22	89:14 94:14
<b>full</b> 9:3 21:10	<b>general</b> 71:23	68:2 79:13	62:20,25 63:1	95:3 99:18
49:15,16,19	<b>generally</b> 123:7	86:1 90:19	65:19 66:20,24	100:25 102:3
51:1 147:11	168:12	100:24 108:9	69:9 74:1,17	105:3 108:24
<b>fully</b> 102:8	<b>Generations</b>	119:15 123:16	75:5,12 78:23	109:4,10
128:24 143:1	144:21	124:3 125:21	80:10 83:7	110:16 113:12
<b>fun</b> 12:14	<b>genuinely</b> 30:21	125:22,22	85:16 87:15,16	114:12,14,20
<b>function</b> 42:10	<b>geographical</b>	128:1 147:18	87:25 89:14	115:7,9,11
42:17 44:5,7	3:19 55:23	148:10 172:8	91:19 112:25	121:16,25
<b>funded</b> 119:2	68:19,22	172:16	117:3 125:22	122:7,12
133:13	162:20	<b>given</b> 1:22 11:20	128:3 134:2	123:10 125:4,9
<b>funding</b> 133:16	<b>getting</b> 5:2,3 6:6	25:15 27:19	139:24 140:11	125:23 126:3,4
151:9	11:20 12:11	38:24 44:24	148:21 151:22	126:5,22
<b>funeral</b> 60:1	15:8,17 17:2	50:8 51:6,18	154:11 155:18	127:18 128:19
<b>furniture</b> 21:6	23:3 25:13	54:7 68:18	156:3,25	129:16 130:3
44:12	26:2,8,18,23	89:12 107:14	164:14 165:12	131:19 132:11
<b>further</b> 7:8	27:8,9 28:1	112:12 127:22	168:25	132:21,23
10:10 15:2,14	29:16,19 32:22	138:12 150:8	<b>God</b> 70:8	133:15 135:16
19:20 27:12	39:18,19 46:11	158:9 159:21	<b>goes</b> 93:17 107:8	136:4,18 137:9
96:1,9 156:13	46:13 48:11	165:16 166:20	113:20 156:11	137:16 140:3
162:24 164:14	50:6 52:2,5,21	169:20 170:14	157:21 171:13	142:17 143:14
170:11 171:23	75:2 85:21	<b>gives</b> 156:5	<b>going</b> 1:6,7 3:18	146:6,8 147:6
172:3 175:12	98:6 103:24	<b>giving</b> 20:23	4:8 11:10,19	149:20 150:24

160:5 168:24 169:15 <b>Goldcrest</b> 175:6 175:10 <b>good</b> 1:3,5,14 3:1 8:20 9:2 55:5 62:17 64:8 66:2,9 118:15 125:5 137:2 138:6 148:8 157:12 157:14 158:10 161:20,25 164:20 168:15 168:19 169:4 169:11,11,20 169:21 <b>gotten</b> 136:16 <b>Government</b> 103:15 138:21 <b>government's</b> 91:22,25 <b>grace</b> 31:6 <b>grandma</b> 6:2 <b>grandmother's</b> 6:1 <b>grass</b> 66:16 <b>grateful</b> 54:9 122:17 141:23 <b>greater</b> 166:21 166:22 174:21 <b>grips</b> 98:6 151:2 161:17 <b>groomed</b> 26:18 26:23 27:8,9 110:6 126:15 <b>groomer</b> 53:2,9 53:12,19 <b>grooming</b> 26:24 33:2 53:4,18 53:22 97:18,18 175:17 <b>ground</b> 152:11 <b>grounding</b> 148:8 <b>grounds</b> 10:17 <b>group</b> 64:4,6	77:18 90:21 93:9 94:21 105:16,17 141:11 149:3,4 172:22 174:13 <b>groups</b> 107:11 163:16 165:21 165:24 <b>growth</b> 148:22 <b>guess</b> 135:24 138:14 151:9 <b>guidance</b> 97:12 118:7 143:24 144:7,15 156:13 <b>guide</b> 155:25 156:12 <b>guilty</b> 51:8 <b>gun</b> 17:8 <b>guy</b> 13:22 29:5 <b>gym</b> 68:5,13 69:20 72:14 73:1	117:14 120:16 123:22 125:1 126:7,18,19 128:9,18 129:22 130:8 130:20,21 134:5,19 136:13 137:11 137:13,22 138:9 142:1 143:18 154:3 176:22 <b>hallmarks</b> 138:6 138:9,14 <b>hallway</b> 35:21 35:22 <b>hallways</b> 35:12 <b>halted</b> 151:8 <b>Hamlets</b> 173:16 <b>hand</b> 105:12 118:7,8 130:16 <b>handle</b> 61:23 62:7 <b>hands</b> 9:3 <b>happen</b> 12:15 72:3 87:13 99:22 100:1 123:15 128:25 129:1 131:9 140:3 <b>happened</b> 11:11 24:14,15 27:7 32:19,20 44:17 45:12,24 59:24 63:7,11 64:11 64:12 66:10 71:8 72:4 73:5 73:21 76:22,25 78:11 82:7 86:5 <b>happening</b> 6:20 10:4,19 24:23 61:18 67:18 77:5 78:5 122:13 139:2 163:24 170:19 170:24,24	<b>happens</b> 27:1 36:15 99:23 <b>happy</b> 46:13 142:1,4,9 <b>Haq</b> 175:24,25 <b>hard</b> 43:16 159:11 169:2 <b>harm</b> 77:5 96:20 98:13 103:10 105:5 106:9 110:11 111:21 113:17 116:16 116:19 117:11 119:22 124:12 124:20 125:3 132:4,5,10,13 132:17,18 133:5 144:10 146:6,8 <b>harmed</b> 106:16 155:1,4 160:20 171:7 <b>harmful</b> 129:9 <b>harming</b> 106:16 <b>harms</b> 134:24 135:11 <b>Harriet</b> 173:5 <b>hated</b> 19:25,25 <b>hating</b> 19:24,24 <b>head</b> 2:11 4:5 5:6,10,11 28:25 42:9 53:21 63:6 72:1 123:24 142:7 <b>headed</b> 132:1 <b>headline</b> 158:21 <b>headlines</b> 101:5 <b>health</b> 5:19 6:5 7:15 17:11,25 73:7 82:8 <b>Healthcare</b> 175:2 <b>healthy</b> 116:4 154:12 <b>hear</b> 1:6,7,14,25 2:12 3:18 55:5	102:3 104:19 114:6 131:20 147:5 <b>heard</b> 56:8 64:25 66:18,21 104:13 117:25 122:22 126:7 127:22 130:11 135:1,2 138:1 162:7,14 167:3 172:21 <b>hearing</b> 1:4 54:15,20 55:17 88:19 176:12 <b>hearings</b> 118:6 <b>hears</b> 136:20 <b>heart</b> 6:1 115:11 <b>heavy</b> 35:1 <b>heck</b> 21:1 29:8 <b>heightened</b> 122:1 <b>held</b> 59:10 <b>Helen</b> 88:19,21 176:21 <b>help</b> 1:23 6:2 7:19 14:19 16:5 17:19 19:16,19 31:3 31:15,16 41:11 42:22 51:17 56:21 70:9 71:3 76:1 81:23 83:8 87:5 99:23,25 100:6 112:20 113:16 114:1 124:19 146:5 149:22 151:12 162:2,24 164:23 <b>helped</b> 41:12,23 41:24,24,25 <b>helpful</b> 98:16 101:22 108:12 124:22 135:22 156:17 162:17 170:12
--	--	--	---	---

**H**

<b>helpfully</b> 107:2 128:18 129:2	79:21 82:18	173:22	35:5,10	99:9 100:8,16
<b>helping</b> 26:4 114:1 147:21 156:18 164:21	<b>hitting</b> 8:20 60:5 76:23	<b>honest</b> 17:18	<b>idea</b> 36:10 93:19 95:13 103:2 128:17 130:13 131:18 168:8	101:4,11 103:5 104:10 105:1 124:11 128:7 129:22,24
<b>helpline</b> 174:1	<b>hold</b> 15:4 80:13 138:17 140:15 140:22 146:3	<b>honour-based</b> 175:18	<b>idealised</b> 110:4	132:21,23
<b>helps</b> 38:21 77:13	<b>holding</b> 142:22 145:11	<b>hope</b> 14:14 132:2	<b>ideas</b> 102:23 116:7 127:6	133:21 144:6 150:16,20
<b>heroin</b> 56:10,16 56:17 59:10 79:25	<b>holistic</b> 95:21 96:11 129:16 132:17	<b>horrendous</b> 87:4 110:11,11	<b>identified</b> 126:22 135:19 149:2	162:3 163:6,7 163:16 168:4
<b>Hertfordshire</b> 174:2	<b>holistically</b> 132:12	<b>horrible</b> 20:5 22:13 49:21 66:5	<b>identify</b> 98:8 105:14 113:2 124:12,14,19 135:21 152:2	<b>importantly</b> 114:8 131:24
<b>hidden</b> 115:24	<b>home</b> 4:8 6:1,22 8:13,13,20,25 9:12 10:4,14 10:16,19,23,24 11:2,5,25 12:3 13:1,4,5,9,11 13:12,13,19,23 14:1,24 15:5,7 15:16 16:7,17 16:18 17:7,10 18:4,6,9,15,18 18:19 19:21 20:1,8,10,15 21:16 23:17,23 24:8 25:4,9,12 25:14,18,19 26:2 27:16,20 29:15,20,24 30:9 32:22 33:7,15,17 35:12,13 36:1 36:4,5,11,16 37:8 42:2 46:20 47:10 60:7 63:3 64:5 66:24,25 67:2 72:21 74:25 75:16 85:18 132:6,8,11 144:14 166:22 166:25 167:9	<b>horrific</b> 14:10	<b>improvement</b> 92:5 155:8 161:3,10 163:17 165:20 168:7,12	<b>impossible</b> 151:16
<b>hide</b> 57:22,24	<b>homeless</b> 17:5	<b>horse</b> 171:4	<b>imbalances</b> 93:10 102:8	<b>impression</b> 79:14
<b>high</b> 11:5 13:17 13:18 120:20 120:25 154:20 171:6 174:3	<b>homes</b> 14:8,9 21:5 166:24	<b>hospital</b> 6:4,7 17:15,15 18:23 29:13,14 42:17 44:20	<b>imagine</b> 127:7	<b>improve</b> 113:3 119:3 125:19 148:9 152:18
<b>high-profile</b> 174:19,24		<b>hostel</b> 3:4,10	<b>imbalances</b> 93:10 102:8	<b>improved</b> 118:4 118:17,18 119:20 141:20 159:2
<b>higher</b> 158:5		<b>hour</b> 61:8,9	<b>imbalances</b> 93:10 102:8	<b>improvements</b> 155:10 158:18 166:15,21 167:21 168:11
<b>highest-scoring</b> 121:13		<b>hours</b> 40:15 50:20 61:10 66:10	<b>imbalances</b> 93:10 102:8	<b>in-depth</b> 169:12
<b>highlight</b> 17:7 108:14 132:9		<b>house</b> 3:4,11 8:22,23,23 24:25 25:1 44:10,11 48:2 48:3 53:3,3,16 53:20 57:16 58:7,16,20 60:2,3 62:10 65:8 66:13,14 76:24 78:17 79:1,9,11,24 81:1	<b>imbalances</b> 93:10 102:8	<b>in-person</b> 172:12
<b>highlighted</b> 16:14 53:19		<b>household</b> 56:18	<b>imbalances</b> 93:10 102:8	<b>inability</b> 124:3
<b>highly</b> 85:14		<b>houses</b> 25:13 58:9	<b>imbalances</b> 93:10 102:8	<b>inadequate</b> 117:6
<b>Hill</b> 1:4,5,9,13 1:14 44:21 45:6,11 53:23 54:5,13 55:2,4 55:5 68:23 69:3,9,10 70:13,18,22 71:1,2 82:25 83:8 87:17 88:4,7,11 146:23 147:1,2 169:18 171:21 171:23 176:8 176:10,18,20		<b>hug</b> 18:24 19:4	<b>imbalances</b> 93:10 102:8	<b>inadvertently</b> 114:15,17 115:22 125:14
<b>history</b> 14:22 98:10 100:12 115:23		<b>Hull</b> 174:9	<b>imbalances</b> 93:10 102:8	<b>incident</b> 5:14 27:15 28:5 37:10,11 47:3 47:22 73:5
<b>hit</b> 5:6,10 28:25		<b>hurt</b> 30:18,19	<b>imbalances</b> 93:10 102:8	<b>incidents</b> 4:4,5,9 38:5 71:16
		<b>hurting</b> 75:6	<b>imbalances</b> 93:10 102:8	
		<b>I</b>	<b>imbalances</b> 93:10 102:8	
		<b>Ian</b> 107:2	<b>imbalances</b> 93:10 102:8	
		<b>ID</b> 33:22 34:5	<b>imbalances</b> 93:10 102:8	

136:9 <b>include</b> 145:17 147:24 <b>included</b> 134:22 141:12 152:11 163:13 <b>includes</b> 93:1,23 109:8 156:19 173:8 176:1 <b>including</b> 50:14 51:9 97:22 158:10 173:8 173:16,20 <b>inconsistency</b> 151:17 <b>incorporate</b> 102:4 152:9 163:15 164:4 <b>incorrectly</b> 150:11 <b>increase</b> 136:7,9 147:21 <b>increased</b> 93:15 93:20 136:8 <b>incurring</b> 132:13 <b>independent</b> 138:17 168:9 173:19,21 <b>indicate</b> 83:9 122:13 125:8,9 <b>indicated</b> 171:24 172:10 173:3 <b>indicates</b> 55:20 <b>indicator</b> 125:3 <b>indicators</b> 115:20,20 121:15 122:6 129:14 <b>indigenous</b> 155:14 <b>individual</b> 90:22 93:9 94:21 133:5 138:15 138:16 <b>individuals</b>	83:19 157:24 165:7 <b>induce</b> 82:2 <b>inevitability</b> 137:23 <b>influence</b> 23:24 <b>influences</b> 114:3 <b>informal</b> 149:3 <b>information</b> 2:18 53:17 141:23 148:10 149:9,13,15 152:5,6,9,12 152:14,19 164:12 <b>informed</b> 71:21 73:7 <b>inherently</b> 115:3 <b>initiating</b> 110:23 <b>initiatives</b> 133:12 <b>injustice</b> 164:6 <b>innocence</b> 127:6 <b>innovative</b> 133:12 169:14 <b>INQ005149</b> 147:9 <b>INQ005149_009</b> 158:13 <b>INQ005149_013</b> 161:1 <b>INQ005149_016</b> 163:9 <b>INQ005149_023</b> 165:15 <b>INQ005149_025</b> 167:15 <b>INQ005150</b> 88:23 <b>INQ005170_013</b> 107:3 <b>INQ005276</b> 1:17 <b>INQ005277</b> 51:22 <b>INQ005317</b> 155:22 <b>INQ005320</b>	147:10 164:1 <b>INQ005373</b> 107:1 <b>INQ005852</b> 55:9 <b>INQ006087</b> 89:3 <b>INQ006185_006</b> 160:11 <b>INQ006185_014</b> 126:9 <b>inquiry</b> 1:16 51:18 54:11 55:8 87:18,24 88:22 98:11 104:19 116:15 122:21 126:8 131:19 137:23 139:14 147:8 171:25 <b>inquiry's</b> 118:6 172:10,13 176:6 <b>inside</b> 5:9,10 33:15 <b>insist</b> 116:12 <b>insisted</b> 100:2 <b>insomnia</b> 82:1 <b>inspection</b> 140:19 <b>inspections</b> 173:22 <b>inspector</b> 175:7 175:9 <b>instance</b> 42:7 <b>instances</b> 4:5 9:25 13:18,25 <b>instantly</b> 141:25 <b>institution</b> 138:7 <b>institutional</b> 112:7,25 <b>institutions</b> 16:15 134:14 137:24,24 <b>intangible</b> 93:2 <b>intelligence</b> 149:14,16 <b>intended</b> 175:15 <b>intention</b> 172:2	<b>intentions</b> 119:21 <b>interacted</b> 52:3 <b>interaction</b> 107:10 168:19 <b>interconnect</b> 133:1 <b>interconnected</b> 116:24 129:18 <b>intercourse</b> 64:23 68:9 72:11,22 <b>interested</b> 48:9 63:10,12 102:25 138:5 <b>interesting</b> 109:19 119:1 148:23 154:3 170:10 <b>Interestingly</b> 118:21 <b>international</b> 89:19 141:19 <b>interplay</b> 108:1 <b>interpret</b> 95:23 115:3 <b>interpretations</b> 129:14 <b>interrupt</b> 48:20 93:4 <b>intervened</b> 7:13 32:11,17 <b>intervening</b> 5:2 <b>Interview</b> 167:9 <b>interviews</b> 9:1 166:22,25 173:20 <b>intimidated</b> 86:4 <b>intolerance</b> 115:2 <b>intoxicated</b> 42:3 <b>introduce</b> 109:21 <b>introduced</b> 77:19 92:6 102:21	<b>investigate</b> 32:7 45:21 <b>investigated</b> 10:9 83:14 <b>investigating</b> 45:23,25 47:21 174:18,23 <b>investigation</b> 35:14 48:18 71:19 83:11 147:13 150:7 158:12 172:1 175:9 <b>investigations</b> 138:2 <b>invite</b> 54:16 <b>invited</b> 54:19 <b>invoked</b> 116:7 <b>involved</b> 7:1,6 46:25 81:22 117:16 127:10 128:4,5 131:15 148:17 152:3 <b>involvement</b> 10:3 <b>involves</b> 91:23 99:5 104:9 <b>involving</b> 37:12 100:20 <b>Ireland</b> 109:22 <b>isolated</b> 18:3 <b>isolating</b> 15:12 15:14 <b>issue</b> 9:5 15:11 83:2 89:14 90:10,12 117:2 118:13 120:4,5 120:21 134:1 149:1,24 151:2 153:18,21 160:7,13 162:13 165:23 168:18 <b>issue-based</b> 135:13,13 <b>issues</b> 6:4 10:1 11:6 14:24,25
--	---	--	--	--

17:8,16 69:1 76:16 85:1,7 97:12,13,16 100:6 120:16 144:14 147:16 147:22 156:8 156:12 160:23 164:25	160:7,17 <b>kick</b> 82:18 <b>kicked</b> 50:6 81:7 <b>kidnap</b> 3:8 79:8 <b>kids</b> 24:10 <b>kill</b> 4:8,10 5:22 <b>kind</b> 12:13 18:7 29:22 33:8 41:19 48:11 57:11 59:9,10 59:21 64:21 79:21 84:6 86:9 103:6 106:11 114:24 117:22 118:24 125:13 127:6 129:13 133:12 133:19 135:16 139:22 140:21 144:11 146:4 151:12 153:24 157:21 159:25 <b>kinds</b> 101:20 104:5 131:10 <b>kissing</b> 65:24 <b>knew</b> 7:24 8:9,9 11:19 13:10 15:11 22:6 23:6,9 25:14 28:1 41:17,20 62:2 63:24 74:3,23 166:3 <b>knife</b> 17:9 37:12 37:13,16 <b>knives</b> 4:7 <b>knock-on</b> 114:5 <b>knocked</b> 24:4 <b>knocking</b> 5:7 57:18 <b>know</b> 2:1,6,13 3:18 19:14 26:24 27:24 28:9,11 29:3 29:11 32:24 36:18,19 40:17 46:2 51:25 52:1,3 53:11	55:15,18,22 56:9 57:4,10 57:13 58:12,14 59:3,12 60:10 61:2,7 62:2 63:4,6,9,10,13 64:7,8,9,15 65:13 66:1,2,2 66:5,6 67:4,6 67:13,13,14,16 70:13 72:6 74:19 75:24 76:14,17 77:1 77:7 78:5,16 79:4 80:22 82:13,17 85:12 85:18 86:13 87:24 88:8 89:16 95:24 96:8 103:23 108:17 111:19 118:15 119:8 122:18,24 123:22 124:15 127:17 129:5 130:2 131:5 134:14 136:17 142:7 143:13 147:6 154:4,12 154:21 157:15 159:14 163:18 <b>knowing</b> 36:4,24 41:15 74:24 167:6 <b>knowledge</b> 1:18 35:16 88:24 89:4 160:10 <b>known</b> 11:6 25:4 25:7,7 53:2,6,8 53:12,19 72:16 108:20 148:16 154:9 173:13 <b>Kooner</b> 175:13 175:14	<b>labelled</b> 164:14 <b>labelling</b> 95:20 146:1 <b>labour</b> 153:9 <b>lack</b> 90:15 91:6 91:14 118:23 118:24 126:11 126:13,16 144:12 160:7,9 <b>lacking</b> 18:15 20:17 67:21 118:3 <b>laid</b> 30:24 <b>language</b> 8:24 96:2 112:24 113:14 114:2,4 114:13,15,22 118:14 121:22 122:8 125:13 145:19 155:2,3 159:24 160:1 160:17 <b>large</b> 83:15 86:17 149:17 <b>large-scale</b> 97:9 <b>largely</b> 141:10 <b>lashed</b> 38:3 <b>late</b> 61:10 <b>latest</b> 153:24 <b>laugh</b> 79:22 <b>laughing</b> 28:19 <b>law</b> 150:12 <b>layer</b> 95:20 124:4 146:5 <b>lead</b> 155:20 156:8 161:9,15 168:11 <b>leadership</b> 132:1 <b>leading</b> 112:8 <b>leads</b> 111:4 112:15 145:7 175:6,11 <b>learn</b> 5:25 41:12 118:24 131:10 155:9 167:11 168:25	<b>learning</b> 7:20,21 136:14 140:12 140:13 148:4 168:23 <b>learnt</b> 158:23 <b>leave</b> 8:13 11:15 11:23 14:6 25:10 36:2,4 54:15 75:14 80:3,11 115:6 <b>leaving</b> 14:1 36:16 43:2,6,8 74:25 <b>lecturer</b> 90:7 <b>led</b> 5:19 6:6 7:4 48:17 58:1 149:16 <b>LEEK</b> 1:8 <b>left</b> 8:15 12:12 15:16 21:16 31:16 32:22,23 36:5 37:18 39:10 60:3 61:12 80:7 <b>legal</b> 49:14 50:16 156:7 <b>legislation</b> 146:4 155:16,18 156:20 <b>legs</b> 40:11 <b>lengthy</b> 51:6 <b>lenience</b> 38:9 <b>let's</b> 69:20 116:25 119:16 <b>letting</b> 11:14 34:1 35:17 <b>level</b> 7:24 129:10 134:13 158:20 170:25 <b>Lewis</b> 175:19 <b>LGBTQ</b> 160:23 165:21 <b>liaise</b> 145:3 <b>liar</b> 9:11 30:4 <b>lie</b> 66:15,17 <b>lied</b> 84:17 <b>life</b> 7:2 17:12
<b>J</b>				
<b>Jamie</b> 173:17 <b>January</b> 49:17 <b>Jo</b> 173:23 <b>job</b> 21:7 46:25 <b>joke</b> 79:21 <b>Jon</b> 174:17 <b>journey</b> 148:18 155:12 <b>joy</b> 119:4 <b>judge</b> 50:11,12 50:13 84:10 <b>judges</b> 37:24 <b>juice</b> 28:9 29:22 <b>Julia</b> 127:13 <b>July</b> 3:25 49:8 <b>jump</b> 25:11 <b>justice</b> 118:1 119:12 132:2 155:20 173:6				
<b>K</b>				
<b>Kaur</b> 175:13 <b>keep</b> 2:11 35:1 36:13 54:18 78:24 116:18 116:20 152:20 157:2 <b>keeping</b> 79:14 130:23 <b>Kemp</b> 175:2 <b>kept</b> 31:24 40:22 40:23,25 60:25 61:3 62:23 82:11 <b>key</b> 69:17 91:20 97:4,12 129:2 138:9 147:13				
	<b>L</b>			
	<b>label</b> 145:20			

19:25 20:17	16:5 18:2	111:11 133:17	156:25 158:15	<b>lots</b> 64:9 94:5
21:4 32:24	21:21 25:25	134:4 137:1	<b>looked</b> 9:6,17	122:22
33:9 39:16	30:6 44:11	138:18,20	23:15 80:18	<b>lottery</b> 157:5
43:8 48:11	47:18 56:6	157:8,8,15	92:14 123:5	158:2,7 167:12
67:21 133:1	57:9 62:3 71:3	160:8 161:13	126:20 162:4	<b>love</b> 18:11 67:19
137:15	76:3 131:18	166:23 167:3,6	<b>looked-after</b>	<b>loved</b> 20:25 68:8
<b>lifestyle</b> 110:18	148:10,13	<b>localities</b> 134:16	166:24 167:1	70:1
113:15	152:23 159:20	<b>locally</b> 150:17	<b>looking</b> 21:13	<b>loves</b> 21:13
<b>lift</b> 65:21	<b>live</b> 61:20,22	151:10,14,14	22:21 39:3	<b>lowest</b> 16:18
<b>light</b> 44:24	78:12	<b>located</b> 17:7	43:3,7 67:17	<b>luck</b> 9:2
<b>likewise</b> 142:6	<b>lived</b> 16:21 26:2	<b>locating</b> 116:19	73:16 92:21	<b>Luckily</b> 74:14
<b>liking</b> 65:13	33:7 60:7	117:11	95:1 98:7	<b>lucky</b> 81:16
<b>limit</b> 15:3	61:25 65:2	<b>location</b> 15:3	107:19 125:13	<b>lulled</b> 32:15
<b>limited</b> 101:2	66:14 67:12	16:9 130:14	128:10 129:9	<b>lunch</b> 88:8
163:23 164:18	73:12 76:13,24	<b>locked</b> 79:10	132:3 133:14	
175:2	78:12	<b>locking</b> 8:23	139:14 144:9	<b>M</b>
<b>limiting</b> 127:4	<b>liver</b> 44:2,4,7,8	<b>London</b> 124:16	145:13 146:2	<b>Maggie</b> 174:25
<b>Lincolnshire</b>	44:15	<b>long</b> 5:15 13:5	147:14 153:5	<b>magnetic</b> 11:7
152:1	<b>lives</b> 99:19 111:2	43:12 47:1	153:25 161:14	<b>magnets</b> 36:3,20
<b>lines</b> 8:11 22:13	136:16,22	51:7 59:16	162:6,12,22	<b>magnified</b>
35:2 51:19	<b>living</b> 3:4 53:14	63:5 83:13	163:5,7,8	143:12
105:16 147:25	60:21 65:3	86:25 90:1	169:15 170:23	<b>main</b> 41:20
153:20,23,24	73:10 74:5	98:10 103:24	<b>looks</b> 109:16	<b>maintain</b> 96:21
166:16,18	75:20 76:20	118:12 148:18	149:25 152:7	<b>maintained</b>
<b>linked</b> 68:18,22	80:15	148:20,21	<b>loopholes</b> 49:14	131:14
91:14 125:5	<b>Livingston</b>	155:12 156:10	50:16	<b>majority</b> 18:8
<b>linking</b> 92:8	88:17,18,22	<b>long-term</b> 11:2	<b>lose</b> 46:24	<b>makeup</b> 36:22
<b>links</b> 41:18	89:2,6,8,9,23	11:3 14:21	157:20,25	40:8 80:17
120:15	90:1,6,12	<b>longer</b> 75:17	<b>loses</b> 161:23	<b>making</b> 75:11
<b>lips</b> 37:20	91:19 93:4	<b>longer-term</b>	<b>lost</b> 11:25 39:14	76:14 87:3
<b>list</b> 1:22 2:7	95:11 96:23	140:16	153:12	97:6 102:17
51:25 55:12	100:25 101:25	<b>look</b> 6:3 20:13	<b>lot</b> 2:20,21 5:22	105:9 110:18
125:22 129:13	103:11,17	21:8 31:13	6:3 7:13 17:13	113:21,21,24
147:7 155:24	104:13 105:12	46:7 57:23	21:2,9 24:22	130:3 136:12
156:5 172:5,18	106:22 111:3	66:3,25 92:12	34:12,15,23,24	137:15,17
<b>listed</b> 9:21	112:21 115:14	94:13 95:4	48:7 58:15	139:9 143:2,7
<b>listened</b> 127:18	117:13,24	96:11 107:2	59:14 60:9	151:23 153:8
127:21	120:3 121:4,8	115:5 116:23	63:7 71:12	<b>Malcolm</b> 142:11
<b>listening</b> 148:18	122:14,17	119:3 120:24	76:14,18	142:12 145:1
154:2	124:6 126:4	121:2,15	113:11,13	146:9 170:5,6
<b>literally</b> 30:24	128:9 130:7	125:10 126:2	115:1 116:1,3	170:9 171:3,16
35:9 39:6 41:1	131:17 133:7	129:20,24	120:17 122:19	<b>male</b> 77:19
42:19 50:4	134:5,8 146:11	131:2 132:21	123:8 128:13	78:15 79:18
<b>litigation</b> 173:9	146:18 176:23	132:23,25	129:5 133:9	80:5 165:14,23
<b>little</b> 2:18 3:22	<b>loads</b> 128:14	134:25 137:1	140:7 142:2	<b>males</b> 11:19
4:24 5:20,24	<b>local</b> 76:4 90:18	146:5 148:6	143:20 151:4	14:2 15:18
10:25 12:7	91:2 95:15	153:24 155:23	154:9	21:18,19 29:17

29:18 46:12	50:12 53:6	123:5 134:9	29:18	<b>mistake</b> 1:10
83:16 125:15	56:8 84:1,4	159:10 163:13	<b>midnight</b> 27:17	<b>mistakes</b> 9:24
127:9	98:2 112:1	169:24	<b>mind</b> 36:11	<b>mistrial</b> 49:15
<b>man</b> 3:13 22:7,8	113:19 116:8	<b>memory</b> 166:8	39:10 64:13	50:25
26:3,13 34:5	117:8,8 119:24	<b>men</b> 20:13,22,25	82:16 134:12	<b>misunderstood</b>
37:11 53:11	119:25 127:7,9	21:17 22:14	137:22 141:8	63:15
59:2 67:19	131:24 164:25	23:20 24:23	141:22 154:16	<b>mixed</b> 28:12,13
68:5 69:22	171:6	25:15,21 26:6	<b>minds</b> 40:16,17	36:14 62:22
79:18 82:9	<b>meaning</b> 127:14	27:1,3,5,10	<b>mine</b> 100:19	<b>mixture</b> 31:2
121:14	<b>meaningful</b>	28:3,7 29:21	<b>minimising</b>	<b>mnemonic</b>
<b>man's</b> 27:17	140:9,16	32:3 41:16	103:10 139:23	124:16,25
82:22	<b>means</b> 46:25	46:23 47:17	<b>Minister</b> 174:14	<b>model</b> 100:9
<b>manage</b> 43:20	94:5,9,13	51:5 52:25	<b>minoritised</b>	104:23 108:4
87:16 154:11	95:23 96:21	71:17 72:10	160:11	133:24 137:5
<b>managed</b> 20:17	100:6 101:6	77:16,18,22	<b>minority</b> 126:11	150:13
40:3 48:1	105:25 110:16	78:2 79:10	160:25 175:22	<b>models</b> 150:10
49:14 80:13	136:8	81:8,8,14	<b>minute</b> 125:20	150:14
<b>management</b>	<b>meant</b> 17:25	84:17 149:19	126:6 133:20	<b>modern</b> 147:24
16:22 150:12	35:20,20,21	149:19,20	146:1	<b>moment</b> 44:10
<b>manager</b> 175:4	36:6 39:3	166:1,2,17	<b>minutes</b> 35:23	44:21 68:16
<b>managing</b>	49:22 170:15	<b>mental</b> 5:19 6:5	45:3 50:19	82:25 138:11
138:25	<b>measure</b> 136:23	6:7 7:15 10:8	54:17 76:24	144:4 153:14
<b>Manchester</b>	<b>measured</b> 133:9	17:11,25 32:18	172:7	163:5 169:17
174:21	133:10	44:20	<b>minutes'</b> 45:17	<b>money</b> 13:23
<b>manifestations</b>	<b>measures</b>	<b>mentally</b> 13:10	83:4	16:23 17:1
108:4 145:23	132:14 136:17	24:10	<b>mirror</b> 31:10	40:4 58:12
<b>manipulate</b>	165:10	<b>mention</b> 91:19	38:6,8	123:24
20:19 93:10	<b>measuring</b>	<b>mentioned</b> 41:4	<b>misanswer</b>	<b>monitor</b> 35:12
<b>manipulated</b>	136:12	45:13 53:12,13	145:8	35:22
110:7	<b>media</b> 139:12	53:13 69:21	<b>misbehave</b>	<b>monitored</b> 36:8
<b>Mannion</b> 173:12	149:24 168:17	164:10	62:21	<b>month</b> 4:4
<b>mantra</b> 117:3	<b>medical</b> 8:4 31:3	<b>merely</b> 141:6	<b>misbehaved</b>	<b>months</b> 6:8 13:6
<b>March</b> 106:23	31:15,16 42:22	<b>message</b> 116:17	62:19	13:7 62:14
<b>Margaret</b>	<b>medication</b> 6:5	154:23 155:17	<b>misleading</b>	96:10
174:21	<b>meet</b> 71:24	<b>messages</b> 127:21	102:7	<b>moral</b> 57:4
<b>marks</b> 37:21	102:11 139:24	<b>met</b> 3:5,12,24	<b>misquoting</b>	<b>MoRiLE</b> 150:12
64:9	<b>meeting</b> 26:12	20:7 52:3,6	137:13	151:5
<b>matter</b> 12:24	<b>meetings</b> 52:14	57:7 59:2 68:5	<b>missed</b> 32:7	<b>morning</b> 1:3,5,5
38:9 39:19	52:16,17,18,19	69:22 75:19	59:14 86:20	1:14 24:9
69:5 134:18	52:22 53:8	110:12 128:2	<b>missing</b> 14:23	74:10 117:25
150:1 171:23	104:21	<b>methods</b> 172:10	22:3 24:18	146:13
<b>mattered</b> 39:16	<b>member</b> 15:9	<b>Metropolitan</b>	25:3 32:4 46:1	<b>mother</b> 7:7
39:17	27:24 174:11	174:17	46:3,5,8 73:22	10:17 45:23
<b>matters</b> 99:7	<b>members</b> 13:20	<b>mid</b> 60:9	78:13 163:4	48:3 71:5,13
<b>MBE</b> 146:23,24	14:19 18:6	<b>mid-morning</b>	167:1 173:23	73:11
176:24	19:12 53:24	45:5,7	173:25,25	<b>mother's</b> 38:15
<b>mean</b> 18:2 19:14	54:3 87:20	<b>middle</b> 14:5	174:3	57:1 59:23



<p><b>motion</b> 14:9  <b>Mountain</b> 175:2  <b>mouth</b> 34:14  <b>move</b> 38:21              45:14 48:13              56:20 59:23              67:15 96:13              102:22 104:1              104:24 116:22              117:10 129:13              129:15 135:12              142:18 143:3              153:23 159:18  <b>moved</b> 56:21              57:5,8,12              62:14 67:13,14              74:7 76:11,12              104:20,22              115:23 143:13              148:20  <b>movement</b>              157:18  <b>moves</b> 96:9              135:6  <b>moving</b> 15:3              28:22 73:10              83:2 103:13              108:12 120:3              122:17 130:16              130:18 136:19              136:22 139:21              140:4  <b>MP</b> 174:11  <b>MPS004286_0...</b>              124:7  <b>multiple</b> 7:1              16:14 17:14,15              33:18 50:13              52:15 53:16              106:8,15 174:4  <b>mum</b> 2:19 3:5,9              3:11 4:15,22              4:25 5:19 6:4              6:10 7:22,25              8:23 9:4,7              33:18,24 34:3              46:9,16,20</p>	<p>47:11 52:15              53:13 56:17              57:6 58:11              59:2,6 60:11              60:13,17,19              61:1,7 62:2,19              62:20 63:1,2              73:12 74:5,9              74:11 75:4,15              75:15 76:8,13              76:16,21,22              77:8 78:12              79:4,25,25  <b>mum's</b> 60:4,6,8              75:8 76:20              77:3,9  <b>mummy</b> 4:8  <b>murder</b> 4:13</p> <hr/> <p style="text-align: center;"><b>N</b></p> <hr/> <p><b>N</b> 176:16  <b>name</b> 44:15,24              47:24 68:17              70:6,7,11,12              116:8 174:6  <b>names</b> 52:1  <b>Narinder</b>              175:12  <b>narrative</b> 148:1              162:18,22              166:12 168:22  <b>narratives</b> 131:5  <b>narrow</b> 97:20  <b>narrowed</b> 92:9  <b>narrower</b> 96:6  <b>narrowing</b>              97:21  <b>nasty</b> 75:5  <b>national</b> 151:21              151:21,22              155:15 158:20              158:23,24              172:6 173:17              173:23 174:1  <b>nationally</b>              150:17  <b>nature</b> 33:6 37:3</p>	<p>96:19  <b>naughty</b> 9:16,19  <b>Naylor</b> 102:2  <b>near</b> 3:25 4:17              24:7 29:15,20              41:11 56:25              65:8 69:20              72:25 76:13              141:17  <b>nearing</b> 43:10  <b>nearly</b> 90:4  <b>necessarily</b> 21:1              30:17 39:12              106:19 111:20              125:8,10 136:9              152:14  <b>necessary</b>              162:11  <b>need</b> 8:4 31:14              37:5 38:24              44:22 54:14              55:22 61:7              89:15 94:12,14              94:24 95:4              96:21 98:18              99:23 100:13              100:19 105:6              105:10 106:11              109:8 110:2,8              110:12,20,24              111:16,25              112:4 114:18              116:2,21              117:10,20,20              119:23 120:11              121:2 123:14              123:23,24              124:1 125:11              125:18,22              126:10 127:15              128:2,7,19              129:13,15              130:1,3 132:25              135:12 137:10              137:10 140:19              143:15 144:24              153:23 157:1</p>	<p>158:19,22              160:12,23              161:4 167:23  <b>needed</b> 6:2              18:25 33:9              60:20 87:5              149:14,25  <b>needing</b> 20:18              123:21,23  <b>needs</b> 13:12 92:3              93:13 99:9,14              104:18 105:3,8              106:7,14              109:24 110:15              112:7 128:25              134:22 135:15              139:5,17              140:18 144:13              144:17 151:15              152:8 154:10              160:10,22              163:19 165:1,3  <b>negative</b> 93:2              129:7 130:16              143:3  <b>negatively</b>              145:10  <b>neighbour</b> 38:16              60:14 64:18  <b>neighbour's</b> 5:7  <b>neighbours</b>              141:17  <b>neither</b> 32:17  <b>network</b> 147:2              175:13,15  <b>networks</b>              107:11  <b>neutral</b> 101:19  <b>never</b> 9:5,17              18:17 22:24              23:4,9,14,15              26:5,9 34:20              35:5 36:4,8              41:4,5,7,7,8,9              48:5,10 52:19              52:22,23 53:4              53:15,17 57:7</p>	<p>60:23 115:7              121:9 154:5  <b>new</b> 4:1 59:23              60:6 106:25              143:24 144:7              144:15 145:20              156:17 169:13  <b>Newcastle</b> 169:6              175:20  <b>news</b> 48:14              85:15  <b>NGOs</b> 152:9  <b>nice</b> 65:14 82:21  <b>night</b> 28:3 35:21              65:6 66:7              78:20  <b>nightclubs</b>              33:21 35:1,15              35:15 36:16  <b>nightmares</b> 82:1  <b>nine</b> 107:6,17              149:19  <b>no'</b> 171:12  <b>no-one</b> 5:8 12:10              17:21 18:4,5              31:16 32:14              41:2 44:15  <b>noises</b> 66:21  <b>non-abusing</b>              130:5  <b>non-emergency</b>              25:2  <b>nonfamilial</b> 91:1  <b>normal</b> 3:2 22:1              25:24 26:10,11              26:12 32:24              44:13 46:4  <b>normalised</b>              21:11  <b>normally</b> 23:1  <b>Northern</b>              109:22  <b>nose</b> 37:21  <b>notable</b> 158:10  <b>note</b> 93:1 109:3  <b>noted</b> 125:24  <b>notes</b> 52:11</p>
---	--	--	--	---

<b>nothing'd</b> 12:15	112:11	174:17,22	57:21	<b>organised</b>
<b>notice</b> 17:20	<b>obvious</b> 109:14	<b>officers</b> 34:21,23	<b>opened</b> 27:22	105:17
<b>noticed</b> 64:9	136:5	45:20 47:21	31:11 48:12	<b>original</b> 61:25
95:17	<b>obviously</b> 6:19	57:18	<b>opening</b> 130:12	76:12 84:1
<b>noticing</b> 12:18	21:25 42:3	<b>official</b> 108:25	171:25	<b>originally</b> 63:2,8
<b>November</b>	66:2,25 75:23	<b>offline</b> 94:22	<b>opens</b> 133:2	<b>other's</b> 36:5,7,9
174:12	77:8 86:3 88:7	<b>Ofsted</b> 16:17,18	135:7	<b>others'</b> 100:19
<b>NSPCC</b> 173:12	101:17 122:2	<b>Oh</b> 9:19 15:10	<b>Operation</b> 149:6	<b>out-of-area</b>
<b>nuance</b> 110:25	141:6 148:11	23:2 26:9 27:6	149:13,17	130:9
<b>nuanced</b> 113:10	159:23 162:7	28:13 70:8	150:3,4 151:7	<b>out-of-control</b>
136:18	<b>occasion</b> 28:2,6	155:12	152:22	9:11,15
<b>nub</b> 109:5 110:4	34:8 39:25	<b>okay</b> 27:21	<b>operational</b>	<b>out-of-county</b>
<b>number</b> 6:1 25:2	64:24 79:10	63:17 65:9	158:24	130:25
25:19 47:25	<b>occasions</b> 6:10	66:1 82:15	<b>operationalise</b>	<b>outcast</b> 63:4
71:22 80:13,14	19:1 31:17	<b>old</b> 3:13,13 8:12	95:16	<b>outcome</b> 131:1
81:5,19 83:16	33:18 37:1	23:6,9,12	<b>operationalising</b>	<b>outcomes</b>
86:17 97:7	49:18 68:10	26:14 39:10	91:9	131:12 134:17
107:20 120:6,8	78:4,9 79:7	44:14 59:19	<b>operations</b>	136:23
124:23 126:21	81:5,19 86:18	<b>older</b> 11:19	149:12	<b>outdated</b> 124:24
135:11 172:25	<b>occur</b> 100:21	15:18 21:18,19	<b>opportunities</b>	<b>outfit</b> 26:4
<b>numbers</b> 46:21	104:5 139:11	27:17 28:3	32:7,10 86:19	<b>outfits</b> 41:12
111:17,20	<b>occurred</b> 115:23	37:11 57:6	<b>opposite</b> 102:22	<b>outlined</b> 103:12
134:25	<b>occurring</b> 97:19	78:14,15 79:18	<b>option</b> 100:23	108:7 110:21
<b>numerical</b> 136:5	99:8 100:15	<b>Oliver</b> 174:21	<b>options</b> 155:25	<b>outside</b> 5:7 7:16
<b>Numerous</b>	106:9 132:20	174:25	156:8	7:19,19 14:2
81:22	132:22	<b>omission</b> 109:3	<b>oral</b> 78:2	25:18 28:1
<b>nurse</b> 175:3	<b>occurs</b> 93:9 99:4	109:14 110:24	<b>orange</b> 28:9	34:21 40:5
<b>NWG</b> 147:2,19	105:15 132:18	<b>omissions</b>	29:22	46:20 85:21
149:3 157:11	132:18	108:15	<b>order</b> 1:23 2:7	106:10 132:6
159:23 162:9	<b>offences</b> 32:7	<b>once</b> 4:18 12:14	4:18 44:25	132:10,19
165:17 166:23	96:3,3 142:24	23:9 34:20	45:4,6 61:19	167:4
<b>NWG's</b> 163:11	145:14,18,23	35:5 46:1	68:24 69:15	<b>overall</b> 32:8
	145:25 146:7	53:15	70:16,19 84:18	<b>overdoses</b> 17:13
	148:20	<b>one's</b> 28:16	141:18 149:15	<b>overdosing</b> 42:8
	<b>offenders</b> 5:17	<b>one-off</b> 15:18	<b>orders</b> 156:19	<b>overemphasise</b>
<b>o'clock</b> 36:20	102:9 127:11	94:20	<b>organisation</b>	110:13
<b>O'Connell</b>	150:21 153:3	<b>one-to-one</b>	139:4,23 149:9	<b>overlap</b> 108:1
127:13	154:10	174:8	160:3 175:21	<b>overlapping</b>
<b>Oakwood</b> 175:3	<b>offending</b>	<b>ones</b> 28:11 52:2	176:1	106:8
175:4	106:25 157:1	<b>ongoing</b> 94:20	<b>organisation's</b>	<b>overrepresent...</b>
<b>oats</b> 166:11	<b>offer</b> 20:18	133:19	70:12	163:20 166:16
<b>oblique</b> 98:6	<b>offering</b> 33:22	<b>online</b> 94:21	<b>organisational</b>	<b>overweight</b> 82:3
<b>obliterate</b>	<b>office</b> 30:6	107:10 116:15	161:5	<b>owned</b> 21:18
135:23	<b>officer</b> 22:10	<b>onwards</b> 28:5	<b>organisations</b>	<b>Oxford</b> 150:4
<b>obscuring</b> 97:24	31:8,11,12,15	158:22	139:8 157:19	
97:24	40:18 46:11	<b>open</b> 7:23 23:7	157:19 161:14	
<b>observed</b> 112:24	47:9 124:14	35:16 36:23	162:25 168:24	
<b>obsession</b>				
				<b>P</b>
				<b>package</b> 21:12

168:3	172:22,24	<b>partners</b> 133:2,3	98:4,13,14	173:23,25,25
<b>paedophile</b> 39:8	<b>park</b> 24:7,8,11	<b>partnership</b>	99:5,16,21,23	<b>people's</b> 25:11
<b>page</b> 90:14	25:17 109:10	167:16,22	99:24 100:7,17	90:3 92:18
107:8 156:4,11	<b>parked</b> 14:2	175:8	100:20 101:13	97:25 98:10,15
158:16,22	<b>parliament</b>	<b>partnerships</b>	101:15,21	99:10 100:10
168:5	174:11	156:21,21	102:16,19	103:7 110:9
<b>paid</b> 4:18 17:5	<b>Parliamentary</b>	167:18 168:1	103:3,8 104:7	111:2 127:2
17:21 18:5	174:13	<b>parts</b> 55:11	104:9,10 105:3	131:5 158:5
21:4 58:11,14	<b>part</b> 3:19 18:14	69:17 158:9	106:5 108:8,18	<b>perceived</b> 116:6
<b>panel</b> 1:5,21	21:6,12 38:17	169:18 173:2,3	108:23 110:2,7	126:24 154:8
53:24 54:3,6	38:18 93:6	<b>party</b> 67:4	110:22 111:1	<b>perception</b>
55:9,24 83:22	94:3 99:14,17	174:13	112:9,12	11:17
87:19,20,23	103:25 104:1	<b>pass</b> 46:22	113:14 114:1,6	<b>perfect</b> 169:13
134:7,9,11	107:23 112:14	<b>passage</b> 14:3	114:8,18 115:5	<b>performance</b>
158:21 169:22	112:14 117:18	<b>passed</b> 28:8,15	115:12,21	138:3 168:7,12
169:24 170:8	124:16 143:18	28:15,16,24	116:4,5,6,8,9	<b>period</b> 10:12
176:23 177:1	145:12 148:1	59:21 60:2	117:17 119:2,5	39:24 41:23
<b>panic</b> 50:1	148:19 149:22	61:19 76:20	119:8,14,22	43:12 44:4
<b>panicking</b> 29:4	158:14 160:5	<b>passing</b> 59:17	120:11,24	52:5 54:17
<b>pants</b> 66:18,19	162:22	72:16	121:5,8 122:1	63:19 73:10
66:23	<b>partial</b> 129:21	<b>passion</b> 157:17	122:9 124:21	77:12,15 83:13
<b>papers</b> 39:6	<b>partially</b> 45:13	<b>passionate</b>	125:20 126:22	86:25 155:17
<b>paragraph</b> 9:23	<b>participants</b>	118:11 139:25	126:23 127:8,9	<b>permission</b>
28:5 32:25	54:18 172:18	<b>pathetic</b> 38:7	127:10,11,17	147:10 172:3
38:24 39:25	173:3 176:6	<b>pause</b> 44:21	127:25 128:7	172:14,19
49:1,5 81:3,21	<b>particular</b> 2:16	68:16,21,23	130:2,14 131:6	173:1 176:3
84:12 86:16,16	11:1 85:8	82:25	131:7,15	<b>perpetrate</b>
90:14 91:20	89:23 109:3	<b>pausing</b> 30:8	134:21 135:8	125:15
96:24 104:17	122:4 134:25	<b>pavement</b> 14:3	135:10,17,20	<b>perpetrated</b>
107:5 112:22	137:5 149:12	<b>pay</b> 11:13 40:5,7	136:15,21	107:7,12
120:5 122:20	158:12 164:3	<b>paying</b> 17:1	138:4,10,12,12	109:15
157:4 160:6	166:1,12 168:1	<b>payment</b> 107:12	138:15,23	<b>perpetrating</b>
163:10 167:15	173:13	109:15	139:6,7,8,18	94:19
168:6	<b>particularly</b> 3:1	<b>penetrate</b> 78:3	140:1,22	<b>perpetration</b>
<b>paragraphs</b>	89:13 95:13	<b>people</b> 12:21	144:13 145:16	108:17
164:2,7	97:9 107:16	13:24 16:21,25	145:21 146:5	<b>perpetrator</b>
<b>paralysed</b> 139:8	114:8 135:22	17:2 18:12	148:8 151:7,13	90:23 92:10
<b>parameters</b>	144:20 157:19	21:3,7,21 23:6	152:23 153:1	93:16,20,24,25
90:15 91:7	161:25 163:22	23:9 35:4 39:2	153:19 154:12	109:8,17
<b>parent</b> 148:15	<b>partly</b> 150:13	39:15 50:13	155:13,14,18	121:10 122:5
163:1	152:18	51:16,18 52:16	158:2,3,6	152:4
<b>parental</b> 132:8	<b>partner</b> 48:4	52:24 53:10	159:13,15	<b>perpetrators</b>
<b>parenting</b> 44:1	59:4,4,23 60:8	60:25 64:25	160:18,21,22	49:24 90:21
144:14	60:12 61:20	70:4 74:2	161:18 162:18	116:12 126:16
<b>parents</b> 56:12	77:9 163:2	91:13 95:2,17	163:21 164:21	142:22 145:11
56:16,19 57:21	<b>partner's</b> 60:7	95:22,23 97:15	164:22 168:20	146:3 150:16
130:5 172:21	76:21 77:4	97:15,17,23	168:25 169:7	150:19 154:7

<p>156:10  <b>perpetrators'</b>                  47:24  <b>persistent</b> 46:8  <b>person</b> 3:15 9:16                  15:19,20,24                  22:11 25:3                  33:7 34:2 41:1                  46:4,5,9 47:7                  64:3 66:2 86:7                  91:10 92:16,23                  93:3,11 94:1,2                  94:18 98:8                  100:2,22 105:9                  106:7,20                  107:13 109:9                  109:12 112:19                  114:7 123:12                  131:5 134:23                  154:20,20,22                  154:25 155:4                  161:22 166:14                  168:1  <b>person's</b> 94:16  <b>personal</b> 7:24                  170:25  <b>personalities</b>                  167:19 168:2  <b>personally</b>                  51:25 52:1,3                  53:11 170:25  <b>persons</b> 127:11  <b>perspective</b> 33:5                  92:14 94:25                  95:1,3  <b>phenomena</b>                  105:23  <b>phone</b> 11:11                  25:2,20,20                  29:6,8 75:2                  80:15  <b>phoned</b> 75:15  <b>photographs</b>                  166:9  <b>phrase</b> 109:24  <b>phrases</b> 101:17  <b>physical</b> 10:8</p>	<p>19:1,6 60:10                  60:13,16 77:5  <b>physically</b> 42:12                  76:21 81:6                  130:14  <b>pick</b> 26:4 41:11                  41:24 42:19                  85:17 109:4  <b>picked</b> 10:9                  24:17 28:1  <b>picture</b> 148:23                  148:24 151:13  <b>piece</b> 119:1                  121:12 151:5  <b>pieces</b> 97:9  <b>piles</b> 101:7,7  <b>pill</b> 34:14  <b>pills</b> 34:9,11  <b>pilot</b> 151:6  <b>piloted</b> 152:7  <b>piloting</b> 163:5  <b>pin</b> 19:17  <b>pinning</b> 19:10  <b>place</b> 3:19 6:18                  13:14,16 14:9                  14:16,19 16:19                  17:3 20:3                  25:13 37:16                  39:21 49:22                  52:18,20 53:14                  61:21 68:14                  69:21 85:9                  99:25 117:7                  130:18,22                  131:4 132:15                  149:6 150:23                  155:24 165:11                  167:4 175:3,4  <b>placed</b> 10:14,22                  10:23 11:25                  16:9,11,16                  20:16 31:18                  61:16 71:4                  73:19  <b>placement</b> 14:21                  16:6,10 20:16                  131:1</p>	<p><b>placements</b> 11:4                  21:5 130:9  <b>places</b> 16:25  <b>placing</b> 14:23                  153:5  <b>plan</b> 52:17  <b>plant</b> 79:24  <b>plate</b> 46:21  <b>plates</b> 46:17  <b>platform</b> 147:23                  151:20,22  <b>play</b> 114:10  <b>playing</b> 24:8,11                  24:11 114:24  <b>please</b> 1:4,11 2:1                  2:6,9,11,13,18                  3:6 12:7 25:25                  45:14,22 49:7                  55:15,18 68:23                  69:9 82:25                  85:3 89:11                  124:7 141:1,2                  141:23 146:23                  147:6,19                  148:10,13                  161:1 163:9                  164:1 165:12                  165:15 168:5                  172:20 175:12  <b>pleased</b> 150:25  <b>plenty</b> 25:20                  32:6,10  <b>plied</b> 23:19  <b>plus</b> 15:20  <b>pm</b> 55:1 69:6,8                  70:23,25 88:10                  88:12,14,16                  89:15 146:14                  146:20,22                  176:11  <b>pockets</b> 118:19                  118:20  <b>point</b> 1:25 2:13                  10:14 12:2,22                  17:11 30:8                  32:14,17 42:23                  50:21 52:10</p>	<p>55:13 56:22                  58:17,21 59:19                  60:11 62:6                  65:16 68:7                  71:22 72:15                  74:1 75:7,13                  78:14,16 79:3                  80:1,3,20 84:4                  84:22 100:8                  127:18 133:22                  142:16 143:22                  148:16 163:11                  167:17  <b>points</b> 9:20 52:9                  69:17 143:1,6                  164:8  <b>police</b> 4:12 8:15                  8:17 21:17,22                  22:10,18,20                  23:8,14 24:17                  25:2 27:16                  31:8,11,15                  32:4 34:20,21                  34:23,25 37:8                  37:23 40:13,18                  41:5,7 42:22                  43:17 45:20,20                  45:22 46:6,9                  46:10,22 47:9                  47:21 48:17,21                  49:8,10 52:14                  53:7,9 58:16                  60:14,15 67:3                  71:18,21 72:7                  73:6 76:15                  77:2 81:19                  83:11 85:17                  91:3,11,12                  111:10 118:21                  119:2,3,5,7,14                  124:14 126:12                  145:17 149:10                  149:22 150:1                  152:2,5,5                  155:20 157:19                  167:6 174:17                  174:22 175:8</p>	<p>175:10  <b>policies</b> 139:16                  144:20  <b>policy</b> 96:7                  118:7 119:20                  119:21 144:2                  145:14  <b>poorly</b> 30:21,21                  44:3  <b>pop</b> 34:14  <b>Pope</b> 173:17  <b>populations</b>                  165:22  <b>pose</b> 134:8  <b>posed</b> 164:3  <b>position</b> 16:8                  20:19 25:9                  118:4 128:10                  128:18 163:11  <b>positions</b> 99:13  <b>positive</b> 107:20                  108:2 131:1,1                  131:3,12 136:7                  168:9,19,20,21                  169:14  <b>possession</b> 37:15  <b>possible</b> 111:22                  112:3 141:25                  146:13  <b>postcode</b> 157:5                  158:2,7 167:12  <b>postponed</b> 52:16  <b>potential</b> 52:13                  127:16 150:16                  161:6  <b>potentially</b>                  141:7 143:3,12  <b>poured</b> 28:10  <b>power</b> 93:10                  102:8  <b>practical</b> 85:1                  101:5 111:8                  141:7  <b>practice</b> 91:3                  104:1,5 105:24                  106:4,12 108:6                  111:8 113:5</p>
--	---	--	---	--

118:7,15,16 131:24 135:6 135:13 138:22 148:6,9 157:5 168:10 169:21 <b>practices</b> 130:21 157:7 <b>practitioners</b> 91:16 100:13 101:6 105:2,7 106:2 112:15 124:18 135:1 140:14 149:4 156:15 165:7 <b>precautions</b> 81:15 <b>precisely</b> 142:16 <b>predominantly</b> 147:20 <b>pregnant</b> 33:13 81:17 <b>premises</b> 167:4 <b>prepared</b> 51:16 <b>preparing</b> 85:22 <b>presence</b> 31:7 94:9 112:24 113:17 129:9 <b>present</b> 95:9 <b>presented</b> 166:12 170:18 170:19 <b>pretend</b> 18:13 <b>pretended</b> 18:14 20:18 <b>pretty</b> 4:19 42:7 103:2 <b>prevent</b> 15:2 154:23 157:1 170:19,23 <b>preventative</b> 132:14 165:10 <b>preventing</b> 117:11 174:15 <b>prevention</b> 150:23 156:24 165:1 168:21 <b>previous</b> 92:5	<b>prime</b> 16:8,9 <b>principles</b> 119:7 129:3 133:25 134:3 137:7 <b>prior</b> 124:1 <b>priorities</b> 167:25 <b>priority</b> 167:20 <b>prison</b> 5:15,16 26:7 51:6 53:1 58:17 59:1,2,6 59:13 149:20 <b>proactive</b> 140:13 157:22 <b>probably</b> 6:13 17:18,19 35:23 38:20 43:7 44:23 59:14 74:23 77:21 83:4 133:21 152:23 157:22 159:6 161:12 169:12 <b>problem</b> 9:12 10:5 56:12 99:15 105:19 110:4 115:19 116:9,10,11 117:18 125:24 134:14 139:7,7 <b>problematic</b> 112:13 115:3,4 137:3 <b>problems</b> 24:20 74:22 82:1 97:23 103:23 114:20 125:6 128:13 131:8 146:13 159:5 <b>procedures</b> 132:7 <b>proceedings</b> 43:25 44:9 88:15 <b>process</b> 43:15 51:7 149:18 160:18 164:11	<b>processes</b> 163:1 <b>produce</b> 120:11 <b>PROF</b> 142:12 145:1 146:9 170:6,9 171:3 171:16 <b>professional</b> 89:18 114:4 124:11 148:11 <b>professionally</b> 148:14 158:4 167:11 <b>professionals</b> 9:24 63:9 98:7 98:19 112:1 113:11 114:3 124:19 125:18 147:20 155:6 164:17 169:8 <b>profile</b> 150:18 150:21 <b>profiling</b> 150:8 152:4 153:2 155:8 157:8 158:15 159:2 <b>programme</b> 129:8 131:25 133:13 145:4,7 169:7 <b>progress</b> 150:25 <b>project</b> 150:13 151:6 152:1,17 152:21 157:21 175:6,10 <b>projects</b> 157:25 <b>prominent</b> 138:20 <b>promising</b> 118:16 <b>pronounce</b> 150:11 <b>pronounced</b> 174:6 <b>proper</b> 83:10 <b>properly</b> 7:23 28:23 44:5,8 46:7 73:17	132:24 138:3 151:2 <b>properties</b> 17:6 <b>property</b> 41:18 41:19,20,21 <b>proposals</b> 161:2 165:19 <b>propose</b> 1:22 142:14 147:14 <b>proposing</b> 158:18 <b>prosecute</b> 38:10 <b>prosecuted</b> 37:6 37:14,15,20 38:4,5 46:23 83:16 142:25 <b>prosecution</b> 50:22 <b>prosecutions</b> 4:16 <b>prosecutors</b> 118:22 <b>prostitute</b> 22:19 <b>prostitutes</b> 22:16 <b>prostitution</b> 51:10 102:23 145:19 148:17 <b>protect</b> 11:17 14:20 42:6 81:20 86:19 95:2 130:6 141:19 173:15 <b>protecting</b> 129:12 138:4,8 <b>protection</b> 90:3 116:8 132:7 139:3 <b>protective</b> 117:7 132:14 <b>protocol</b> 124:16 <b>protocols</b> 166:23 <b>protracted</b> 98:5 <b>provide</b> 20:3 58:12 90:6 124:17 135:16	142:1,5 174:2 <b>provided</b> 1:16 55:8 59:5 77:21 88:22 89:2 101:18 133:17 147:8 <b>provides</b> 100:14 101:13,19 156:13 173:13 173:18 174:1,8 <b>providing</b> 138:21 173:24 <b>proving</b> 122:9 <b>provision</b> 173:10 <b>psychosis</b> 6:6 <b>public</b> 1:4 37:16 86:12 <b>publicised</b> 85:14 150:6 <b>published</b> 106:24 143:25 172:13 176:4 <b>pull</b> 79:22 82:18 165:15 <b>pulled</b> 65:23 66:22 <b>pulling</b> 14:2 <b>punched</b> 5:11 81:7 <b>punching</b> 71:14 <b>punished</b> 14:21 38:1 <b>punitive</b> 116:6 <b>pure</b> 28:9 <b>purely</b> 135:6 <b>purpose</b> 131:23 <b>purposefully</b> 114:16 122:8 <b>pushback</b> 109:23,25 <b>pushed</b> 15:14 19:11 49:24 <b>pushing</b> 119:12 <b>put</b> 4:5 9:6 10:16 11:13 14:16,19 16:24
---	--	--	--	---

<p>25:9,20 29:11                  29:21 31:22                  40:20,22 46:7                  48:6,20 50:13                  50:15 52:12,18                  52:19 58:17                  61:15 62:23                  74:11 79:24                  95:20 101:6                  106:19 119:24                  130:21 131:4                  132:14 141:16                  142:21 150:22                  151:13 154:19                  155:21 165:10                  169:5  <b>putting</b> 16:23                  95:11 149:8</p> <hr/> <p style="text-align: center;"><b>Q</b></p> <p><b>qualified</b> 148:14  <b>question</b> 2:1                  20:13 49:22                  50:19,20 55:14                  55:23 73:19                  86:19 111:3                  124:7 134:9,12                  137:21 141:1,3                  141:5 142:15                  143:10,19                  145:2  <b>questioned</b>                  22:24 23:10                  26:5 50:14  <b>questioning</b>                  50:7,17 83:5                  84:7,7,20  <b>questions</b> 1:24                  2:15 9:21                  14:12 26:19                  32:1 35:11                  37:23 38:20,22                  39:21,23 45:2                  45:11,14,17,19                  53:23,25 54:3                  54:4,5 55:11                  56:3 61:1</p>	<p>64:17 76:8                  83:1 84:9                  87:19,21,22                  89:10 130:7                  134:6,7,10,11                  137:8,16,19                  142:12 143:5                  147:6,15                  165:14 169:23                  169:24,25                  170:8 176:23                  177:1  <b>quick</b> 19:8 170:6  <b>quickly</b> 66:22,23  <b>quite</b> 2:19 4:2,4                  4:9 6:8 11:4,4                  23:7 34:12,15                  35:1 38:6                  40:12 49:11                  51:14,15 56:18                  57:10 58:14                  59:14,18 60:8                  60:9,10 62:1                  71:22 73:21,24                  79:19 84:5                  95:11 98:6                  131:20 141:7                  143:23 144:23                  150:5 152:11                  152:25 154:25                  170:20,24  <b>quote</b> 99:20</p> <hr/> <p style="text-align: center;"><b>R</b></p> <p><b>racist</b> 46:12                  84:13  <b>raided</b> 58:19  <b>rails</b> 12:8  <b>raise</b> 32:1 35:11                  37:23  <b>raised</b> 14:12                  26:17 42:25                  76:8 97:13                  109:7 120:16                  125:2  <b>raising</b> 47:11                  165:1</p>	<p><b>ran</b> 5:4,7 6:22                  76:23  <b>random</b> 25:11  <b>rang</b> 41:7 60:14                  61:7,12 75:1                  77:2  <b>range</b> 108:17                  133:2,3 135:7                  135:18 145:25                  146:7 156:7,18  <b>rape</b> 13:17                  49:23 51:9                  79:8  <b>raped</b> 38:15                  39:20 40:1,9                  41:8 62:24                  80:6 81:6 82:7  <b>reached</b> 109:1  <b>reaction</b> 19:19  <b>read</b> 77:12 81:4                  93:6 94:3                  114:6 119:24                  158:21 160:3,5                  160:7 169:22                  172:12,19  <b>ready</b> 26:3,8                  50:22  <b>reaffirm</b> 104:2  <b>real</b> 87:8 110:24                  113:7 125:21                  139:9,10                  157:17 161:17  <b>realise</b> 15:13                  82:7 100:11  <b>realised</b> 44:13                  44:16 63:24  <b>reality</b> 87:4                  92:18 110:9  <b>really</b> 2:21 7:17                  7:23 18:4 25:3                  28:23,23 29:3                  30:10,19,21                  32:23 33:10                  38:7 42:16,18                  48:5,12 57:13                  57:14 59:8                  61:23 62:7</p>	<p>64:7 65:13                  67:8,9,9,18                  73:16 74:17                  75:2,4,13 77:9                  78:16 79:5,5                  80:20,21 85:24                  85:25,25 95:1                  96:20 100:8                  101:4 103:5                  104:1 105:1,6                  105:9 106:11                  106:13 110:8                  112:5,5,7,13                  113:4 114:24                  115:10 117:10                  118:16 119:1                  119:16,22                  125:12 128:7                  129:24 131:13                  133:21 134:25                  135:5,14                  136:19,22                  139:4,13,14,25                  139:25 140:6                  142:1,4 144:5                  144:8 148:8,22                  151:22 157:9                  157:12,12,14                  157:14,14                  158:7 159:11                  159:13,16                  160:17 161:12                  161:16,20,20                  162:3,5 163:6                  163:6,7 164:20                  164:20 167:10                  167:10 168:3,3                  168:15,18                  169:16 170:17                  171:2,6  <b>reason</b> 9:17                  10:16 17:23                  75:8 86:24                  89:15 101:3                  103:25 104:3                  105:19 111:17  <b>reasons</b> 99:9</p>	<p>110:20,22                  116:11 126:21  <b>reassurance</b>                  18:24  <b>rebell</b> 8:2 9:8  <b>rebellious</b> 9:11                  12:5  <b>rebuild</b> 14:17  <b>receive</b> 95:8                  114:18 161:10  <b>received</b> 43:16                  73:7 109:16                  127:23 138:11  <b>receives</b> 92:23  <b>receiving</b> 93:25                  94:1,2 109:9                  109:12 123:12                  154:21,22  <b>recognise</b>                  100:16 105:1,6                  105:10 106:13                  107:22 108:13                  108:16,21                  110:3,8 113:19                  113:20 114:2                  121:17 122:8                  125:18 128:7                  144:6 145:21                  160:24  <b>recognised</b>                  127:14,16,23                  148:12 149:2  <b>recognises</b>                  107:24  <b>recognising</b>                  105:23 106:6                  106:13 109:12                  113:18 119:11                  134:21  <b>recognition</b>                  99:11 104:7                  144:12,17                  163:15  <b>recognitions</b>                  141:11  <b>recollect</b> 148:25  <b>recommenda...</b></p>
--	--	---	---	--

173:1	<b>reiterate</b> 109:17	66:16 67:3,7,8	<b>requires</b> 99:15	135:8 141:3
<b>reconvene</b> 176:8	<b>related</b> 47:23	72:24 75:18	<b>reschedule</b>	142:9 143:19
<b>record</b> 11:5 53:6	99:2	82:19 166:6	119:18	145:5 146:8
102:10 126:9	<b>relatedly</b> 97:23	<b>remind</b> 2:5	<b>research</b> 89:19	149:10 150:1
<b>recording</b> 46:17	<b>relates</b> 90:17	<b>removal</b> 130:25	90:3,9 92:12	155:19
<b>records</b> 53:2	127:1 172:4	131:12	96:19,25 97:9	<b>responded</b>
<b>redacted</b> 44:19	<b>relating</b> 17:8	<b>removed</b> 7:14	97:10,10 99:16	158:6
68:14 70:4,4	158:10	50:10 130:14	100:19 102:15	<b>responding</b>
<b>reduction</b>	<b>relation</b> 5:13	<b>removing</b> 39:7	103:2 104:8,8	106:5 117:12
115:25	31:19 53:5,9	145:19	104:8 108:18	123:19 125:4
<b>refer</b> 90:15	71:19 79:19	<b>renaming</b>	112:23 114:9	133:5
97:15 103:7	104:6 112:2	145:18	116:14 117:16	<b>responds</b> 91:12
112:23 118:5	138:3 143:18	<b>rent</b> 16:24 17:2	118:2 120:18	<b>response</b> 38:1
120:5 122:20	172:1 173:14	17:5	121:12 122:25	91:10 95:8,22
<b>reference</b> 1:17	<b>relationship</b>	<b>repeated</b> 116:16	123:17 126:18	100:18 106:12
51:21 55:9	2:22 3:7,23 9:8	<b>repeatedly</b>	128:12,15	111:8 112:7
147:9	10:17 18:7	62:18 67:24	129:8 130:23	113:5 117:19
<b>referral</b> 44:19	33:6,12,17	77:16 84:16	131:6 132:3	130:10 135:17
154:19 175:5	62:17 64:17,21	87:6 108:19	139:1	142:2 144:11
<b>referred</b> 26:20	68:4 71:9 81:2	114:9 118:2	<b>researched</b>	155:5 165:18
91:11 102:16	82:24 94:18	120:24 140:17	128:24	166:5,10,13
<b>referring</b> 56:23	154:13 166:7	<b>replicates</b>	<b>researcher</b>	167:13
103:4 156:1,2	<b>relationships</b>	124:25	128:23	<b>responses</b>
<b>reflect</b> 10:11	27:11 97:20	<b>replied</b> 30:1	<b>researches</b>	112:25 116:7
16:15 92:17	99:13 100:3	<b>reply</b> 27:19	141:22	119:3 131:11
95:21	116:4 131:14	<b>report</b> 51:16,21	<b>residential</b>	134:16
<b>reflects</b> 103:8	<b>relatively</b>	72:5 87:14	173:22	<b>responsibilities</b>
124:24	169:13	106:24 107:1	<b>resilience</b> 154:5	144:1
<b>reform</b> 158:18	<b>relay</b> 97:17	138:23 143:15	<b>resolved</b> 130:19	<b>responsibility</b>
<b>refuge</b> 3:10	135:18	143:15	<b>resonate</b> 98:19	116:18 117:11
38:14 39:22	<b>relayed</b> 105:21	<b>reported</b> 22:3	<b>resort</b> 100:22	138:8
41:3,4 60:19	126:25	32:4 41:7 46:4	<b>resource</b> 112:19	<b>responsible</b>
60:25	<b>relaying</b> 135:10	46:5 127:3	112:20 151:9	142:25
<b>refused</b> 81:5	<b>relevant</b> 134:4	<b>reporting</b> 46:3	<b>resources</b> 108:9	<b>rest</b> 67:10
<b>regarding</b> 76:15	<b>reliant</b> 167:18	108:22 122:2	111:18 113:9	113:23
<b>register</b> 5:17	<b>reluctance</b>	123:19 136:8	135:3	<b>restrained</b> 38:4
25:6 26:21	124:2	138:15 140:20	<b>resourcing</b>	<b>restraining</b> 4:18
46:2,6 52:13	<b>rely</b> 21:8	143:16	112:18	19:7
<b>registered</b>	<b>remain</b> 81:2	<b>reports</b> 76:15,18	<b>respect</b> 118:3	<b>restraint</b> 19:2,8
173:18	<b>remember</b> 8:24	166:3 167:6	173:15	<b>restrict</b> 108:9
<b>registers</b> 104:22	13:6 24:3,20	<b>representation</b>	<b>respectively</b>	<b>restriction</b>
<b>registration</b>	29:10 31:12	103:8	71:18	44:25 68:24
46:17,21	43:5 47:7	<b>represented</b>	<b>respite</b> 74:1	69:14 70:16,18
<b>regular</b> 9:25	56:10 57:16,18	104:11	<b>respond</b> 30:2	<b>result</b> 37:25
77:23	58:16,19,22	<b>representing</b>	94:14 95:6	132:3
<b>regularly</b> 4:3	61:19 62:12	49:24	96:22 113:2	<b>resulted</b> 90:18
33:21 35:5	64:3 65:12,19	<b>request</b> 145:2	114:3 132:25	149:12

<p><b>results</b> 16:19  <b>resume</b> 70:20  <b>retain</b> 104:3                  111:23  <b>retained</b> 101:23  <b>retaining</b> 99:6  <b>retired</b> 174:17                  174:21  <b>retrial</b> 49:16  <b>Retriever</b>                  149:17 152:22  <b>return</b> 8:25 45:7                  88:10 123:13                  124:4 146:18                  166:22,25                  167:9 173:20  <b>returned</b> 8:14                  60:23  <b>review</b> 97:11                  98:4 160:1                  168:6,11  <b>reviews</b> 92:13                  110:17 159:8                  168:8,10  <b>revised</b> 162:10  <b>revisions</b> 92:8  <b>rid</b> 146:4  <b>right</b> 1:14 2:2,10                  2:14 3:24 4:16                  5:14 6:16,21                  9:14 10:19                  14:10 16:2                  17:10,21 19:3                  19:23 22:19,25                  24:15 26:25                  27:6,13 31:7                  31:14 32:23                  34:17,22 35:8                  35:19 37:6,14                  38:2,12,15                  39:1,4,9,23                  40:1,15 41:6                  41:16 42:6                  43:4,18 48:22                  48:23 49:6                  51:5,15,24                  52:10 55:6,23</p>	<p>57:1,22 58:9                  58:17 61:18                  62:21 65:1                  66:24 68:12                  69:10,22 71:4                  71:20 72:12                  73:4,20 75:11                  77:24 78:7                  79:16 80:16                  83:20 85:10,12                  90:10 101:3,11                  101:12 103:11                  103:15,16                  137:8 144:19                  147:3 150:24                  152:19,20                  154:25 156:13                  157:18 159:11                  165:2,10 169:3  <b>rights</b> 11:15                  90:3 94:25                  173:19  <b>ring</b> 6:2 25:2,19                  39:8  <b>ringing</b> 46:9  <b>rise</b> 54:17 88:9  <b>risk</b> 15:3,6 25:5                  25:7 46:3                  52:20 97:11                  98:8 104:22                  105:13,17,18                  105:19,21                  106:3 115:20                  115:20,25                  117:1 120:7,12                  120:16,18,20                  120:20,22,25                  121:3,5,13,15                  121:22,23,24                  122:1,11,15                  125:6,19 126:5                  126:23 128:10                  128:13,21                  129:2,6,19                  132:8,24 135:6                  136:25 137:2                  138:25,25</p>	<p>139:2,3,22,23                  140:6,8,15                  150:12 151:6                  151:11 152:3                  153:5 154:7,11                  154:17,20,22                  154:24 155:3                  160:19 162:6                  162:13,23                  163:7,13 164:5                  164:10 170:10                  170:13,17,18                  170:20 171:1,6                  171:8 174:3  <b>risks</b> 116:5                  134:23 150:22                  154:2,4,15                  164:3  <b>risky</b> 87:6  <b>road</b> 13:23  <b>robbed</b> 62:24  <b>robustly</b> 32:5  <b>Rochdale</b> 150:4  <b>role</b> 138:18,20                  172:25  <b>roll</b> 9:2  <b>rolled</b> 144:4  <b>roof</b> 123:23  <b>room</b> 4:25 5:1,5                  5:6 30:16 31:9                  31:10 36:7                  40:14 54:15,20  <b>rooms</b> 36:6,9  <b>root</b> 9:18 116:11  <b>roots</b> 102:7,12  <b>Rosie</b> 175:19  <b>Rotherham</b>                  174:12  <b>roughly</b> 61:18  <b>round</b> 29:3,4                  85:12  <b>roundabouts</b>                  24:11  <b>rule</b> 36:7 54:1  <b>rules</b> 19:5 49:22                  115:5  <b>run</b> 8:13,17</p>	<p>16:12,22 25:1                  25:1  <b>rung</b> 62:9  <b>running</b> 6:24                  8:2 62:21,23                  62:25 63:2,3</p> <hr/> <p style="text-align: center;"><b>S</b></p> <hr/> <p><b>sacrifice</b> 39:16  <b>sadly</b> 54:8  <b>safe</b> 7:8 11:1                  18:9 60:17                  66:12 67:16                  85:9 116:18,21                  130:23 154:18                  157:3  <b>safeguard</b> 14:20                  124:17 130:17                  132:9 172:23  <b>safeguarded</b>                  60:25  <b>safeguarding</b>                  7:7 10:1                  131:19,23                  132:16 133:9                  133:11,23,24                  136:1 143:6,13                  144:3,23,24                  145:3 163:2                  167:19,25                  172:25  <b>safer</b> 130:13                  133:4  <b>safety</b> 19:7 20:2                  31:19 39:18                  156:21  <b>Sarah</b> 174:11  <b>SARC</b> 175:3,5  <b>sat</b> 19:12 23:13                  28:19 44:10                  65:21 77:4  <b>Saturdays</b> 34:16  <b>saw</b> 77:22 82:3                  85:9  <b>saying</b> 9:4,6                  22:13 27:9                  29:8,10 34:1</p>	<p>46:12 48:15                  61:3 79:7                  82:11 93:19                  98:4 103:20                  107:25 113:9                  121:4 122:10                  125:21 132:19                  154:19 155:2,3                  158:25 164:13                  167:23 171:11                  171:15  <b>says</b> 39:6 93:7                  95:19 102:3                  104:25 110:8                  116:24 126:2  <b>scan</b> 156:9  <b>scared</b> 13:10                  29:18 75:6,22                  77:6 84:6  <b>scenario</b> 110:5                  139:11  <b>scenarios</b> 94:6  <b>scene</b> 34:3  <b>school</b> 7:21,22                  52:15 57:19                  59:11,14 62:3                  65:8 74:9,17                  74:19 75:1,5,9                  75:12 129:7,11                  129:12 132:20                  132:21  <b>schoolbag</b> 115:7  <b>schools</b> 116:16                  129:10 173:22  <b>Scire</b> 174:5  <b>Scorer</b> 68:22                  70:13,15  <b>scoring</b> 128:14                  129:4 162:16  <b>Scottish</b> 137:7  <b>screen</b> 54:19                  85:5 107:4                  124:6,8 126:7                  126:10  <b>screening</b> 137:4  <b>scroll</b> 156:4,5                  158:16 161:2</p>
--	--	--	---	---



164:1,7 <b>scrubbing</b> 40:14 <b>scrutiny</b> 139:6,6 <b>searched</b> 58:24 <b>second</b> 16:4 48:25 49:3,7,9 49:16 57:13 68:16 72:10,25 76:13 100:8 101:8 126:4 147:15 156:3 163:25 <b>Secretary</b> 174:16 <b>section</b> 150:9 156:6,7,9,11 <b>sectioned</b> 6:7 <b>sections</b> 156:6 <b>sector</b> 96:10 152:10 <b>secure</b> 16:25 17:3 18:10 20:3 31:18,22 62:23 85:19 130:25 131:13 <b>security</b> 32:16 <b>see</b> 1:14,25 20:17 26:8,10 35:13 37:24 38:22 40:7 47:20 54:1 55:5 59:7 66:4 68:12 72:2,18 74:6 75:8 77:13 83:5 84:23 86:3,5 86:10 88:7 96:9 101:13 102:14 104:10 108:10,15 110:5,6,16 113:7,14 114:5 114:19 115:3 115:24,24 116:8 125:18 125:20,23 128:20 131:8	131:12 144:15 147:5 148:6 151:23 155:24 156:4,7,9 157:12,18,21 161:13 164:9 164:13 165:25 166:15 171:2 <b>seeing</b> 55:17 98:12 153:15 153:19 <b>seek</b> 176:3 <b>sought</b> 3:10 <b>seeking</b> 17:17,19 <b>seeks</b> 124:17 <b>seen</b> 15:15 39:14 52:4 55:12 60:15,16 61:2 72:1,14 80:5 86:9,12,12,13 91:13 97:20 100:21 102:16 108:6 127:8 128:5,8 155:13 155:14 157:10 165:25 166:15 <b>self-harm</b> 5:23 63:22 <b>self-harming</b> 8:3,9 10:7 17:14,16 71:14 <b>sell</b> 34:11 35:18 123:23 <b>selling</b> 100:18 <b>senior</b> 90:7 <b>sense</b> 10:25 32:16 96:11 98:19 100:10 101:9,10 102:17,18 103:9 <b>sensible</b> 44:23 92:2 <b>sensitive</b> 85:12 175:16 <b>sent</b> 55:13 62:19 80:25 147:7	176:5 <b>sentenced</b> 51:10 <b>sentences</b> 51:6 51:12 <b>separate</b> 47:22 99:17 109:10 120:11 144:13 148:2 <b>separating</b> 105:13 <b>September</b> 1:1 176:13 <b>series</b> 9:21 14:12 32:1 35:11 150:10 <b>serious</b> 4:4,9 52:20 110:16 141:7 159:8 <b>seriously</b> 10:4,6 <b>serve</b> 51:11 95:2 <b>service</b> 24:18 25:8 91:10 95:7 149:8 161:7,8 173:18 174:2 175:16 <b>services</b> 6:25 7:5 7:5 8:8,15 10:2 12:1 17:4 43:17 72:6,7 73:19 75:18 76:9,15 77:2 81:22 86:18 91:3 123:19 127:10 135:4 139:15 144:22 152:6 161:19 161:21,22,23 162:2 167:24 167:24 173:14 173:15,19 174:9 <b>serving</b> 51:13 53:1 <b>session</b> 72:14 <b>set</b> 11:8 14:9 27:21 50:18,23 78:18 119:7	128:11,18 133:25 155:25 <b>sets</b> 107:6 128:15 162:9 <b>settled</b> 86:22 <b>severely</b> 113:22 <b>sex</b> 27:5 34:6 36:14 77:23 78:1,2,2 81:5 81:14 82:12 84:17,18 98:18 100:18,18,21 101:21 123:22 123:23 171:10 <b>sexes</b> 36:12 <b>sexual</b> 17:9 25:5 33:3,5,6,11,16 39:4 51:19 55:25 64:21,23 68:9 71:20 72:11,22 73:7 82:8,24 86:24 89:19,24 90:5 90:8,16,17,22 91:5,9,17,21 91:22 92:7,10 93:8,8,12,18 94:8,17 95:12 96:3,4,12,14 96:15,17,19,25 97:1 98:12,15 98:17 99:3,6,8 99:17,22 100:20 101:14 101:24 102:6 102:17,20,24 103:6,9,23 104:3,6,11,14 104:21,22 105:5,11,15 106:1,12,24,25 107:7,9,10,10 107:12,15,18 107:19,22 108:5,19,21 109:6 111:12 111:23 112:2,8	115:18 117:23 120:7,10 122:21,23,25 123:1 124:1 127:1 129:9 130:10 134:14 135:22 141:9 142:3,19 143:8 145:14,15,24 147:22 148:20 149:1,11,24 153:11,17,22 157:13 166:3 168:2 172:21 173:8,14 174:10,14,18 174:23 175:5 175:17,23 <b>sexuality</b> 160:23 <b>sexually</b> 20:19 33:11 47:18 77:16 80:2 83:19 99:12 100:3 110:23 170:22 <b>sexually-trans...</b> 81:17 <b>Shadow</b> 174:14 174:15 <b>shaking</b> 56:12 <b>shame</b> 157:23 <b>share</b> 127:22 138:13 141:24 168:24 169:4 <b>shared</b> 148:4 168:23 <b>sharing</b> 118:14 118:23 152:18 159:12 166:9 168:14,16,19 168:22,22 <b>Sharpling</b> 137:18,20 139:19 140:24 170:1,2 <b>she'd</b> 17:5 74:10 <b>Sheffield</b> 149:5
--	--	--	---	---

149:6	<b>significance</b>	146:14 162:19	124:13,14	126:16 152:18
<b>Sheila</b> 146:12,19	111:21 164:12	<b>sites</b> 173:15	126:12,15	164:25
146:23,24	<b>significant</b>	<b>sits</b> 143:25 144:1	135:4,14	<b>sorts</b> 100:5
147:2 176:24	109:23 115:10	<b>sitting</b> 46:20	139:15 144:2	105:2,20,21
<b>shift</b> 24:1 135:25	161:6 171:25	101:23 163:2	144:22	<b>Sound</b> 154:18
139:15	<b>significantly</b>	<b>situation</b> 7:12	<b>socially</b> 127:6	<b>source</b> 132:10
<b>shocked</b> 85:24	155:1,4 160:20	19:25 20:5	<b>societal</b> 115:2	<b>sowing</b> 166:10
<b>shocking</b> 16:13	171:7	21:11 34:7	117:9	<b>space</b> 97:16
54:8	<b>signs</b> 32:2	48:6 52:7	<b>society</b> 22:11,12	100:9 138:12
<b>shoes</b> 80:17	124:17	60:10 69:19	115:5 154:14	<b>spaced</b> 30:10
<b>shootings</b> 34:25	<b>Sikh</b> 175:13	87:5,7 113:3	157:1 173:10	<b>spaces</b> 133:4
35:2	<b>similar</b> 70:14	143:23 166:12	<b>socio-legal</b>	<b>Span</b> 150:3
<b>shop</b> 61:4	87:13 94:10	<b>situations</b>	173:21	<b>speak</b> 25:17,18
<b>shopping</b> 41:10	117:24 119:9	101:20	<b>sole</b> 5:24 92:15	26:22 42:11,11
<b>shops</b> 58:9	152:21,25	<b>six</b> 50:20 172:7	116:25	42:12,13,18,21
<b>short</b> 44:4,22	167:17	<b>sixth</b> 165:13	<b>solely</b> 95:6,8	59:7 70:3
45:1,5,9 54:14	<b>Similarly</b> 143:5	<b>skewing</b> 95:24	147:16	72:16 89:11
54:17,25 68:25	<b>simple</b> 113:4	<b>skirting</b> 28:25	<b>solicitor</b> 51:17	124:12 171:4
69:4,7,15	118:9 136:17	<b>slag</b> 50:1 67:25	70:9	<b>speaking</b> 12:11
70:19,24 88:13	137:16 154:16	81:9 84:14	<b>solution</b> 24:19	48:10 72:15
146:21	<b>simplistic</b> 113:8	<b>slammed</b> 5:5	120:10	82:8
<b>shortcomings</b>	129:14	<b>slapped</b> 81:7	<b>solution-focus...</b>	<b>special</b> 160:21
143:7	<b>simply</b> 114:22	<b>slavery</b> 147:24	158:23	163:18
<b>shorthand</b> 95:18	117:8 118:8	<b>sleep</b> 18:10	<b>somebody</b> 16:2	<b>specialised</b>
96:17 121:24	119:23 137:9	59:25	68:4 79:10	13:24
<b>shortly</b> 40:12	140:5 145:20	<b>sleepy</b> 30:19	154:22 157:16	<b>specialist</b> 173:10
51:15	<b>single</b> 15:19	<b>slightly</b> 117:24	165:4,6	<b>specific</b> 120:5
<b>shouting</b> 84:8	16:10 51:3	120:3 124:24	<b>son</b> 60:7,8,12	121:25 160:10
<b>show</b> 123:7,17	95:12 135:12	<b>slurring</b> 42:4	<b>soon</b> 4:20 73:5	174:2
<b>showed</b> 67:19	135:13	<b>smash</b> 79:9	152:7	<b>specifically</b> 90:4
<b>shower</b> 61:3	<b>single-issue</b>	<b>smashed</b> 31:10	<b>Sophie</b> 88:20	122:24 126:19
<b>showing</b> 10:7	144:18	38:5,8	89:1 176:22	149:2
67:4 121:1	<b>sipping</b> 28:20	<b>smashing</b> 80:8	<b>sorry</b> 1:8,9,9 5:3	<b>spend</b> 5:16
<b>shown</b> 20:12	<b>Sir</b> 142:11,12	<b>sniffing</b> 63:21	6:14 35:8	41:15
<b>shows</b> 24:9	145:1 146:9	<b>social</b> 6:25 7:5,5	48:20 56:1,23	<b>spending</b> 17:1
96:19 118:2,2	170:5,6,9	7:18 8:8,15	63:15,16 68:20	<b>spent</b> 5:15 30:15
<b>shut</b> 16:11	171:3,16	10:2 12:1,20	69:2 70:8,9,17	<b>sphere</b> 141:19
<b>shutting</b> 171:3	<b>sister</b> 3:8 5:24	17:4 20:16	83:15 93:4	<b>spheres</b> 132:25
<b>sibling</b> 63:12	5:25 48:4 57:6	43:1,5,8,17	100:25 111:14	<b>spike</b> 79:25
71:13	57:7 60:5,17	46:19,24 47:2	111:15 117:2	<b>spiked</b> 28:8,9
<b>side</b> 5:10 10:8	65:5 73:25	52:15 61:6	117:14 118:11	30:2 77:22
50:24 57:7	75:20,20 76:13	62:9 71:23	122:17 137:13	<b>spiralled</b> 12:16
76:17 142:21	76:22,23,23	72:6 73:19	<b>sort</b> 8:24 24:15	<b>split</b> 2:23 130:24
<b>sift</b> 152:4	77:3,6,7	74:25 75:7,18	31:24 47:7	<b>spoke</b> 33:18
<b>sign</b> 20:14	<b>sister's</b> 2:25 3:7	76:9,15 77:2	84:20 93:6	41:9 49:8 66:9
<b>signed</b> 88:24	<b>sit</b> 4:7 19:15	86:18,25	104:15 105:16	69:12 82:10
89:4	26:9 35:21,23	105:23 110:21	111:8 112:14	<b>spoken</b> 50:2

<p>51:15  <b>spot</b> 32:2  <b>stabblings</b> 35:2  <b>stability</b> 43:3  <b>staff</b> 14:19 15:9  17:17 18:7,25  19:3,12,22,24  20:6 24:1,6  25:14,23 27:18  27:24 29:24  31:4 32:2  33:16 35:11,20  36:18 37:7  40:4,6 41:4,10  42:22 123:5  <b>stages</b> 16:3  <b>stairs</b> 5:1,5  74:12,18,20  <b>stand</b> 50:4 51:1  58:22 166:8  <b>staring</b> 29:5  42:4  <b>start</b> 3:24 32:15  33:6 43:24  62:20 73:8  86:7 90:12  106:20 112:17  115:2 119:19  124:7 139:18  150:20  <b>started</b> 3:14 4:2  5:7,22 6:24 8:1  8:3 10:6 12:6  28:21 29:25  32:12 40:6  43:13 46:9  48:13,18 49:16  52:14 56:1,2  62:3 63:22  65:24 66:7  73:3 77:20  133:14 166:1  <b>starting</b> 128:25  149:18 161:13  <b>State</b> 174:16  <b>stated</b> 119:21  <b>statement</b> 1:16</p>	<p>1:18,21 2:6 3:3  4:15 5:12,18  7:3 8:3 9:10,20  10:15,21 11:24  13:3 14:7  15:24 16:7  17:24 18:22  19:18 20:7  21:15 22:23  23:18 24:14  25:22 26:16  28:6 29:25  32:25 33:4  39:1 40:1  42:25 43:9  47:15 48:2  49:2,5 55:8,10  55:20 56:23  57:15 61:16  62:16 63:15,18  67:7,17 69:18  71:11 73:3  76:2 77:11,13  79:6 81:3  83:10,23 84:12  86:15,17 88:22  88:23 89:2,3  90:7,14 91:20  96:24 102:2,4  104:16 107:2  112:22 118:2  120:4 122:20  126:20 131:18  142:5 147:15  150:9 152:17  157:4 158:8,14  159:22,25  160:3,6 163:25  173:2,5 175:19  <b>statements</b> 89:7  125:25 128:12  130:12 147:9  147:11,12  173:4 175:12  <b>station</b> 46:9  <b>statistical</b>  130:23</p>	<p><b>statistics</b> 109:1  <b>stats</b> 169:17  <b>status</b> 93:15,20  <b>statutory</b> 91:5  126:15 143:24  144:7,15  <b>stay</b> 15:10 35:21  41:17,21 60:3  78:25  <b>stayed</b> 62:11  74:25  <b>staying</b> 41:22  48:4 74:3  <b>steal</b> 58:8  <b>step</b> 84:10  <b>stepdad</b> 3:5,15  3:23  <b>stepped</b> 37:19  <b>steps</b> 28:24  <b>stereotypes</b>  127:4  <b>stereotypical</b>  166:5  <b>stick</b> 41:23  87:12  <b>sticks</b> 67:9  <b>stirrer</b> 28:12  <b>stole</b> 60:2  <b>Stonewood</b>  151:7  <b>stood</b> 5:8 28:21  29:5 65:22  80:20 85:21  <b>stop</b> 11:9 21:24  44:23 58:23  130:3 170:11  172:23  <b>stopped</b> 21:16  21:22 32:20  44:17,18,18  46:3 62:25  63:2 64:25  <b>stopping</b> 12:10  <b>stops</b> 161:19  <b>store</b> 115:6  <b>stories</b> 168:22  <b>story</b> 127:22</p>	<p>169:11  <b>straight</b> 19:10  28:11 40:24  <b>strange</b> 28:21  73:21  <b>stranger</b> 94:19  <b>strategic</b> 173:9  <b>street</b> 14:5 58:2  <b>streets</b> 13:20  78:20  <b>stress</b> 8:10  <b>stress-related</b>  8:4  <b>stressing</b> 75:10  <b>strike</b> 143:2  <b>strikes</b> 109:13  <b>stripping</b> 136:25  <b>strong</b> 112:11  <b>strongly</b> 129:19  163:11 165:17  <b>structure</b> 106:5  <b>structures</b> 117:7  <b>struggle</b> 58:14  <b>struggled</b> 2:20  <b>struggling</b> 12:1  <b>stuck</b> 30:5 79:1  <b>student</b> 165:6  <b>studies</b> 127:3  <b>stuff</b> 4:6,8,11  8:10 9:4 11:7  11:20 16:25  17:16,18 21:9  21:14 22:1,5  23:8 24:12,23  26:4,11 27:10  28:19 30:13  32:14 34:15,25  35:2 36:14,23  57:3 60:21  63:11 65:6  66:11 67:6  71:24 72:19  74:16 77:1  79:22 80:1  82:11,19  125:12  <b>stymied</b> 140:2</p>	<p><b>subcategory</b>  94:7  <b>subject</b> 175:22  <b>subjects</b> 127:7  <b>submission</b>  145:5  <b>substances</b>  57:10  <b>substituting</b>  145:20  <b>successfully</b>  146:3  <b>sudden</b> 28:20  <b>suddenly</b> 115:23  <b>suffered</b> 5:19  33:2 59:18  81:25 86:24  <b>sufficed</b> 76:18  <b>suggest</b> 134:13  <b>suggesting</b>  157:6  <b>suggestion</b>  102:12 126:11  <b>suggestions</b>  138:2  <b>suggests</b> 94:8  114:13 172:25  <b>suicide</b> 5:24  <b>suit</b> 13:12  <b>sum</b> 99:20  <b>summarise</b> 9:22  14:13 71:8  82:4 83:22  85:3 86:16  89:17 97:3  101:1 128:9  <b>summarised</b>  51:17,21,23  <b>summary</b> 32:9  90:7 147:18  164:15,16  <b>summer</b> 3:25  <b>Sundays</b> 34:18  <b>supplied</b> 23:20  <b>support</b> 7:16,16  7:20,21 43:16  43:19,22 50:14</p>
---	---	---	---	---

57:4 68:2	<b>suspected</b> 120:9	<b>taken</b> 10:4,6	147:2,8,12,18	102:19 121:24
71:23 73:8	120:12 122:15	14:23 17:15	150:17 158:13	141:5
85:20 87:5	<b>suspended</b>	27:13 40:18	158:17 159:21	<b>terms</b> 83:15
100:7,13	11:13	41:1 42:8,17	160:3,13 161:2	91:9 99:7
101:18 105:8	<b>suspicious</b> 66:25	47:1 62:9,10	163:10 164:2,9	119:21 120:5
106:7,14	<b>SWAN</b> 175:14	73:23 85:24	165:16 166:20	136:1,18
108:10 114:18	<b>Swansea</b> 131:21	108:15 166:11	167:17 169:18	155:17 156:17
126:1 127:15	144:3 173:16	<b>takes</b> 64:13 93:9	169:22,24	160:24
131:4 134:22	<b>swings</b> 24:12	103:15 107:22	170:9 171:19	<b>terrible</b> 87:25
135:8,15	<b>swore</b> 75:13	153:7 156:12	176:24	<b>tests</b> 84:24
138:10 139:5	<b>sworn</b> 1:10	<b>talk</b> 19:9 20:8	<b>Taylor's</b> 146:19	<b>thank</b> 2:10 54:5
139:17 144:17	<b>sympathy</b> 18:24	26:7,10 66:16	<b>teach</b> 165:4,5	54:7,12,13,21
150:2 156:23	<b>synonymous</b>	98:22 110:14	<b>teacher</b> 124:13	69:10 70:22
160:10 173:24	97:18	113:13 114:11	124:13	83:8 87:17,23
174:2,9	<b>system</b> 56:11	116:23 118:11	<b>team</b> 148:5,19	88:2,3,4,5,10
<b>supported</b>	112:15 118:1	118:23 119:14	149:5,22	88:11,17,18
139:16 144:19	119:12 135:4	123:13,24	156:14 175:9	91:19 96:23
<b>supporting</b>	138:25 140:2,4	131:17 140:8	<b>teams</b> 132:1	101:1,25
140:13 176:1	140:18	149:24 157:5	159:10	103:11,17
<b>supports</b> 140:4	<b>systemic</b> 115:17	164:2	<b>technology</b>	104:13 106:22
175:21	<b>systems</b> 135:14	<b>talked</b> 15:23	152:18	112:21 115:14
<b>suppose</b> 111:3	149:15 152:15	72:11 109:18	<b>teen</b> 9:7,12 12:5	117:13 120:3
121:20 122:14		113:15 123:11	<b>teens</b> 82:2	124:6 128:9
138:22 143:10	<b>T</b>	123:22 128:11	<b>telephone</b> 47:25	130:7 131:17
<b>supposed</b> 17:3	<b>table</b> 66:17 67:5	129:18 141:13	174:1	134:5,8 136:3
33:10 36:13	<b>tackle</b> 14:18	161:7 168:9	<b>tell</b> 3:6,22 4:24	137:18,20
74:9,17	<b>tackling</b> 134:21	<b>talking</b> 6:18	5:20 12:7 18:1	139:19 140:24
<b>sure</b> 7:14 16:25	139:4 157:12	28:4 63:11	21:21 24:2	140:25 142:10
31:14 42:7	<b>take</b> 6:18 8:18	66:7 84:10	25:25 27:15,19	142:11 145:1
56:2 59:11,12	8:22 10:2 15:4	98:22 135:25	35:4 37:5 40:6	146:9,10,10,11
59:12 68:17	16:2 29:12	154:17 155:22	45:22 46:18	146:17,18
85:19 95:5	32:8 38:17	156:15 158:19	47:18 54:10	169:18,25
98:11 106:11	39:13 40:12	160:19 171:8	56:6 72:4 85:3	170:2,4 171:16
134:24 135:21	43:24 44:22	<b>talks</b> 113:18	95:16 108:19	171:17,18,20
153:8 169:12	45:7 51:14	160:6	114:9 126:3	171:21,21
169:21 170:17	54:14,23 55:10	<b>tall</b> 28:10	140:17 148:12	172:9 176:8,9
<b>Surely</b> 15:2	61:8 68:25	<b>tangible</b> 93:1	<b>telling</b> 5:9 66:16	176:10
<b>surprised</b>	69:4,16 70:19	96:6	72:2 116:17	<b>Thanks</b> 111:3
131:11	71:2 75:21	<b>targeted</b> 14:18	<b>temporary</b> 11:2	<b>theme</b> 118:6
<b>surrounding</b>	78:10,22 79:2	<b>tasked</b> 138:7	<b>tension</b> 125:17	150:7 153:25
52:8 99:12	85:18 99:24	<b>taste</b> 28:14	130:12,19	159:19 161:3
131:4	102:8 116:25	<b>tasting</b> 65:13	<b>term</b> 95:25 99:6	162:6 165:13
<b>survival</b> 100:18	117:6 137:6	<b>taught</b> 46:14	100:9 102:21	167:18 168:6
101:21 123:22	140:7 141:3	<b>taxi</b> 24:18 25:8	<b>termed</b> 99:18	<b>themes</b> 147:13
<b>survivors</b>	159:20 167:11	40:3,5	<b>terminologies</b>	158:9
174:14,20,25	169:1 170:11	<b>Taylor</b> 146:12	101:18	<b>they'd</b> 8:19
176:2	171:8 172:7	146:23,24	<b>terminology</b>	20:13 21:24,25

22:1,5 23:1,16 24:17 25:19,19 26:1,8,10 28:7 31:22 32:16 35:24 36:6,23 42:11 43:25 47:25 50:18 57:23 58:24,24 60:16 62:23 79:8,9 <b>thing</b> 24:15 57:11 67:9 75:11 95:13 101:8,16 121:20 124:3 124:19 129:7 130:1,22 133:21 139:10 140:15 143:16 154:15 163:23 <b>things</b> 2:5,16,25 8:16,20 9:22 12:25 15:9 22:21 33:23 35:18 36:17 37:3 42:10 43:20 57:8,13 59:21 63:7 69:13 71:13,25 76:17 78:19 94:17 96:2 99:18 101:6 104:19 105:19 107:20 118:17 118:19 120:1 125:11 126:2 130:17 133:22 133:25 134:1 139:1 140:11 140:17 148:3,7 153:10,15 154:18 156:18 156:20 159:11 160:19 161:16 162:21 163:6,6 163:8 164:5,23 168:14 170:10	171:9 <b>think</b> 1:8,22 3:17,25 4:12 4:14 7:1,11 8:2 13:13 16:17 20:8 21:10 22:17 26:20,24 27:10 28:8 30:8,14,25 31:2,3 32:6 37:4,5,12 38:6 38:11,14,23,24 39:11,22 40:9 42:1 43:11 44:21,22,24 45:13,23 47:9 47:16 48:21,24 51:16,22 55:12 56:1,11,14,22 56:25,25 57:15 58:6,19,21,24 59:14,15 60:11 60:18 61:5,10 62:5,5,6,8,11 62:12,13 64:18 64:22 65:7,16 66:21 67:2,2 67:10 69:12,14 69:20 70:13 71:21 72:4,9 72:23,23,24,25 73:11,25 74:8 74:10 75:14,18 76:4,7,19,19 77:2,21 79:6 83:4,9,18 84:4 85:1,4 86:22 87:8,15 91:25 92:2,25 93:5 93:22,23 94:6 94:14 95:15 96:8 97:8 98:3 98:9,21 100:8 101:4,14,17,22 101:22 103:1,2 103:5,22,25 104:3,6,17,24	105:1,4,5,7,12 105:18 106:3,4 106:10,17,18 107:1,16,20 108:2,10,12 109:11 110:13 111:8,22,22,24 111:25 112:3,4 112:5,6,10,13 113:8 114:12 114:12,16,21 115:10,17,22 116:9,10 118:5 118:13 119:5 119:16,19 120:15 121:23 121:25 122:1,9 122:13 123:9 124:4,21,21,23 124:23,25 125:11,14,17 126:20,25 127:17,18,20 127:24 128:6 128:11,15,19 130:21 131:2,3 131:10,13,14 131:19 133:22 134:17,19,20 135:3,7,9,11 135:12,14,18 135:23 136:9 136:11,13,22 136:24 137:2,3 137:15 138:9 138:11,24,24 139:13,21,23 140:4,21 143:18,22,25 144:5,10,19 145:17,20 146:1,4,18 149:7 150:20 151:10,17,20 151:25 152:6 152:16,22 153:2,13,15	154:16,17 155:9,10,12,16 156:11,16,24 157:9,10 158:8 158:11,17,19 159:2,4,5,9 160:1,12,14,16 160:21 161:3,5 161:9,12,25 162:3,5,24 163:10 164:2 164:13,16,16 165:16,25 166:7,19 167:17 168:14 168:15,16 170:12 <b>thinking</b> 40:17 101:3 103:11 <b>third</b> 156:3 162:6 <b>thought</b> 21:12 25:23 26:23 56:20 63:5 65:9,15 74:20 82:9 107:15 166:14 <b>thoughts</b> 12:19 <b>threat</b> 80:10 81:1 <b>threaten</b> 79:23 79:24 <b>threatened</b> 31:17 79:7 <b>threats</b> 4:10,14 80:8,11 127:16 <b>three</b> 13:7 17:12 17:13 19:12 21:19 29:17 31:5 41:21,22 42:2 50:5,8 61:10 62:4,14 67:11 79:3 98:25 120:11 124:23 133:12 149:18 175:12 <b>throat</b> 37:22	<b>throwing</b> 13:21 71:13 <b>thrust</b> 158:25 <b>Thursdays</b> 34:18 <b>tick</b> 106:19 <b>tick-box</b> 158:3 162:16 167:8 <b>ticked</b> 121:14 <b>tied</b> 40:21 <b>tight</b> 108:10 <b>time</b> 4:1,17 5:16 9:24 10:12 11:24 13:3 15:16 22:18,20 26:14 27:6 31:24 32:22 33:20,25 34:2 39:2,14,24 41:15 43:10,23 44:1,4 46:15 47:16 48:8,19 49:4,7,8,9,21 49:23 50:23 53:15 54:17 58:13 60:21 61:12 63:5,19 65:1,8 71:12 72:13,25 73:10 73:24 74:21 76:3 77:12 79:17 80:15 83:5,13 84:25 88:7,8,24 89:4 97:16 98:20 101:2 109:23 110:13 115:6 124:24 127:22 143:21 152:23 155:1,5,8,11 155:17 159:17 167:11 171:7 <b>times</b> 4:3,10,12 6:3 7:1 16:14 17:15 19:20 22:20 23:25 24:15,22 25:11
---	---	---	---	---

37:6,9 42:14 52:15 53:16 84:11 174:4 <b>timescale</b> 17:16 <b>tiny</b> 44:11 <b>tired</b> 30:18 <b>today</b> 151:1 171:24 172:7 172:14 176:7 <b>toilet</b> 28:18,18 65:17 <b>told</b> 8:20 9:12 10:5 17:17 19:4 20:13 22:10,17,20 24:24 30:4 40:19 41:2,22 50:2 57:21,24 57:25 59:6 61:13 62:18 64:10 67:2 74:13 75:14,15 76:25 79:23 80:2 84:16 85:7,16 116:20 141:22 <b>tomorrow</b> 176:9 <b>tool</b> 121:19 155:20 156:16 163:14 <b>tools</b> 128:14,14 <b>top</b> 17:14 40:21 66:17 142:7 <b>topic</b> 38:22 83:1 83:6 167:16 <b>topics</b> 1:22 2:7 55:12,12 147:7 <b>torn</b> 50:4 <b>total</b> 51:22 149:20 <b>totally</b> 116:21 117:10 129:21 137:11 160:16 166:13 <b>touched</b> 168:7 <b>Tower</b> 173:16 <b>town</b> 78:13	80:14 <b>trace</b> 48:1 <b>track</b> 48:1 <b>tracked</b> 133:15 <b>tracking</b> 155:14 <b>traditional</b> 132:6 <b>trafficked</b> 153:20 170:22 <b>trafficking</b> 89:20 99:3 147:25 153:9 155:13 <b>train</b> 95:15 113:11 119:13 <b>training</b> 113:6 113:11,25 114:21 118:21 118:22 119:23 119:25 139:24 145:12,12 173:10 <b>training/educ...</b> 113:5 <b>transgender</b> 127:9 165:21 <b>transient</b> 165:21 <b>transition</b> 161:12,18 167:25 <b>Transitional</b> 167:19 <b>trapped</b> 87:4 <b>trauma</b> 32:2 38:1 105:11 <b>traumas</b> 32:18 <b>traumatised</b> 124:1 <b>traumatising</b> 83:25 <b>trawl</b> 103:24 <b>treat</b> 82:21 <b>treated</b> 8:10 9:15 17:22 48:16 <b>treating</b> 12:6 82:21	<b>treatment</b> 8:4 14:13 <b>trial</b> 47:17 48:22 49:11,13,13,16 50:18,23 63:8 63:14 83:4,18 87:15 <b>triated</b> 151:8 <b>trailing</b> 121:19 <b>trials</b> 49:18 85:2 85:4 <b>tried</b> 5:1,2,3 6:13 9:18 11:9 12:11,11,12 48:11 64:14 65:14 78:18 79:17 80:3,11 80:12 84:22 109:21 <b>trilateral</b> 152:1 <b>trip</b> 64:6,7 <b>Tropicana</b> 28:10 <b>trouble</b> 22:4,7,8 22:15 23:3 126:24 <b>troubling</b> 100:11 <b>true</b> 1:18 88:23 89:3 <b>truly</b> 54:7 <b>trust</b> 12:1 14:17 66:1 164:20 <b>truth</b> 7:11 <b>try</b> 2:6,11 6:15 8:18 9:22 14:13,16 16:4 16:5 19:15,16 25:12 42:5 46:22 47:3 78:25 83:8 85:2 101:1 113:12,16,25 131:22 141:18 158:20 <b>trying</b> 5:3,22 11:17 14:3,4	14:20 17:20 19:8 29:2 43:14 58:22 75:10 84:9 96:10 102:22 112:5 121:18 130:6 132:9 134:1,24 135:11,21 148:9 159:10 <b>Tuesday</b> 1:1 <b>turn</b> 22:2 40:18 52:17 <b>turned</b> 29:16 30:5 31:8 33:11 48:1,3 59:20 <b>turning</b> 52:24 63:21 <b>TV</b> 44:11,11 <b>tweaked</b> 119:20 <b>twice</b> 72:11 <b>two</b> 1:6 15:20 28:10 29:17 33:16 40:16,17 61:24 67:11 68:10 71:16 74:8 96:1 97:9 99:9 101:5,7 104:18 105:13 115:6 130:7 131:20,21 142:12 147:9 149:12,19,19 159:6 162:14 <b>twofold</b> 152:13 <b>tying</b> 13:21 <b>type</b> 22:11 39:15 124:19 125:16 163:22 <b>types</b> 107:7,18 123:10 <b>typology</b> 106:25 107:6,17,21 108:11,25 109:14 110:25 <b>typology-type</b>	108:3 <hr/> <b>U</b> <b>UK</b> 98:23,24 141:11 148:5 151:18 155:15 156:15 173:19 <b>ultimately</b> 51:5 86:22 <b>unacceptable</b> 154:14 <b>under-age</b> 22:24 <b>under-reporti...</b> 153:17 <b>underage</b> 34:1 35:15,17 <b>underlying</b> 141:12 <b>undermine</b> 127:2 <b>undermining</b> 100:15 <b>underneath</b> 4:7 66:17 <b>underpin</b> 129:5 <b>underpinning</b> 102:20 129:2 <b>underreprese...</b> 166:17 <b>underreprese...</b> 166:2 <b>understand</b> 1:23 2:1 29:21 33:10 39:3,13 39:14 53:18 55:14 65:25 67:18 87:9 100:10,13 101:2 102:25 103:9 104:9 105:8 110:20 113:16 132:13 134:1 141:15 141:24 143:1,6 144:5 147:5 148:25 150:22 156:18 157:14
--	---	--	--	---

<p>163:24 164:18 164:24 165:9 <b>understanding</b> 21:10 36:17 90:13 97:14 98:16 101:13 101:20,24 102:23 103:6 103:23 105:7 106:3,18 111:23 112:1,8 114:23 116:3 117:22 121:2 124:25 126:13 126:17 129:16 142:24 143:9 147:22 148:8 148:22 <b>understandings</b> 104:11 127:4 <b>understood</b> 66:8 66:12 <b>undertaken</b> 90:9 <b>underwear</b> 66:20 <b>undiagnosed</b> 163:21 <b>unfamiliar</b> 54:9 <b>unfortunately</b> 125:23 151:8 <b>unhelpful</b> 92:25 98:3 <b>unhelpfully</b> 95:22 108:8 <b>unintended</b> 113:13 <b>unique</b> 123:9 <b>unit</b> 31:18,22 62:23 91:12 130:25 131:13 162:2 <b>units</b> 148:5 150:2 157:25 <b>University</b> 89:21 90:8 <b>unknown</b></p>	<p>107:13 <b>unloved</b> 20:11 <b>unmet</b> 98:18 99:9,14 117:20 <b>unpack</b> 113:12 114:1 <b>unregulated</b> 167:5 <b>unrelated</b> 34:6 <b>unstable</b> 56:18 59:9 <b>unstatemented</b> 163:22 <b>unwanted</b> 20:11 <b>upset</b> 19:14 21:3 30:15 38:3,8 64:12 73:24 75:2,13,22 85:25 <b>upstairs</b> 35:22 58:25 65:17,18 <b>uptake</b> 166:21 <b>URNs</b> 172:19 <b>us'd</b> 11:21 <b>use</b> 65:20 76:16 81:14 96:16 102:9,20 108:8 113:9,9 114:12 114:15 118:14 121:21,23 122:8 125:12 130:9 152:17 156:15,19 173:9 <b>useful</b> 95:13 97:5,6 107:16 107:18 <b>uses</b> 114:4 <b>usually</b> 89:10 <b>utilise</b> 156:19</p> <hr/> <p style="text-align: center;"><b>V</b></p> <hr/> <p><b>vaginal</b> 78:2 <b>valuable</b> 163:2 <b>value</b> 163:1 170:18 <b>varied</b> 167:13</p>	<p>172:11 <b>variety</b> 90:19 <b>various</b> 6:4 9:20 32:2 37:1 122:23 150:14 158:9 169:18 <b>venture</b> 20:9 <b>verbal</b> 50:5 <b>verbally</b> 81:8 82:17 <b>versed</b> 164:17 <b>version</b> 109:21 <b>versus</b> 92:17 <b>victim</b> 10:5 15:11,25 16:8 20:9 24:7 26:5 26:14 27:15 28:2,15,18 29:2,11,15 30:4 32:17 33:2 39:7 50:14 52:13,13 93:13 102:7,12 110:5 115:12 152:3 156:6 161:23 <b>victim-blaming</b> 112:24 114:4 159:23 <b>victimhood</b> 127:13 <b>victims</b> 49:22 85:13 90:24 98:13 120:9,13 120:13 121:6,8 127:13,14 128:5,8 155:13 155:14 156:9 159:20 160:15 161:10 165:15 165:23,23 166:18 174:7 174:20,24 175:16 176:1 <b>victims'</b> 117:25 <b>video</b> 86:1,2,7 86:10</p>	<p><b>view</b> 32:6 87:3 97:3 113:3 124:18 130:20 138:5 160:13 <b>views</b> 138:13 163:17 166:21 <b>violence</b> 4:2,21 5:19 10:1 13:17,19 33:2 34:24 89:20 171:13 173:7 174:15 175:23 <b>violent</b> 6:10 79:19 <b>vision</b> 152:2 <b>visited</b> 148:5 <b>visiting</b> 173:20 <b>vitally</b> 150:20 <b>Vivienne</b> 175:2 <b>vodka</b> 23:14 <b>voice</b> 2:11 163:12 <b>voices</b> 66:21 <b>volatile</b> 9:7,8 10:17 <b>voluntary</b> 6:7 152:10 <b>vomit</b> 29:1,7 30:10,13,23,24 <b>vomited</b> 29:1 <b>vomiting</b> 82:2 <b>vulnerabilities</b> 99:14 117:17 129:21,23 153:6 154:1 <b>vulnerability</b> 14:22 16:20 98:18 116:25 117:2,6 120:23 122:4,11 125:2 125:7 127:5 153:4 <b>vulnerable</b> 117:4 121:11 152:3 153:3,4</p> <hr/> <p style="text-align: center;"><b>W</b></p> <hr/>	<p><b>wage</b> 18:6 <b>waiting</b> 86:6 124:8,12 <b>Wales</b> 90:10 97:11 128:17 128:19 143:23 144:5,6,11,20 144:22,24 <b>walk</b> 14:4 34:13 42:19,20 85:10 <b>walked</b> 28:18 30:6,7 66:13 67:5 85:23 <b>walking</b> 34:14 42:13 78:20 80:5 <b>walls</b> 71:14 <b>want</b> 2:13 4:15 4:24 8:19 11:11 12:21 20:1,2 25:3 39:13 46:18 63:3 65:6 75:5 75:12 80:12,25 82:12 87:14,23 88:8 89:17 90:12 101:1 110:2,12,24 113:23,24 114:10,14 125:4,9 128:23 135:17 139:11 139:25 140:18 145:7 165:22 <b>wanted</b> 9:16 11:16,16 12:13 18:3,17 20:12 22:15,18 36:21 40:13 50:3 57:3 62:20 63:1 66:14 72:18 79:16 84:17,23 103:17 159:4 <b>wanting</b> 123:21 128:1 <b>wants</b> 93:14</p>
--	---	--	---	--

109:24 110:15	105:22,23	<b>weekends</b> 7:25	<b>west</b> 174:9 175:9	77:11,13 79:6
<b>wardrobe</b> 40:22	107:18 108:7	<b>weeks</b> 50:18,21	<b>wet</b> 30:11	81:3 83:2,10
40:25	110:8 111:7	73:1 75:19	<b>whilst</b> 79:19,20	83:23 84:12
<b>warning</b> 50:9,11	112:18 115:4	104:20 131:20	96:15 145:18	87:20,23 88:6
124:17	118:9 120:1,14	150:1	157:10	102:2 107:2
<b>warnings</b> 50:5,8	128:16 131:15	<b>weights</b> 65:20	<b>wholly</b> 117:14	125:25 126:14
120:23	133:8,24,25	65:21	<b>wide</b> 108:17	126:20 146:23
<b>warped</b> 33:5	134:18,19	<b>weird</b> 28:22,24	111:6	150:9 152:17
<b>Warwick</b>	136:19 137:12	<b>welcome</b> 1:3	<b>wider</b> 90:17	157:4 158:8,14
161:25	140:5,14,16	92:11	99:12 104:15	159:22,24
<b>Warwickshire</b>	141:21 142:14	<b>Welfare</b> 57:18	153:8 163:15	160:6 162:8
158:11	142:21 143:4	<b>well-being</b> 135:5	<b>wild</b> 166:10	166:20 169:19
<b>wash</b> 30:23	144:14 145:11	135:16 139:5	<b>Williams</b> 175:7	171:22 173:2
<b>washing</b> 29:6	146:2 148:20	139:17 144:16	<b>willing</b> 39:15	176:17,19
30:11	148:21 152:12	144:21,22	117:5	<b>witnessed</b> 13:19
<b>wasn't</b> 5:15	152:15,16	<b>well-received</b>	<b>window</b> 4:6	<b>witnesses</b> 1:6
14:16,17,18,22	161:10 165:9	156:23	57:23	85:13 142:14
15:18 17:20	165:25 168:21	<b>well-understood</b>	<b>windows</b> 13:21	146:10 172:15
18:3 19:5	169:11 170:14	150:18	79:9,10 80:9	<b>witnesses'</b> 89:7
21:10 26:18	170:15	<b>Welsh</b> 103:15	<b>wish</b> 141:2	<b>woman</b> 115:8
30:17 35:14	<b>ways</b> 90:19	138:21	157:17	<b>women</b> 60:18,24
39:8 42:5	91:13 106:15	<b>went</b> 5:9 6:4	<b>Wistrich</b> 173:5	61:21 160:10
44:13,16 45:25	112:6 115:19	7:24 12:8,8,25	173:6	165:19 166:17
50:23 58:6	121:4,16 134:3	13:9 20:4 24:7	<b>withdrew</b> 54:22	173:7 174:16
59:7,16 60:16	135:7 136:24	27:6 33:8 34:2	88:6 171:22	175:22
63:10 64:4	138:22 139:14	34:16 35:9	<b>witness</b> 1:12,16	<b>women's</b> 38:14
74:13 75:1	141:20 142:15	39:22 40:24	3:3 4:14 5:12	173:6 175:13
84:2,7 97:21	146:7	41:10 42:2	5:18 7:3 8:2	175:21
98:6 107:16	<b>we'll</b> 68:25	44:18 48:9,18	9:10,20 10:15	<b>women-led</b>
121:16	<b>we're</b> 24:5 25:8	48:24 49:9	10:21 11:24	175:25
<b>wasting</b> 22:18	29:13 61:8,13	52:19,22,23	13:3,25 14:7	<b>wonder</b> 70:9
22:20	151:23 164:16	53:3 58:3	15:24 16:7	171:1
<b>watch</b> 23:2	171:8	59:13,25 60:3	17:24 18:22	<b>wondering</b>
<b>watching</b> 29:5	<b>we've</b> 61:2,12	60:5,6 61:20	19:18 21:15	142:17
79:15 93:5	162:24	61:21,22,23	23:18 24:14	<b>word</b> 45:1,13
<b>wave</b> 26:1	<b>weapon</b> 37:16	62:12 64:5	25:22 26:16	112:11 113:9,9
<b>way</b> 9:23 16:22	<b>wear</b> 41:12	65:16,17 66:24	28:5 29:25	170:17,18
23:17 25:9	<b>wearing</b> 67:7	67:6 72:21	32:25 33:4	171:1
26:1 31:21	80:16,18	75:25 78:11,12	39:1,25 43:9	<b>words</b> 8:24 42:4
46:4 50:7 62:1	<b>website</b> 172:13	78:12 80:9	45:2 47:15	42:18 47:6
73:21 82:21	176:6	85:11,22 86:1	49:1,5 54:4,6	81:15 131:8
83:8,11 86:11	<b>Wedger</b> 174:17	86:6 147:12	54:16,22 55:2	160:9
92:3 95:6 97:6	<b>Wednesday</b>	151:7 169:12	55:3 57:15	<b>wordy</b> 98:5
98:16 100:14	176:13	<b>weren't</b> 2:25 3:1	61:16 62:16	103:25
100:14 101:19	<b>week</b> 31:10	3:1 8:20 19:4	63:15,18 67:17	<b>work</b> 12:2,21
101:24 102:17	49:13 51:1	23:12 47:6,13	69:18 71:3,11	91:15 109:19
102:18,22	75:15 102:3	47:20 150:5	73:3,12 76:2	113:7 116:1,3



116:24 118:21 119:1,9 121:16 122:19 125:5 125:19,19 126:12 131:25 133:2,13,14 134:20 136:1 136:25 140:5 140:10,14,16 140:23 142:2,2 145:4,6,6,7 147:19 151:4,5 152:10 159:16 162:9,25 164:17,20,21 164:22 165:1 169:2,7 173:8 174:7 176:1 <b>worked</b> 7:22 64:14 73:2 90:1,2 159:13 159:15 <b>worker</b> 7:20,22 46:16,19,24 47:2,10 71:24 73:7,8 74:25 75:7 82:8 85:20 124:13 124:14 162:2 <b>workers</b> 7:18 11:9 12:20 43:1,2,5,6,8,8 52:15 61:6 62:9 71:23 87:1 126:12,15 139:25 140:5 160:9 173:11 <b>working</b> 12:12 12:19,23 44:8 75:16 92:22 118:25 119:7 133:3 141:11 147:20 151:24 166:24 167:16 167:22 169:11 169:16 <b>works</b> 101:9	152:20 <b>worried</b> 11:21 74:18 80:21 <b>worry</b> 68:21 <b>worse</b> 13:2 17:11 57:9 59:22 75:25 134:15 <b>worst</b> 13:15,16 42:14,15 100:22 <b>worst-case</b> 139:10 <b>worth</b> 83:5 <b>wouldn't</b> 12:24 19:13,16 29:14 31:23 35:24 36:10,25 37:18 40:7 52:17 67:14 74:24 78:23,23 87:14 87:14 100:1 <b>wrap-around</b> 140:10 <b>wrecked</b> 42:16 <b>write</b> 159:4 <b>writing</b> 123:25 141:3 142:9 143:20 145:3 <b>written</b> 92:20 110:17 130:9 139:20 142:1,5 <b>wrong</b> 15:16 19:15 22:11 63:16 72:2,10 75:3 85:4 104:24 115:9 134:18,19 139:10 159:9 169:5,9 <b>wrongun</b> 15:10 <b>wrote</b> 51:25 52:10 153:16 159:4	<hr/> <b>Y</b> <hr/>	59:18 64:3 90:3 91:10 92:16,18,22 93:3,11 94:1,2 94:16 95:2,21 97:15,23,25 98:8,10,13,14 99:5,10,16,21 100:2,10,16,20 100:22 101:13 101:20 102:19 103:7,8 104:7 104:9,10 105:3 105:9 106:5,7 106:20 108:18 108:23 109:9 109:12 110:9 110:22 111:1,1 112:9,19 114:7 114:8,17 115:5 115:12,21 116:4,5,6,8 117:16 119:2,5 119:8,14,22 121:14 123:12 126:22,23 127:2,7,9,10 127:10,11,17 127:25 128:7 130:2 131:5,5 131:6,15 134:20,23 135:8,10,17,20 136:15,21 138:4,10,11,12 138:15 139:6,7 139:18 140:1 144:13 154:12 154:20,21,25 155:4,13,14,18 158:6 160:18 160:21,22 161:18,22 162:18 163:21 164:22 165:25 166:2,16,17 168:1,20 169:7	<b>young-looking</b> 34:19 35:3 <b>younger</b> 3:12 90:25 166:14 <b>youth</b> 161:7 173:17
		<hr/> <b>Z</b> <hr/>	<b>Zinc</b> 149:13 <b>Zlaka</b> 175:24	
		<hr/> <b>0</b> <hr/>	<b>015</b> 126:9 <b>026</b> 168:5	
		<hr/> <b>1</b> <hr/>	<b>1</b> 164:2 176:17 176:18 <b>1.19</b> 88:12 <b>10</b> 34:12 36:20 54:1 56:7 59:19 61:17 <b>10-minute</b> 146:14 <b>10.30</b> 1:2 176:13 <b>100</b> 10:24 13:1,4 13:9,13 15:5 16:7,17 17:10 56:2 <b>101</b> 10:23,24 11:25 13:5 <b>10th</b> 62:14 <b>11</b> 63:19,20 64:19 65:1 71:18 73:4 81:13 149:20 <b>11.32</b> 45:8 <b>11.45</b> 45:7,10 <b>11.59</b> 54:24 <b>12</b> 6:20,22,24 7:4,12 8:1,12 13:24 37:9 43:7 63:21 68:7 71:7,18 72:12 78:17 <b>12-year-olds</b> 36:12	

<p><b>12.07</b> 55:1  <b>12.30</b> 69:6  <b>12.46</b> 69:8  <b>12.48</b> 70:23  <b>12.54</b> 70:25  <b>13</b> 26:15 28:5  71:4 73:13  77:15,23  104:17  <b>132</b> 51:10,13  <b>134</b> 176:23  <b>13th</b> 71:6  <b>14</b> 2:19 26:15  33:24 51:23  <b>14-year-old</b>  26:12  <b>14/15-year-old</b>  53:20  <b>146</b> 176:24  <b>15</b> 32:25 33:14  33:20 35:23  43:7  <b>15-</b> 34:19 35:3  <b>15-year-old</b>  166:6  <b>15th</b> 28:4  <b>16</b> 77:15 161:18  <b>16-year</b> 39:10  <b>16-year-old</b>  34:20 35:3  <b>17</b> 6:9 33:14  <b>170</b> 177:1  <b>18</b> 13:24 38:24  52:6 93:11  161:18,19,22  161:23  <b>18-year</b> 44:13  <b>18-year-olds</b>  36:12  <b>18th</b> 35:6,9  43:10  <b>19</b> 64:19 65:1  71:17 73:13,14  166:7  <b>19-year-old</b> 73:6  <b>1989</b> 174:7  <b>1993</b> 6:16 55:20</p>	<p><b>1998</b> 148:15,17  148:21 150:25</p> <hr/> <p style="text-align: center;"><b>2</b></p> <hr/> <p><b>2</b> 1:3 15:25 20:9  24:7 26:5,14  27:15 28:2,15  28:18 29:2,11  29:15 30:4  32:17 56:12  90:14 96:24  150:9  <b>2.15</b> 88:9,10,14  <b>2.2</b> 90:14  <b>2.20</b> 88:16  <b>2.26</b> 157:4  <b>2.34</b> 158:15,19  <b>2.35</b> 158:22  <b>2.38</b> 158:17  <b>2.8</b> 91:20  <b>20</b> 35:23 39:25  50:19 53:1  76:24 173:24  <b>200</b> 148:5  <b>2003</b> 55:25  61:15 148:19  <b>2004</b> 62:8  <b>2005</b> 56:1  <b>2007</b> 76:7  <b>2008</b> 90:10  <b>2009</b> 38:11 90:5  92:6 121:13  155:12  <b>2010</b> 83:10  <b>2011</b> 55:25  157:11  <b>2012</b> 49:5  174:12  <b>2013</b> 49:6,7  <b>2013/2014</b> 83:16  <b>2014</b> 48:22  49:10 53:5  109:22  <b>2016</b> 141:10  173:7  <b>2017</b> 92:1,4  109:20</p>	<p><b>2018</b> 47:16  48:19,22 49:13  <b>2019</b> 48:22  49:12,17  <b>2020</b> 1:1 106:23  176:13  <b>21</b> 51:8  <b>22</b> 1:1 160:6  <b>23</b> 176:13  <b>25</b> 90:4  <b>28</b> 149:18  <b>28-year-old</b>  26:13  <b>29</b> 49:1,5</p> <hr/> <p style="text-align: center;"><b>3</b></p> <hr/> <p><b>3.14</b> 161:2  <b>3.15</b> 89:15  <b>3.3</b> 120:5  <b>3.38</b> 146:20  <b>3.48</b> 146:22  <b>30</b> 34:4  <b>30-year-old</b> 26:3  <b>302</b> 51:11  <b>32</b> 107:5  <b>360</b> 86:8</p> <hr/> <p style="text-align: center;"><b>4</b></p> <hr/> <p><b>4</b> 56:19,22  <b>4.1</b> 122:20  <b>4.10</b> 163:10  <b>4.30</b> 146:14  <b>4.33</b> 176:11  <b>4.4</b> 112:22  <b>42</b> 81:3  <b>44</b> 81:21</p> <hr/> <p style="text-align: center;"><b>5</b></p> <hr/> <p><b>5</b> 9:23 156:7  <b>5.00</b> 24:12  <b>50</b> 39:19 52:1,6  <b>50/50</b> 130:24  <b>55</b> 176:19,20</p> <hr/> <p style="text-align: center;"><b>6</b></p> <hr/> <p><b>6</b> 156:9  <b>6.6</b> 165:20</p>	<p><b>66</b> 84:12  <b>69</b> 86:16</p> <hr/> <p style="text-align: center;"><b>7</b></p> <hr/> <p><b>7</b> 2:17 58:21  156:10 164:2  <b>7.00</b> 24:1,9,13  <b>71</b> 86:16  <b>73</b> 150:1  <b>7th</b> 3:4</p> <hr/> <p style="text-align: center;"><b>8</b></p> <hr/> <p><b>8</b> 49:13 59:20  164:7  <b>8.4</b> 167:15  <b>80</b> 149:20  <b>81</b> 149:11  <b>88</b> 176:21  <b>89</b> 176:22,23</p> <hr/> <p style="text-align: center;"><b>9</b></p> <hr/> <p><b>9</b> 59:20 62:5  164:8  <b>9.8</b> 168:6</p>
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