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Date 8th. July 2014

IN THE FAMILY COURT
SITTING AT MILTON KEYNES.

Before:

HER HONOUR JUDGE BROWN

Re B,O and E (FACT FINDING, CARE PROCEEDINGS)

Ms. Hefford for the **Applicant Local Authority.**
Mr. Hamilton for the **Mother.**
Ms. Hartnet for the **Father.**
Ms. Guha for the **Child**
(By their Children's Guardian)

Judgment handed down on 8th. July 2014

Judgment

Her Honour Judge Brown sitting at Milton Keynes.

On 26th. June 2014 I heard submissions from all the parties having heard lengthy oral evidence over several days. I told the parties that I intended to make a Care Order and a Placement Order in respect of each of the three children. These are the reasons for those decisions.

The Parties.

The court is concerned with three children who shall be referred to as B, O and E. B is now 4 years old, O is 3 years old and E is rising 1 year old.

Their Mother is Ms. L who shall be referred to throughout as Mother. The identity of the father of B is unknown. Mother put forward the name of one man. DNA testing proved he is not the biological father. The father of O and E is Mr. F. Throughout this judgment he shall be referred to as Father. Mother and father have been present throughout these proceedings and are represented.

The local authority is Buckinghamshire County Council.

The children are represented through the Children's Guardian, Ms. Rothman

The applications before the court.

The local authority has applied for Care Orders and Placement Orders in respect of all three children. The care plan is to place B separately from her two siblings, who the local authority hope will be placed together. B has commenced therapy and the local authority do not consider that B will be ready to move placement, even if one is found for her until April 2015 at the earliest. B's current foster carer may put herself forward as B's long term foster carer if a long term an adoptive placement cannot be found.

The children are currently in foster care pursuant to interim care orders. Originally, B and E were placed together and O was placed on her own. On 10th January 2014, E was moved to O's foster placement. This was undertaken with the consent of the parents and the support of the Children's Guardian.

Findings sought.

The key issues in the case are as follows;

1. Mother's mental health and the impact this has on her ability to meet her children's needs.
2. The level of domestic violence between the parents and the impact this has had on the children.
3. Whether mother and/or father separately and/or together have exposed B to sexually inappropriate experiences and/or have directly sexually abused B.

4. Mother and/or Father's ability to protect the children from each other and third parties depending upon the findings I make.

In respect of these issues the local authority has filed and served a revised schedule of findings to prove the section 31 threshold criteria in respect of each of the three children;

FINDINGS SOUGHT BY THE LOCAL AUTHORITY.

(I) The parents have sexually abused B

The Mother has exhibited inappropriate sexual behaviour in front of B

On 8.10.13 B put her hands in front of her pyjama bottoms and appeared to be scratching at her vaginal area. She said 'This is what Mummy does'. She then pulled her knickers to one side, pulled her vagina apart and inserted her fingers into her vagina, wiggled them about, put her finger to her nose and then said 'Pooey'. B then said 'And she does this' and pulled down her pyjama bottoms, put her finger between her bottom cheeks and said 'Mummy puts her finger in her mouth'

Mr F has sexually abused B by putting his penis into her vagina, slapping her on the bottom

(i) B has stated 'Daddy makes me smell his willy. I don't like it because it stinks ... and he slaps me' and 'Daddy puts his willy in my butterfly [vagina] ... he locks me in my room ... he slaps me on the bottom...'

(ii) On 11.10.13 B commented 'I don't like Daddy's willy'

(iii) On 15.10.13 B commented twice: 'Does Daddy put my willy in my bum bum?'

(II) The parents have over-chastised the children, causing them physical harm, including smacking the children and an incident upon which Mr F accepted a Police caution for assaulting O and an incident upon which B received unexplained bruising. The parents have also failed to seek appropriate medical attention when B received a large swelling to her head after an accident

(i) Father received a Police caution for assaulting Olivia on 23.1.12

(ii) B has stated: 'I won't get smacked here will I? Mummy smacks. Mummy hurts me ... I don't like it'

(iii) On 30.8.13 B told the SW: 'I like that I can leave my bedroom here 'cos when I was at home I had to stay in my bed lying down ... [and then after she spilt some water] ... Daddy slaps me'.

(iv) On 30.8.13, B told SW Ruth Ayres: ‘Mummy smacks me, my Mummy hates me’.

(v) On 25.9.13 B stated to a teacher: ‘Do your Mummy and Daddy smack you? ‘Cos mine do’.

(vi) On 2.10.13 B told the foster carer: ‘Mummy bites me and locks me in my room and says that a strange man will come and get me. I don’t want to see Daddy because he smacks me and O and Mummy and Mummy smacks Daddy’.

(vii) B stated to the foster carer: ‘I’m naughty aren’t I ... No... Mummy slaps my face and laughs...’.

(viii) On 15.8.13 B was found to have ten bruises to her legs and buttocks and neither parents has been able to give an adequate explanation of the cause thereof.

(ix) On 15.8.13 the parents did not seek medical attention after B suffered an accident and received a large egg shaped swelling to her head. They did not report this incident to the Social Worker until they were asked about it during a home visit. The parents must have known that B had received this injury and how B had received this injury and further, that this injury required medical attention. The parents chose not to seek medical attention appropriately and they deliberately failed to report the existence of this injury to professionals.

(III) The parents’ relationship is characterised by domestic violence and the children have suffered emotional harm due to this. The Mother has been unable or unwilling to extricate herself from the relationship, has minimised the violence & has prioritised the relationship over the needs of the children

(i) On 11.6.13, during an incident of domestic violence, the Mother reported that Father had held a knife to her throat. Following this incident, despite Social Services having organised a place at a refuge for the Mother and the children, the Mother refused to go to the refuge.

(ii) On 5.5.11, the Mother alleged that Father had thrown her out of the house and reported that there had been several assaults upon her in recent days.

(iii) On 23.8.11, the Mother telephoned social worker and reported that Father was hurting her and that it was not safe at the home. She later contacted the EDT and reported that Father had been verbally aggressive and was asking her to leave the home.

(iv) On 7.9.11, the Mother contacted Social Services stating that she wanted to leave the family home immediately. An emergency place was found for her and the children at G H [refuge]. The Mother attended but did not stay the night at the refuge.

(v) On 28.11.11 at a Child In Need meeting, the Mother made allegations of domestic abuse by Father. On the same day, she attended at the Police station and made allegations, including one of rape. Following this, the Mother and the children were placed at a refuge. The Mother returned to the family home on 30.11.11 and stated that she wanted the charges against Father to be dropped.

(vi) On 2.3.12, the Mother made a further allegation that she had been raped by Father.

(vii) On 12.6.13, the Mother requested to meet with the Social Worker at the school and asked her to organise a place at a refuge as she wished to flee from the domestic violence. She spent only one night at the refuge and then returned to the family home with the children.

(viii) father threatened to 'bounce the Mother's head off every wall in the house'. The Mother went to a refuge with the children but returned to the family home on 12.7.13.

(ix) On 18.7.13, the Mother reported to the Social Worker that she was unable to care for the children and that she and Father had been arguing 24/7 and she did not want the children to witness these arguments.

(x) Father has told the Social Worker that the Mother 'can give as good as she gets'.

(xi) About a week prior to 12.9.13, Father held the Mother captive and denied her food and water for long periods.

(IV) The Mother has a history of mental health difficulties, and has suffered with depression and has self-harmed. This has affected her ability to look after the children

The positions of the parents.

Mother has always alleged severe domestic violence by Father. Father accepted a limited degree of domestic violence and accepted more in his evidence.

Mother denied any involvement in sexual abuse but by the end of the hearing accepted that it is likely that B has been sexually abused and that the perpetrator is Father.

Father accepted that it is likely B had been sexually abused but continued to deny that he had any knowledge of such abuse.

The history.

The children have been known to Social Services throughout their lives. Mother has three older children who do not live with her, the first being removed by a different local authority and the next two residing with their father but having no contact with mother.

There have been long standing concerns about Mother's mental health, her ability to meet the children's emotional needs and the history of mother entering into abusive relationships.

The parents made contact with each other online. Mother travelled to Aylesbury in December 2010, met Father, went back to his house and they commenced their sexual relationship that evening. From that time, Mother remained living with father (with short separations when domestic violence was alleged) until mother finally separated from father in September 2013.

The children were made the subjects of Child Protection Plans on 26th July 2013 under the categories of risk of emotional and physical abuse. The Local Authority initiated the PLO process on 9th July 2013, due to mounting concerns about the family.

On 15th August 2013, the Health Visitor reported seeing what appeared to be fingertip bruising to B's thigh. As a result of the previous concerns regarding the family and this recent report, the Social Worker attended at the family home with a Police officer from the Child Abuse Investigation Unit upon the same day. The Social Worker observed the bruising to B's thigh and also, a large egg-shaped bruise to the right side of B's head.

Following this visit, the children were cared for at the family home by the paternal Grandmother and their half-sister C. Subsequently the police exercised their powers of protection and the children were placed with foster carers. B was taken to hospital, where ten bruises were found to her left thigh and buttock. It was the view of the treating paediatrician that these bruises were likely to be non-accidental in nature.

Once in foster care, B presented as a highly anxious child. The foster carer has noted that on her first day B requested to wash her hands on approximately 50 occasions. B has since made a series of allegations, mostly to her foster carer, in relation to emotional and physical abuse and serious sexual abuse, including allegations in relation to occasions upon which it is alleged that both the Mother and the Father have sexually abused her. As part of the trial bundle I have read the foster carer's daily logs which have been incorporated into the papers for this final hearing.

The Local Authority applied for Emergency Protection Orders on 16th August 2013. At Court, the parents agreed to the children remaining accommodated without the need for an Order and therefore the Local Authority did not pursue its application. Care proceedings were subsequently issued and the first hearing took place on 23rd August 2013 at the High Wycombe FPC. At this hearing, Interim Care Orders were made until 18th October 2013 and the matter was transferred to the Milton Keynes County Court, where the CMH took place in 6th September 2013.

B was interviewed twice in accordance with the ABE guidelines, however she did not make any significant allegations during the same. A forensic medical examination of B was discontinued when she became extremely distressed.

The Mother was interviewed and during this interview, she denied perpetrating any abuse. Father was interviewed, at which, he gave no comment answers to all questions asked of him.

The matter came before me on 21st. October 2013 when the local authority sought a suspension of all contact between the children and their parents pending the final hearing, consistent with bail conditions at that time. I gave an indication that I did not consider a complete cessation of contact between O and E with their parents at that time to be in the children's best interests although I was prepared to make a section 34(4) order in respect of B with Mother given the nature of her disclosures. I am grateful to the police for varying the bail conditions in line with my recommendations. Therefore pending the final hearing both parents have had regular contact with O and E.

One of the key areas of concern of the local authority is mother's mental health but also her propensity to lie. In an extraordinary side issue in the case, is the contact that Mother has had with a Mr. O. Mr. O is a former partner of the maternal grandmother (who I shall refer to as Mrs. L) who was convicted of sexually abusing the mother when she was between 10 – 12 years of age for which he served 18 months imprisonment. (The abuse occurred when the maternal grandmother was in a relationship with Mr. O.)

On 20th. December 2013, Mr. O made contact with the local authority reporting that he had been in contact with Mother over several months and that they had been in a relationship. Mr. O stated that he had been told by Mother that she was pregnant by him and that she was expecting twins. Mr. O also stated that he was aware of the area in which Mother was residing. (At the time Mother was in a refuge.) Following this telephone contact, Mr. O provided printed information to the local authority containing messages (WhatsApp and text messages) and photographs between Mother and Mr. O. I have these printouts in the bundle.

Mother had not disclosed that she had had any recent contact with Mr. O until he contacted the local authority. She was not forthcoming about the communication and once confronted with the evidence her case was that these messages have been edited or doctored. The local authority therefore sought expert evidence from a Forensic Computing Consultant Mr. Raja. His report is dated 4th. April 2014. Mr. Raja examined the computer information made available to him. He concluded,

“To the best of my knowledge and belief there are no reasonable grounds for believing that any statement in any of my exhibits is inaccurate because of improper use of the computer. I am satisfied that at all material times the computer was operating properly, or if not, any respect in which it was not operating or was out of operation, was not such as to affect the production of the exhibit or the accuracy of its content.”

By the end of the evidence, Mother accepted that some of the communications were correct and some “she did not recognise.” However at no point did mother identify which messages she thought were doctored or edited.

When enquiries were made of the Milton Keynes Hospital, there was no record or confirmation of the pregnancy or mother receiving ante natal care.

I have heard evidence over a number of days from;
Julia Davies (SW), Ruth Ayres (SW), Carrie Wheeler (SW TM), B's foster carer referred to as Ms. A (with the assistance of a screen), Kerry Deamer (CAS, SW); Dr Helps; Clifford Isabelle (CAS, SW); Mr. O; Dr de Taranto; Mother; Father; and the Children's Guardian.

The applications before the court and the positions of the parties.

The Local Authority seeks final care orders and placement orders in respect of each of the three children. These applications are fully supported by the Children's Guardian.

Mother seeks return of O and E to her care and opposes the making of a Placement Order in respect of B recognising that she cannot meet B's needs. By the end of the hearing she opposed father having care of any of the children.

Father supports Mother in seeking the return of O and E to her care but if the court takes the view that they cannot be returned to Mother's care he will, "step in" which would mean giving up his job.

Neither parent has specifically applied for further assessment and they simply ask for the children to return to their care.

The Evidence.

Ms. Deamer.

The first witness I heard from was Ms. Deamer who carried out an assessment of mother in tandem with Mr. Isobel carrying out an assessment of father. Ms. Deamer met with mother on several occasions throughout August and September 2013.

At the commencement of the assessment mother's attitude towards father was that she loved him and wanted to be in a relationship with him. This was prior to the children being removed.

During the assessment mother told Ms. Deamer that the bump to B's head seen on 15th. August 2013 was caused by B running down the hallway and tripping over the door stopper and bumping her head although she did not see what B had bumped her head on.

One issue that has arisen in the case is whether or not Mother in fact told father that she had been raped by PS. In the assessment by Ms. Deamer she records a meeting between both parents and Mr. Isobel and Ms. Deamer. During that session father asks mother, "Have you told her about the rape?" Ms. Deamer explains that she is aware of it due to conversations. The rape being discussed is not explicitly set out in this report and became a matter of dispute further on in the hearing.

It is of note that during the session on 12th. September 2013 mother told Ms. Deamer that her number one priority is for her relationship with father to work and for them to get the children back so they can be a family again.

Asked about some of the disclosures B has made(at that time not about sexual abuse) mother accepted that B has heard the word "slag" in the house as it is a word father frequently uses. In another example B has said, "Why the fuck have you said that?" Mother acknowledged that she and father have used that phrase regularly. Asked about B saying, "I like that I can leave my bedroom here cos when I am at home I had to stay in my bed lying down." Mother's explanation for this is that when she is punished she is told to go and sit on her bed. Mother accepted that she had smacked B on a couple of occasions but that father had never smacked B to her knowledge. Later on in the session on 12th. September 2013 when Ms. Deamer told mother that her concerns about the domestic violence were so serious that she could not

recommend the children returning to her or father's care, mother became tearful and said that father was not longer minimising the domestic violence. She also stated that there had not been a domestic violence incident since the children's removal but a verbal argument, This is an important comment in relation to another matter I will return to in due course.

In one part of the assessment mother is reported to have said the following, "She told me a few months ago father had said to B through gritted teeth, "get into bed." Mother said she heard B constantly crying, however father wouldn't let her in B's bedroom as this would according to him, "defeat the object of the punishment." She gave another example of B getting out of bed to get a book to read. Mother thought it was lovely that B had done this and got father to show him. Father allegedly said to B, "What are you doing you are supposed to be asleep" and took the books off B. Mother said B then cried for her books however father said, "You're not fucking getting books." Mother said that B cried for ages and father would not let her go in and see B." Mother said that the books were on top of the wardrobe the next day. Mother told Ms. Deamer that B was treated differently to the other two children by father.

Mother then made an allegation against father that during the previous weekend father had threatened to kill her and then she had been "banished" to her room for the day and not allowed to use gas, electric and water. The Saturday to which she was referring must have been September 7th. 2013. Ms. Deamer agreed to call the police and mother made a statement and went to a refuge that day. Mother's case is that she has been separated from father since that date.

Ms. Deamer notes in her report,

"Mother acknowledged that there has been significant domestic violence both in her relationship with father and in some of her previous relationships. She recognised that in her relationship with father she had been a victim of physical and sexual violence, verbal and emotional abuse and accepted that these were all forms of domestic violence. Mother also made me aware that the actual incidents of domestic violence were far higher than had been reported to professionals."

Ms. Deamer asks the pertinent question,

"Given that mother has stated she is aware of all of the above affecting the children there remains the question as to why she has been unable to leave this relationship and put her own and her children's needs first. She clearly recognised the damage that has been caused to her children over the years, however for whatever reason she has continued to allow them to be subject to abuse through witnessing domestic violence. Mother has stated that her reason for staying/returning to the relationship in the past has been that she thought father would change."

Ms. Deamer also makes the point,

"Mother put B at potential risk of harm from father during their first meeting." I.e. Mother took B to meet father when they had "met" each other over the internet and mother effectively moved in with and commenced a sexual relationship with father on the first evening that they were physically in each other's company.

Ms. Deamer makes a prophetic comment at the end of her assessment, “There remains a question as to how likely mother would be to engage with services in the future. However, in any event it is my opinion that the issues in this case run far deeper than the domestic violence, therefore the support available from women’s aid would not be sufficient to enable mother to parent her children safely.”

Ms. Deamer sets out the traumatic past for mother which in my judgment is worth setting out in full at this stage,

“mother has unresolved issues from her own childhood. Mother told me that she received some counselling as a teenager in respect of the sexual abuse she experienced; however it is my opinion that mother’s difficulties at this time were far more than the sexual abuse. She would have required support in respect of learning who her real mother was, why her grandparents didn’t protect her from her mother given they knew of the risks her mother potentially posed, the physical abuse she had witnessed from her mother to her half sibling and any other behaviours she had witnessed from her mother, given that she said her mother was in and out of her life all of the time. It is my view that these are still areas of support which need addressing with mother, in addition to many other issues which have arisen since this time which are detailed below.

Mother gave birth to her first child still born at only the age of 17 years old. She then had three further children removed from her care, the exact reasons for which are unknown.

Mother has also battled with her mental health including anorexia, although I am unsure of the full details in this area. Mother has alleged that she was raped by PS, a former partner in 2011.

All of these issues combined with the historical violent relationships she has entered into and including the recent relationship with father will have continued to impact on her emotional availability to the children.

In respect of the domestic violence I would question whether mother blocks a lot out when the violence is occurring. She had difficulty in this assessment recognising when certain incidents had taken place, what had caused them to start and how the incident ended. It is a concern what would have been happening for the children during these periods of time.

As well as support with the issues throughout her childhood, as detailed above. Mother would also benefit from support in respect of having a still born child, having her next three children removed from her care and her propensity to enter into inappropriate relationships. There also remains a huge question over mother’s inappropriate parenting of her children and the fact that she has been aware of father’s entirely inappropriate parenting of B yet still allowed this to continue by remaining in the home.

This is a very sad case and unfortunately it would seem that all of mother’s early experiences have led to significant difficulties in her parenting. For any change to occur mother would need significant input from various services and this would be in my view outside of the children’s timescales.”

Ms. Deamer then carried out a second assessment when she looked at the relationship between the siblings. This assessment is dated 25th. November 2013.

Her conclusion is as follows,

“My conclusions in this assessment are that this is a sibling group who have been subject to frightening behaviours from [] Mother and [] Father and as such are showing signs of having disorganised attachments. B and O in particular have significant attachment issues and E’s attachments are also not without concern, despite her very young age. B does not have a significant relationship with either O or E. The relationship is however positive, with the potential for a secure attachment to be achieved.

My recommendation is given B’s significant attachment difficulties and behaviours that she should be placed separately. Given the close relationship that is forming between O and E then serious consideration should be given to placing them together so long as carers were highly skilled to meet their needs.”

I also noted with concern the reports from B’s school as follows,
“On 6th. November 2013 Sheila Newlands and I met with Ms. W, B’s class teacher and Ms. C, the safeguarding officer. B has been a student at the X Nursery School since January 2013. She was removed from her parents’ care in August of the same year. Ms. W and Ms. C confirmed that they had numerous concerns prior to B and her siblings being accommodated. Initially they had noted that B would wash her hands several times day, this behaviour eventually decreased and has now virtually stopped. They had also observed that B would over-eat. Whilst B was still living at home, Mother had told the nursery staff that B was clumsy and would fall over however they have not seen evidence of this in nursery. They had however noted many bruises on B’s body, which Mother had said were caused by B falling and tripping over. On one occasion, B had been kept off of nursery and when she returned she claimed that her mother had hit her on the head and her mother had smacked her.”

Essentially, Ms. Deamer stood by her report in oral evidence. She remains extremely concerned by the domestic violence reported by mother and mother’s repeated return to father once separated. She expressed her concerns about the children, in particular B and remained of the view that B should be placed separately from her siblings.

Dr. Helps.

Dr. Helps, a Consultant Clinical Psychologist and Systemic Psychotherapist was instructed on behalf of B to carry out an assessment of her needs. Dr. Helps has prepared a main report and a short addendum. In her main report dated 9.12.2013 she sets out her views in respect of B. She describes how within a couple of minutes of meeting B, that B was touching her legs and arms and exploring the contents of her two bags “with no apparent awareness that this was not appropriate.”

She writes,

“Her current presentation can best be described as commensurate with a diagnosis of Reactive Attachment Disorder, indiscriminate/disinhibited type. Although a relatively rare diagnosis, this diagnosis is not uncommon among young children who have been abused, neglected, maltreated or whose care needs have not been effectively met.

In my opinion, her current presentation is highly likely to be linked to her lengthy exposure to the volatile and abusive relationship between her mother and Mr. F, to

her mother's changeable mental health and likely to poor and possibly abusive interactions with her mother and Mr. F."

"Like all young children, B needs to be parented in a safe, calm, bounded manner. Based on the background information, her comments to the foster carer regarding potentially sexually abusive acts and based on her comments and presentation during my assessment, I am extremely concerned that her emotional, behavioural, attachment and safety needs have not in the past been met. It seems highly likely that as she settles into the foster placement she will make more comments about the care she was afforded when at home."

"Whatever findings are made out, I am struck by how B, at such a young age, is able to clearly articulate her experiences to date. B is adamant that she does not want to go back to the care of her mother. It is very unusual for a child so young to make such comments and I think that these comments need to be given weight."

In her addendum report, Dr Helps writes,

"... As stated in my report, B and her carers will need multidisciplinary, multiagency support aimed at addressing her attachment difficulties, which have most likely arisen as a result of her earlier experiences. This is likely to involve specialist and highly skilled therapeutic input for both her carers and her. B would greatly benefit from being assessed by a child psychotherapist and systemic psychotherapist. If local CAMHs services are unable to provide such or similar input, the package may need to be commissioned from a specialist service provider ... [and further that] ... B will need far better than good-enough parenting and will need high-quality, highly attuned, calm, consistent, warm and bounded care. She will require highly supportive, skilled carers who are well supported by a multi-disciplinary, multi-agency team over a number of years. Based on her current presentation she is likely to pose significant challenges to all those who care for her and especially to male carers. While this does not mean that she should not be placed in an environment where there is a male carer (indeed I think it would likely be helpful for her to experience an appropriately bounded male carer) it is likely that she will have the potential to provoke feelings in both male and female carers that will need careful management and reflection on the part of the carers ..."

In evidence Dr. Helps confirmed the contents of her main and addendum report. She confirmed that B's needs are so great that in her opinion, she should be placed separately from her siblings. Dr. Helps told me the following,

"B is one of the most damaged girls I have seen in the past 20 years and the level of damage and difficulty in her psychological presentation now is just tremendous."

Dr. Helps emphasised the level of work that B requires which must start whilst she is in placement to start addressing her very high level of need. Dr. Helps told me that she is very impressed with the care that B is receiving from her foster carer and told me that she cannot put a timescale on how long it will take B to be ready to move on to an adoptive placement if that was the decision of the court. However she told me that B needs access to a multi disciplinary mental health team.

Asked about the type of placement, Dr. Helps told me that the current single foster carer is providing a very settled placement. Dr. Helps thought it may be in B's best interests to be placed with a male and female carer in order that she has a positive male role figure in her life but great care would have to be taken because of her indiscriminate behaviour towards strangers. Dr. Helps told me that B is constantly operating at high levels of anxiety to try and keep herself safe. She said,
"I imagine over time she has been told what she can and can't talk about – she is extremely guarded in what she says with the foster carer."

Dr. Helps was asked about the disclosures made to the foster carer which as set out above she felt should be "given weight."

"Dr. Helps told me,

"I am fairly certain that a child of this age would not make those things up."

Asked about her view of these disclosures Dr. Helps said,

"One of huge concern that B has had or witnessed these experiences to make such comments."

Asked about direct contact between B and her siblings Dr. Helps was concerned that direct contact could further distress B and took the view that B could "re-live" experiences due to have inter sibling contact.

Dr. Helps was very struck by B, a child of this age, stating that she does not want to see her mother. Dr. Helps was clear that direct contact with her mother is not in her best interests and should not be promoted whether a long term foster placement or an adoptive placement.

Asked about the care plan, Dr. Helps told me that "the placement is the absolute key – this is a child who does not know how to interact with adults in a safe way – she has not had the experience of having safe and attuned relationships with adults – work needs to be undertaken with her and her carer – she needs to be helped to form safe relationships with adults."

Dr. Helps was struck by B's unusual presentation. She constantly asked Dr. Helps questions which were not fully formed, but she asked bits of questions. Dr. Helps was concerned by B sitting half on Dr. Helps who told me, "I felt extremely uncomfortable." B touched her arms and legs. There was no sense of what was appropriate and no sense of any wariness of strangers. Dr. Helps felt that her questioning was, "terribly intrusive." She told me that the way B interacted with her had "a sexualised feel to it." Dr. Helps took the view that B "doesn't understand what an appropriate boundary between an adult and a child is."

Dr. Helps emphasised how unusual it is for her to have made a diagnosis of reactive attachment disorder in a child of this age. She told me that it is only the second time in ten years that she has done so. Dr. Helps told me that the symptoms have to be present before the child is 5 years of age. She said it is a controversial diagnosis but "it is the best way of reflecting the complexity of B's presentation." Having such a disorder is due to the early attachment interactional patterns that the child has experienced. A child has to have suffered trauma before reaching the age of 5 years.

Dr. Helps considered that B could remain with her current carer that would be a very good placement which would meet her needs.

Under cross examination on behalf of mother, Dr. Helps was asked whether the carer could influence the disclosures the child makes. Dr. Helps accepted that they can be she had assessed the current carer as having an ability to remain very calm, open and presenting with an unbiased view.

Once again Dr. Helps expressed her concern about B's presentation and said, "I've not seen for a long time levels of anxiety so high – they pervade her every moment."

Asked why the extreme behaviours witnessed by Dr. Helps have not been commented on at school. Dr. Helps told me that she has no knowledge of the questions asked of the nursery staff or whether they have experience of assessing attachment behaviours. All she can do is explain the behaviours she has seen.

Dr. Helps was asked whether she considered B to be suggestible and whether she was making disclosures as a way of receiving attention. B must be aware that when she starts to make these disclosures her foster carers listens and it may in fact prolong her bedtime. Dr. Helps did not consider B to be particularly suggestible and in any event it does not explain the content of the disclosures.

Under cross examination on behalf of Father it was put to Dr. Helps that B was used to being the "centre of attention" of her mother and then Mr. F moved in followed by the birth of her two younger siblings. Dr. Helps replied that these events do not explain B's significant difficulties. Dr. Helps re-iterated that B's way of seeking attention is, "grossly abnormal,"

It was put to Dr. Helps that B has learnt that bed times can be prolonged by making disclosures at bed time and that it is also a way of gaining attention. Dr. Helps replied,

"This child is not being neglected in the foster home. The foster carer from what I have seen is pretty balanced at giving appropriate attention. If it was the only way of the child getting attention there would be a lot more allegations made by the child."

It was pointed out that the disclosures are made usually at bedtime and sometimes when B is being driven. Dr. Helps commented that it is usual for children to make disclosures when they "feel most calm and most safe." She said,

"I don't know what is happening to B but it is significant that she is using quiet time to make disclosures." She considered it "possible but improbable" that the making of disclosures were simply an "attention seeking" device. Dr. Helps said, "This is a child who to my mind has experienced such traumatic experiences – she is stuck in a repetitive loop – she tries to process the awful things that have happened to her."

Once again when asked whether she felt that the foster carer was in effect encouraging B to make disclosures, Dr. Helps thought that the foster carer had always acknowledged the disclosures but was not strongly re-enforcing what was said.

Dr. Helps was asked about the allegation made by B that a member of staff at the nursery had smacked her and it was put that B had “clearly lied about that.” Clearly Dr. Helps does not know whether B has been smacked at the nursery but no member of staff has accepted that she has been. Dr. Helps answered that clearly that disclosure must be taken seriously as well but she considered the contents of B’s disclosures such as things put in her “butterfly.” Dr. Helps maintained her view that it is highly unlikely that a child would make up lies in that regard.

Dr. Helps told me,

“I don’t see this as a child trying to get the attention of the foster carer but as a traumatised child trying to make sense of nasty experiences.”

Dr. Helps told me that she is confident of her diagnosis of reactive attachment disorder. She described B as a very damaged little girl who has specialist needs. Dr. Helps does not believe that B’s presentation is properly explained by simply experiencing domestic violence. She believes there must have been severe trauma and her needs not being met over a long period of time. Dr. Helps told me that B’s presentation is consistent with a child who has experienced violation of personal boundaries. In fact Dr. Helps told me that her presentation is similar to a child who she had assessed who had been “sexually trafficked at the age of 2 years.” Dr. Helps told me,

“I have never known a 3 ½ year old say they do not want to go home to mother.”

The evidence of Mr. O.

In his statement dated 16th. January 2014, Mr. O writes,

“I confirm that I was recently in a relationship with [] mother, which commenced on 15th. September 2013 and ended just before Christmas 2013. I exhibit the communications by way of the social media website “Whatsapp” between myself and [] Mother at DO1. I also confirm that I am the former partner of mother’s mother and that I served a prison sentence in relation to Mother’s disclosures that I had a sexual relationship with her when she was aged 12.”

Of the exhibits attached to the statement Mr O writes,

Further on in his statement, Mr. O writes,

“I confirm that during the course of our communications on Whatsapp, [] Mother informed me that she was pregnant with my baby. She also provided me with a copy of a scan of the baby. I now understand that this was not true. On 12th. January 2014, [] Mother telephoned me in the evening. She stated that she had informed me she was pregnant “as a joke.” She also stated that Mr. F was threatening to come to Scotland to beat me up.”

In oral evidence Mr. L confirmed the contents of his statement and that he had received the communications as set out in the exhibits to his statement. Also attached are photographs of Mother and the children which Mr. O states Mother sent to him. He told me that he printed them off.

It was put to Mr. O that he “fabricated the messages.” Mr. O told me, “I wouldn’t know how to do that.” He told me that he would be happy for the local authority to have his computer and examine it.

.Mr. O also told me that he has had four different mobile telephone numbers for mother.

Mr. O was taken through the exhibits. Many are of the three children at different ages and one is of mother and her father on her wedding day.

Mr. O told me that he had a relationship with Mother’s mother in 1995/6 which lasted for two years. After they split up he was questioned about the assault on Mother. Despite the conviction, Mr. O denies any sexual contact or inappropriate sexual behaviour on his part towards mother and he told me of the devastating effect that the conviction has had on his life in terms of family life and employment opportunities.

Mr. O told me that he did not have contact with Mother’s mother from 1996 until September 2013.

Mr. O told me that after 1996 he did not have contact with Mother until 2010 when she contacted him through facebook. Mr. O travelled to see Mother in 2010 in Aylesbury. Mr. O then told me that Mother had asked Mr. O to come and get her and to take her to Scotland. She was going to start a new life with Mr. O. Mr. O arrived one morning at 10am. He picked mother up and they went to a petrol station. Mother was on the phone to Father who threatened suicide. Mother therefore asked Mr. O to take her back home to Father. He did so and he returned to Scotland. After that Mr. O and Mother had intermittent contact.

Mr. O told me that one of his motivations for going to see Mother was to try and clear his name in the hope that she would admit that what she had testified was untrue.

After this incident in 2010 there was no contact between 2011 – 2013. Prior to September 2013, Mother contacted Mr. O and told him that she would be travelling to Edinburgh. By June/July 2013, Mother and Mr. O were communicating through WhatsApp. Mr. O saw on WhatsApp that mother was in Edinburgh.

Mother went to Scotland to stay with her mother.

Mother told Mr. O her mother’s address. At that time her mother was living with a man called R. Mrs. L was having relationship problems with R. According to Mr. O, Mother telephoned him and asked him to pick herself and Mrs. L up. At that point there had been no contact between Mr. O and Mrs. L since 1997 (the court case.) On 14/15th. September 2013, according to Mr. O, Mother and Mrs. L stayed at his house, both of them in his bed, he on the sofa and his 9 year old son in his own room. Mr. O’s son returned to his mother’s home on the next evening and according to Mr. O, he and mother had consensual sex that evening whilst Mrs. L slept in the spare room. At the time of the hearing, Mrs. L remains living

with Mr. O and he told me Mother remained there for 3 – 3 1/2 weeks before returning back to the Aylesbury area. According to Mr. O, mother told him that she wanted to move to Scotland and start a new life with him after the court hearing.

Mother filed a statement dated 30th. January 2014 in which she states that her mother slept with Mr. O. Mr. O categorically denied that and told me that he has had no sexual relations with Mrs. L since 1996. In her statement Mother wrote, “On either Friday 20th. September or Saturday 21st. September my mother took C to the local fish and chip shop around 7 or 8pm to get some dinner. I was in the living room watching television wearing leggings and a white top with buttons. Mr. O came over to me ripped my clothes off and forced me to have sex with him on the sofa. I was crying and saying , “Please do not put me through this.”

Prior to getting into the witness box Mr. O did not know that mother was alleging rape against him for a second time. I adjourned the proceedings to give Mr. O the opportunity to read the statement and consider his thoughts given the seriousness of the allegation.

Mr. O was adamant that he and mother had had consensual sex on one occasion in his bed. He denied that he had been alone with mother and that Mrs. L did not go out to get fish and chips. In any event he told me the fish and chip shop is about 20 years from his flat. He is 54 years old and denies attacking Mother or ripping her clothes off as alleged.

Mr. O told me that he was happy when he thought mother was expecting their child. He told me the couple were communicating through text, telephone, KIK WhatsApp and Facebook. Mr. O wanted to attend the 12 week scan with mother but as the time approached Mr. O told me, “she kept making excuses.” Mr. O travelled to see mother on 30.11.2013. The reason for this is that he wanted to find out exactly what was going on with the pregnancy. Mr. O also told him that Father had committed suicide in October 2013 and that his oldest daughter had found him dead on the floor. Mr. O told me it was therefore something of a surprise when he saw Father coming out of Mother’s home in November 2013. Mother told him that he was mistaken and it was Father’s brother but Mr. O was clear that he knew what Father looked like and he could know he had seen father at mother’s address.

Asked about his views now Mr. O told me,
“I’m fed up with her lies – her deceit about everything – I don’t think she was pregnant at all but some photos make her look pregnant.” He then told me,
“I hate her but I am also in love with her but I still hate her.”

Mr. O told me that mother had told him about the care proceedings, that her children were in care and about the domestic violence between her and father. She told him that the final hearing was in February and that after the hearing she would be moving to Scotland to start a new life with him.

Once Mr. O realised that Mother had lied to him he contacted one of the social workers, Ms. Wheeler. He knew the name because Mother had told him. Mr. O said that mother had told him to keep her pregnancy secret from social services.

Asked about Mother telling the social worker that her mother, Mrs. L had died, Mr. O told me that Mother had been in constant contact with her mother and knew she had not died.

There was a gap in Mr. O's evidence when the foster carer was interposed. Resuming giving evidence, Mr. O was taken through some messages he had put on Facebook. One was a highly offensive comment about women. I asked Mr. O whether he thought offensive comments about women were funny. He answered, "Sometimes."

There was a message from Mrs. L who referred to her daughter as a "slag." Mr. O told me that it was the "sort of comment" that Mrs. L would make about her daughter.

In respect of the photographs of the children Mr. O told me that Mother had sent them to him in order that they could be given to Mrs. L to make a Christmas calendar.

Mr. O told me that although he had been convicted of sexually abusing Mother, he did not accept the conviction. He told me that he had never acted inappropriately with Mother when she was a child. Mr. O told me that he wanted to clear his name. He said that he had sent evidence in respect of the pregnancy and the relationship between himself and Mother to the Court of Appeal in Glasgow to try and clear his name but as he put it, it was not considered "strong enough evidence." Mr. O told me that he had been "advised" by the Court of Appeal that there would have to be something from Mother, "in writing."

It was put in terms by Mother's Counsel to Mr. O that the messages that are printed out in the bundle are a fabrication. At the time that Mr. O gave evidence that was her case. It was put to Mr. O that he has fabricated these messages in order to clear his name.

Mr. O told me that he had travelled to Aylesbury in November 2013 to see Mother and to prove that Mother was telling lies.

Mr. O told me that Mother told him of the "beatings" she received from father.

Counsel on behalf of Mother put to Mr. O that he had raped Mother whilst she had been staying in the flat in September. Mr. O denied that he had raped mother but accepted that he had had sex with Mother on one occasion. It was put to him that "Since then you have harassed her," which Mr. O denied. Mr. O accepted that mother had said to him that she would accuse him of rape.

Mr. O was asked about the one occasion of sex that he accepts occurred with Mother. He told me that he and mother slept in his bed together on 16th September 2013. Mrs. L was in the property but his son C had gone back to his mother's home. He said the sexual intercourse was purely consensual. Mr. O told

me that he was in his bed and Mother went into his room and got into his bed. Mrs. L was aware of her daughter spending the night in Mr. O's bed.

Mr. O told me that Mother had suggested that Mr. O bring E up as his own child and even suggested that his name is put on her birth certificate.

Mother told Mr. O that she was pregnant with his child. She sent him a scan of what she said was his baby. However, when Mr. O wanted to go down to see her mother, "always made an excuse" as to why she should not.

Mr. O told me that the relationship between Mother and Mrs. L at the moment is, "non existent." Mr. O explained that this was because Mother had lied about Father dying and Mrs. L had "sent money down."

The Evidence of Ms. Ruth Ayres (SW).

Ms. Ayres was allocated as the social worker for these children in November 2012 October 2013.

Her first statement sets out the historical concerns about this family, in particular the number of occasions on which Mother has left father alleging domestic violence, only to return to him shortly thereafter. Ms. Ayres was present on 15th. August 2013 when the children were removed after concerns were expressed about the bruising seen to B's legs. These bruises were first noted by the health visitor. I have seen two medical reports in respect of these bruises and a body map.

Ms. Ayres sets out her concerns about the children. At the time of the first statement, there were no concerns about sexual abuse which were yet to emerge once B had been in foster care for two months. However, Ms. Ayres sets out her concerns about Mother's ability to meet the children's emotional needs. Ms. Ayres describes Mother as being, "short and cold" with the children. In one part of her statement Ms. Ayres writes, "There have been home visits when Mother has appeared to ignore B's request for a drink despite B asking four times. During a home visit on 22.7.2013, B repeatedly said, "I'm a good girl aren't I, a good girl," it would appear she had been primed to say these things. Ms. Ayres described how mother effectively screamed at both B and O for very mild incidents.

Ms. Ayres was asked about the 15th. August 2013 when she attended at the house to remove the children. Her evidence is that she did not notice the bump to B's head until shortly towards the end of the visit. The significant characteristic of the bump was how far it was protruding from the head. The parents had left the home by this point. According to Ms. Ayres none of the extended family members who were present in the house had mentioned the bump to her. She showed it to her manager Ms. Wheeler.

B was taken to A and E. Ms. Ayres spoke of B going to the toilet on several occasions to wash her hands and she believes B washed her hands on about 25 occasions in the space of about 2 and a half hours. Ms. Ayres was very concerned by this.

Ms. Ayres was the social worker during a period when Mother was leaving father and then returning. Ms. Ayres told me that she offered mother support and tried to assist her with being placed in a safe place but mother kept returning to father. She did not know at the time of assisting mother that she had a diagnosis of bipolar disorder.

Ms. Ayres told me that B was very attention seeking prior to going into foster care. However her behaviour was more concerning than that. She would approach males in the park and say, "I love you."

Ms. Ayres said that B would often say, "I am a good girl" but she felt that it was a form of inner reassurance rather than attention seeking behaviour.

Ms. Ayres was very clear that to her knowledge B had not hurt her head and there had been no incident whilst she was at the property on 15th. August 2013. She did not see B fall and hit her head on a radiator when she was present. Ms. Ayres was very clear that Mother did not mention B's bump on her head to her nor did she encourage B to do so. It was not mentioned.

Ms. Ayres told me that Mother could talk with insight about the effects of domestic violence upon the children but she would still rerun.

The evidence of Julia Davies.

Ms. Davies became the allocated social worker for the children in November 2013, taking over from Ms. Ayres. She sets out in her statement that on 12th. September 2013 Mother told her that she had separated from father after he had physically assaulted her and then locked her in a bedroom all day on 7th. September 2013. It seems to be accepted that the parents have remained separated since that time. Mother now resides in a refuge. Ms. Davies sets out in her statement the emergence of the allegations made by B which were made once B had been in foster care for some weeks.

In her second statement Ms. Davies sets out the local authority care plans and undertakes the necessary analysis required when a court is being asked to consider whether to make a Care Order and Placement Order authorising a child to be placed for adoption.

In oral evidence Ms. Davies told me of her impression of B. Once again B was described as a highly anxious child and over friendly. She constantly talks and can be very repetitive although that is improving. She told me of the close relationship B has developed with her foster carer. Ms. Davies told me that O and E are developing a lovely relationship. B has contact with her sisters. She is getting on well with O but does not pay much attention to E at the present time.

Ms. Davies told me that in contact there are no concerns about the basic care that either parent provides for any of the children (B is not having contact.)

The evidence of Mr. Isabelle.

Mr. Isabelle is a social worker who has been employed by Buckinghamshire County Council since September 2005. He was instructed to carry out an assessment in respect of father and the letter of instruction is dated 15th. July 2013 namely prior to the children being removed. Mr. Isabelle saw Father as part of the assessment both pre and post removal of the children and completed his report before any allegations of sexual abuse were made by B.

In a careful assessment, Mr. Isabelle set out Father's background and childhood history. Father told Mr. Isabelle that there were no arguments between his parents but there were "disagreements." Father was married before to A and asked if there had been domestic violence between him and his first wife he said, "they had "disagreements" but no hitting. I asked Father if he pushed her and he said they pushed each other. I asked if he had ever raised his fist to A and he replied, "not that I can think of." Father said the domestic violence only started in his relationship with Mother."

Mr. Isabelle asked Father about the incident for which he received a caution for assaulting O. Mr. Isabelle reports, "Father explained he was cautioned for "brushing" past O during an argument. Father believed "social care have no concerns over how we bring up children it's the arguments which are the problem." Father was unable to recognise the contradictions within this comment.

Father accepted that he has taunted mother during arguments saying, "where are your two children now" (In fact mother has three other children, one adopted and the two others living with their father. Father also accepted saying to mother that she "deserved to be raped."

Father accepted that on one occasion B had said to him that she does not like the domestic violence. The words used by B are not reported.

Asked about the incident which Mother alleges occurred when Father picked up a knife and held it to her throat Mr. Isobel reports, "Father said he picked up a knife (at the same time mimicking picking up a knife for a few seconds and putting it down again). When I asked what he wanted to accomplish by picking up the knife father said, "there was nothing to accomplish." I asked if he wanted to scare mother, father said, "possibly, maybe I wanted to show her I was in control." I questioned whether he felt this was to do with control and father said no, "I'm not a controlling person." Father said he asked mother if she felt he was a controlling person and she had allegedly said he was not."

In respect of the day the children were removed, Father told Mr. Isabelle during the sessions on 20th. August 2013 that B had run and tripped over and hit her head on a radiator. He also said, "The social workers put a towel on her head to ease the swelling and pain."

Father told Mr. Isabelle that he did not bath B as "I do not feel comfortable bathing her as she is not my own."

During this assessment Father told Mr. Isabelle that mother had told him that she had been raped by PS whilst she lived in Buckinghamshire and whilst B was present. Father said, "I know I done domestic violence but what he (PS) did was much worse." Mother has told father that PS went to prison for seven years for this offence.

Mr. Isabelle concluded as follows,

"I believe that father's understanding of domestic violence is limited. He has not shown insight into the possible causes of the domestic violence other than punitive childish comments such as, "she says something bad about me I will retaliate."

"Throughout this assessment father has been consistent in minimising domestic violence. He has not been able to consider his parents' relationship in terms of domestic violence. He has denied domestic violence as being a component in the relationship he had with his ex wife. Sadly father is still denying the severity of the domestic violence in his relationship with mother and he has also denied the impact his relationship has had on the emotional wellbeing, health and development of his children."

Of the incident involving O and father's caution Mr. Isabelle writes,

"It is my opinion that this is yet another example of father minimising his actions and distracts from the real issue of domestic violence and the impact and risk that violence poses to his children."

Mr. Isabelle concludes,

"I believe that father's capacity to change is dependent on his ability to be able to fully accept and understand his behaviour in his past and present relationships. As I have highlighted father still minimises his behaviours in his relationships. For there to be any capacity to change he will have to be willing to admit fully what he has done and to reflect on his own behaviour and the impact that his behaviour has had on others. O does not believe father is at this stage yet. In my opinion he is only on the [] Programme due to it being part of a child protection plan, but perhaps the length of the programme will be enough to create some thought process to consider change and get him to start looking in a reflective light at his behaviour and the impact it has had on his partners and his children. I believe father may have the capacity to change in the longer term, however he needs to find the right motivation in order to do so. He also needs to be completely honest with professionals around him or else it is likely that there will continue to be on-going domestic violence in his relationships whether that is with mother or future partners. Any capacity for father to change will be in the longer term and in my opinion outside the timescales for B,O and E."

Mr. Isabelle assessed father as "high risk," in terms of domestic violence and was particularly concerned about his ability to minimise the risks. In a rather prophetic statement Mr. Isabelle made the following comment about B, "I was particularly disturbed to hear about B's behaviour when I visited her foster carers. B is a child who I believe is displaying very anxious behaviours and this could be a result of physical abuse, emotional abuse and neglect. There is also concern regarding a lack of sexual boundaries in the home. B's behaviour is very concerning I would therefore be very concerned if any of the children were to be returned to either father or mother's care."

In evidence Mr. Isabelle stood by his assessment. Mr. Isabelle told me that he conferred with Ms. Deamer who as carrying out the assessment of mother and it was through those discussions that he learnt of the discrepancy between what father was telling him and the domestic violence alleged by mother. Once father was then challenged with the accounts given by mother he told Mr. Isabelle more of the domestic violence in his relationship with mother. Mr. Isabelle said to me, “he had no choice but to tell me more.”

The police report relating to the incident with O was put to Mr. Isabelle who had not seen it at the time of writing his report. On seeing the report which detailed a red mark being seen on O’s head Mr. Isabelle told me, “It is him minimising his actions. The act that there was a red mark on O’s face indicated that it is more than just a brushing. I am not surprised but it is not in my report because father would have to tell me. His ability to reflect and talk about his behaviour is very low.”

On behalf of father Ms. Hartnett cross examined Mr. Isabelle in some detail. The fundamental difficulty was that she was (quite properly) challenging Mr. Isabelle on his opinion that father had minimised the domestic violence but at that point in time I had not heard from mother and father and there had been no findings of fact save limited concessions by father and the police caution. However, the points were well made. Mr. Isabelle accepted that it was positive that father was able to accept the caution in respect of O and that he was prepared to attend the [] programme. However father was not allowed to continue with the [] programme once the allegations of sexual abuse by B were made.

The evidence of Dr. de Taranto.

I then heard from Dr. de Taranto who is a Consultant Forensic Psychiatrist with over sixteen years experience. She assessed mother and her report is dated 31st. January 2014.

Given some of the extraordinary evidence I have heard in this case it is worth setting out a couple of paragraphs in Dr. de Taranto’s report.

“On the first occasion when I met with Ms. L (mother) in December 2013, she told me that her mother Mrs. L who had a history of bipolar affective disorder and anxiety, had committed suicide five weeks earlier. She told me that she did not get on with her mother and never had and that, “she would rather see me suffer than see good of me.” She also told me her mother was a “failure of a mother.” She described to me how she had had no contact with mother for some time prior to her death saying, “I wouldn’t even speak to her on Facebook, I wouldn’t speak to her on the phone.

She told me in detail how she had refused to go to her mother’s funeral because there was a chance that she might meet her stepfather Mr. O there who had sexually abused her in childhood but that she still sent flowers. She said that she was aware that her mother was still in contact with her stepfather prior to her death because she had seen him on her mother’s Facebook page and went n to say, “why would she even speak to him.?”

Mother told Dr. de Taranto in January 2014 that her mother was not dead and that her sister had told her this lie but she did not know why.

Mother spoke to Dr. de Taranto about the domestic violence she says she has suffered from father. Dr. de Taranto writes, “Mother described to me how father on one occasion put duct tape over her mouth, “because I was trying to get the neighbour’s attention to call the police.” She also said that in the context of physical abuse father, “put sellotape on my wrists.” She said that O and possibly B were in the room when this occurred. She also described being raped by Father.”

The report details a catalogue of domestic violence reports between mother and father including mother alleging that father had raped her on more than one occasion. The couple have separated on several occasions including 18.3.2013 when Mother told social services that she and father had separated only to reconcile and then separate again on 13th. September. 2013. Mother reported an extremely serious alleged incident of domestic abuse in June 2013 when she alleged that father had held a knife to her throat.

On 18th. July 2013 mother telephoned social services and stated that she would like the children to be removed as she was unable to care for them.

Dr. de Taranto sets out the inconsistencies in Mother’s accounts to her during the two assessments.

She writes,

“What happened to her after the end of this relationship appears to be far more complex than she first sought to portray to me.

Mother simply told me the first time that she saw me (which was on 10 December 2013) that after she left Father she went to live in a women’s refuge (arriving there on 26 September 2013), where she had remained. She said nothing at all about having travelled to Scotland to see her mother after leaving Father and before going to the refuge, which appears to be what actually happened. (In fact she told me that she believed her mother had died five weeks before she met with me, that she had not been in contact with her mother prior to her supposed death, and that she had avoided going to the funeral because she did not want to chance a meeting with her abuser Mr Oswald, with whom she was not in contact).

By the time I saw Mother again, in January 2014, information had emerged which showed first that her mother was not dead, and second that she had gone to see her mother in Scotland in September 2013 and, while there had apparently continued a relationship with her former stepfather Mr O, with whom she was in fact already in frequent contact prior to her leaving Father.”

Dr. de Taranto summarised Mother as follows,

“Mother is a thirty-year old woman with a strong family history of mental health problems and a personal history of sexual abuse in childhood. She has a long history of mental health problems, starting in adolescence with eating disorder and emotional

symptoms. She has been diagnosed as suffering from a number of mental disorders including bipolar affective disorder, anxiety disorder, post-traumatic stress disorder and possible emotionally unstable personality traits.

As an adult she has had repeated involvement in abusive relationships and has lived a generally unstable and at times chaotic life. None of her six children are now in her care, the first having been adopted, the next two having been left with their father when she abandoned that relationship for reasons she could not quite explain, and the younger three having been removed from her care after a long period of domestic violence and abuse, which was witnessed by her children (including, for example, by her account, her children witnessing her being bound with tape).

Her four-year old daughter, who has been diagnosed as having significant emotional and attachment problems, has, since going into care last year, made a number of serious and very troubling allegations of physical and sexual abuse against both Mother and her previous partner. Mother is currently on police bail in relation to potential charges of sexual abuse against her daughter, which she adamantly denies.

On my first examination, in December 2013, Mother did not present with any symptoms of mental illness. When I saw her again in January 2014 she reported a resurgence of eating problems and some difficulties with stress and nightmares, although she was not clinically depressed.

An emerging feature of this assessment, not fully evident until the time of my second examination of her, is the presence of a potentially significant degree of deceit and untruthfulness. Mother presents as seeming to be extremely pleasant and co-operative, plausible, thoughtful and genuine. The truth however seems to potentially differ from her account in significant ways.”

Dr. de Taranto offers the following opinion of Mother,

“I am aware that Mother has been diagnosed as having a bipolar affective disorder, and she herself believes that this is the correct diagnosis. However, having carefully reviewed all the records available I believe that her diagnosis is that of a *severe emotionally unstable personality disorder* rather than a mental illness. In my opinion her affective symptoms (depression and anxiety) can be seen as part of that disorder rather than as separate diagnoses, as can the eating problems, the relationship instability and the dishonesty and fabrication.

She has a history of longstanding treatment with antidepressant medication, and sometimes with anxiolytic medication, none of which she has felt very helpful. Recently she has been treated with a low dose of an antipsychotic medication, which she reports has been helpful (but which is clearly not stabilising her completely at present). This type of medication is used in emotionally unstable personality disorders as well as in psychotic illnesses, and may have the effect of helping to stabilise affect and behaviour, which appears to have been the case here to some extent.

She has also engaged in psychological therapies (such as her current counselling at the refuge), as well as group therapy in relation to domestic violence. There does not

however appear to have ever been a sustained period of in-depth psychological therapy aimed at addressing her personality issues and emotional instability.”

As there had been no fact finding at the time that Dr. de Taranto undertook her assessment, she had no agreed or found factual substrata upon which to base her opinion. I am grateful to her for the care she took in setting out the different permutations of her clinical opinion depending upon the established facts.

In evidence Dr. de Taranto told me of her great concern about Mother’s ability to be untruthful. In particular she was concerned that mother had told her on 10.12.2013 that Mrs. L had died five weeks earlier ie. which would have been early November, not long after mother had in fact been in Scotland staying with Mrs. L and Mr. O. Dr. de Taranto commented that mother did not come across as evasive and appeared to be very genuine. Dr. de Taranto considered that if I accept that this was a deliberate lie then it is a function of her personality disorder. In her opinion part of her personality disorder is to make up dramatic stories either to draw attention or to attract sympathy. Dr. de Taranto considered that Mother’s inability to be open and honest makes the prognosis for any therapy that mother embarks upon much poorer.

Counsel on behalf of Mother asked Dr. de Taranto about mother’s ability to engage in psychotherapy and the timescales. Dr. de Taranto pointed to the long standing and deep seated nature of mother’s problems but work may be needed for 1 – 2 years. Further in her evidence Dr. de Taranto told me that in her opinion nothing less than a year of therapy and real engagement would bring about lasting change.

Dr. de Taranto told me that the direct risks to the children from Mother’s condition is the children witnessing Mother in high or low mood. Mother’s ability to protect the children is compromised if she is unable to look after herself due to instability.

The evidence of the foster carer.

I then heard from the foster carer who I shall refer to as Ms. A.

The foster carer has filed a statement and also in the bundle are notes made by the foster carer who has cared for B since 16th. August 2013. Initially B and E were placed with Ms. A but E was removed from her care and placed with O on 10.1.2014. She has produced notes of conversations/disclosures with and by B.

The foster carer told me that she writes her notes in the evening every day and includes any activities, disclosures and visits. They are part of the daily record that all foster carers keep.

Ms. A describes B on the day she was placed with her as “traumatised, a little confused, pacing around, very repetitive – she was clearly very uncomfortable. She would frequently go into the downstairs loo and repeatedly wash her hands – she would tip out lego – tip out toys, kick them around..”

B arrived at the foster carers’ home at 5pm and was asleep by 9pm but getting her to sleep was very difficult. Ms. A describes B as crying and hysterical about going to bed, about where she was and where her family were. E was fine, very placid and

engaged with the foster carer. She did not react badly to someone else picking her up and took her feed without problems.

Ms. A told me that B had improved enormously since she has been in her care, although equally there have been areas in which she has not improved. She still washes her hands repeatedly but that has been replaced with an obsession with food and eating. Ms. A told me that she constantly asks for food and she wants to put food in her mouth. The foster carer has seen B put crayons in her mouth, she has drunk vinegar and has even picked up waste food. She appears to have a compulsion to eat.

However B has improved in terms of being able to relax and sit and watch a television programme which she was not able to do before.

Ms. A told me that B has a fear of being locked in either the bedroom or the house. She behaves in an over familiar way with strangers, in particular with strange men. She will strike up conversations with men in a park or a supermarket. When Ms. A speaks to her about this B becomes tearful, frightened and repeatedly apologises.

Ms. A described B asking men in the park to pick her up or getting onto the knees of male relatives and saying, "I love you don't I, I love you."

Ms. A told me that B usually makes "disclosures" at bedtime. There is a bedtime routine namely dinner, bath, in bed, story time. The foster carer told me that as she finishes the story and says goodnight B will cut in and ask whether she can tell the foster carer something. It is at that time that B usually makes her allegations. In general B is not distressed when making the allegations and was described by Ms. A as talking "openly and normally."

The first allegations of sexual abuse made by B were on 3rd. October 2013 and Ms. A made a statement setting out what B had said to her on 9th. October 2013. Therefore from that date Ms. A was alert to the idea that B may have suffered some sort of sexually inappropriate experiences.

Attention was drawn to comments made by B when she has alleged her nursery school teacher has smacked her or the foster carer. The foster carer denied ever having smacked B. Asked why the foster carer believes B's allegations against her Mother and Father when she has made allegations which the foster carer states she believes to be untrue. The foster carer told me that she sees B as a very confused girl and "at times she is blurring the lines." Ms. A told me that B has talked about her mother smacking her "from day 1." As the foster carer told me, "All I can do is record what she tells me. I do not have an agenda even if she is confused I have to write it down."

Ms. A told me that B is her first foster child and although she has had no specific training in respect of child sexual abuse, she told me the foster carer training was thorough and there was training in respect of note taking and record keeping. Ms. A was appropriately questioned about whether she questioned B. Ms A told me, "I don't try and put words into her mouth or ideas in her head I just let her tell it. She decided she wants to tell me something so I let her tell me."

Ms. A accepted that when B was first placed with her she missed her mother and asked to go home. As time went on and contact was stopped Ms. A was asked whether she thought B became more negative about her mother and in fact started to refer to her mother by her first name.

Under cross examination on behalf of Father, it was put to Ms. A that B is very attention seeking. She has learnt that by raising allegations at bedtime she has the foster carer for longer who will continue to sit with her and listen to what she has to say. The foster carer accepted that she remains in the bedroom longer because B tells her these things and B may be trying to prolong the time the foster carer remains with her. However Ms. A told me that she is very careful not to react to anything B says and that she stays very calm. Ms. A told me that the disclosures usually do not take very long and therefore there is very little "extra time" that B gets with the foster carer because of them. It was also put to Ms. A that she has challenged B when B has said something she knows not to be true but B has never been challenged on anything she has said about mother or father because the foster carer does not know whether that is true or not. Ms. A accepted that.

It was also pointed out to Ms. A that B mentions a "G" as being someone who was part of the abuse after meeting a special worker called "G." B also mentions someone called D and she then told a worker at the nursery that the foster carer's husband was called "D." (The foster carer is not living with a partner and the father of her child is not called D.) The foster carer does not know anyone called D. Ms. A was asked the question,

"It is strange that she projects things that can't have happened onto people who can't have done them." Ms. A Answered,

"I can see what you are saying but B is the most confused child you will come across."

The foster carer told me that B can tell her about something several months down the line. For example B mentioned to the foster carer something that had happened on the day she arrived into foster care five months later.

The foster carer told me that on one occasion B was adamant that her mother had picked her up from nursery and taken her home for nuggets and chips which had clearly not happened on that day.

Ms. A told me that since B started to make the disclosures she has been "alert" to the possibility of further disclosures but she does not look for them.

Under cross examination on behalf of the child the foster carer told me that B has never said that anyone other than her mother and father have ill treated her save that she has mentioned "G" and "Mr. D" in relation to the sexual abuse.

Ms. A told me that she did not believe B understood how serious the allegations of sexual abuse were and that she was not looking to get a particular reaction. Ms A was very clear that B could not have heard similar allegations or discussions in her household from any adult or child.

Ms. A told me that B often says, "I'm naughty aren't I, I'm bad aren't I" and she feels B has very low self esteem.

One of the main disclosures made by B was on 8th. October 2013. The note reads as follows,

"At bedtime B was sitting up as I read her story. She was above the blankets and wearing shorty style pyjamas. She put her hand inside the front of her pj bottoms and appeared to be scratching " I said 'are you okay B?' ... she said "this is what mummy does"

Me; "what does mummy do?"

She pulled her knicks to one side & pulled her vagina apart put her finger in, wriggled it about and then held her finger to her nose going "phoooooey" (laughing)..."and she does this"..... B then pulled her bottoms down exposing her bare bottom and put her finger between her bottom cheeks and said "and then mummy puts her finger in her mouth"

I told her to pull her bottoms up & settle back down so I could read her story...she sat back up and she then said "do you know what this is?" pointing at her vagina? I replied "what is it?" ...she said "it's my butterfly - " mummy calls it my butterfly. Daddy doesn't have a butterfly he has a willy. He makes me smell his willy and I don't like it because it stinks...and he slaps me"

She then went on to say "daddy puts his willy in my butterfly..he locks me in my room...I like it...daddy loves me...he slaps me on the bottom"

During this entire disclosure B was quite animated & smiling. I finished her story time normally and she settled down to sleep no problem.

This morning - getting ready for contact;

"Do you know O doesn't have a butterfly...she has a fanny"

Ms. A told me that on the day that B made this disclosure she had been for a health assessment that morning before nursery and had become distressed when she had been asked to take off her trousers and knickers. She had refused. She had repeated that she wanted to leave. There was the normal bed time routine and Ms. A read B a story and B sat up listening to it. B was smiling and had a "chirpy voice" when she made the disclosure. The foster carer told me that she went downstairs and made a note of what B had said immediately/5 minutes afterwards. It was pointed out to the foster carer that some of the notes are timed at 8pm. The foster carer was clear that she is as accurate as possible when making notes.

Ms. A told me of the evening of 23rd. December 2013 when there had been a terrible storm and the windows were rattling. B had said that daddy would come and get her and that he had punched her face and made her cheek bleed. She told me that B's hysteria was very distressing to see and that evening was the worst she had ever seen

B although she has seen B hysterical at other times when she will pull her hair and scratch her face.

Ms. A told me that on 4th. January 2014 B fell down the stairs and grazed her face. Firstly she said her mother had done it, then she said the foster carer had done it and then she said she had fallen down the stairs.

Ms. A felt that B was more anxious and confused in January which was after E had left the home.

B has made many disclosures and they are helpfully set out in a document produced on behalf of B by her Counsel Ms. Guha for which she has my thanks. It is important to see the full range of allegations made by B and I have copied that document into this judgment. Of particular concern is the number and similarity of the disclosures and the internal consistency between them made over a period of time.

DATE	ALLEGATION/ COMMENT MADE BY B	PAGE REF
16.08.13	B remarks that she is a “devil child”	G130
17.08.13	B requests to wash hands 50+ times. “Please tell daddy I’ve been good”	G130
19.08.13	“ I’m sick of you...slag slag slag.” “ It’s ok – the police are coming.. I like the police” “Mummy’s not allowed to eat because she’s been naughty.” B says that she does not want to go to Drs as “he will smack me”	G130
20.08.13	1 st ABE interview. “Mummy smacks me” “O smacks me” “He slapped it. I didn’t lock O out” After ABE interview, B plays with play doh and rolls a sausage shape, which she says is a willy.	G5a G5aa G5ab G131
24.08.13	“Daddy slaps me”	G132
26.08.13	B replies to child asking how she got bruise by saying “Mummy did it..... Mummy loves me.. I love muma... I love muma... she didn’t mean to”	G132
30.08.13	B says to taxi driver “I love you Bill – can I come in your car.”	G133
05.09.13	“Mummy smacks”	G135

13.09.13	“Mummy gives me bruises in the bedroom”	G136
14.09.13	B asks foster carer “Do you smack in the house?” FC replies no never. B then asks “ But do your mummy and daddy smack you?” FC replies no. B says “mine do”.	G137
15.09.13	“Well mummy hurts me. She smacks me”	G137
19.09.13	“Mummy smacks, mummy hurts me. I don’t like it”... “Mummy is mean to me and smacking hurts”	G138
20.09.13	“Oh.... C smacks me”	G138
23.09.13	“ ... mummy hit my head on the raddy-tor (radiator)... she pushed me and I pushed O. She says I’m a bad girl. It was me not mummy.”	G139
27.09.13	B alleges that Mummy locks her in a room. “Mummy bites my cheek. She locks me in my room and says a stranger will come in and get me.” B says she does not want to see daddy because “ he is scary and he smacks me and O and mummy and mummy smacks daddy.” B says her mummy has a tiger and ‘keeps it downstairs and if I go down in the morning it will kill me’ B alleges that mummy and granddad smack her.	G141
01.10.13	“ I don’t want to go to contact. I hate mummy... because she hates me – she says she really really hates me”.	G142
03.10.13	“Mr. D... He bites me.. he is mummy’s friend and I don’t like him when he comes in my bedroom and smacks my bottom.”	G142
06.10.13	‘My mummy hits me’	G143
07.10.13	“Mummy slaps my face and laughs ha ha ha”	G143
08.10.13	B makes detailed allegation of sexual abuse by mummy and daddy, to foster carer.	G146
09.10.13	“Mummy doesn’t hit me there (at contact), she only hits me	I27

	at home”	
10.10.13	“ Can I tell you something?... Its not very nice when daddy puts his willy in my fanny is it?”	I27
11.10.13	<p>“Do you know my mum makes me sleep in the bath.... because I wet the bed.”</p> <p>“You know daddy puts his willy in my bummy.:</p> <p>‘Daddy wipes my bum bum and smacks me with his willy.’”</p> <p>“ I don’t like daddy’s willy”</p>	I28
12.10.13	<p>At breakfast, “I don’t like daddy’s willy in my fanny”</p> <p>“Can I tell you something? D’ya know daddy puts his willy in my fanny?”</p> <p>B says that Mr. Desmond bites her and comes upstairs.</p> <p>At bedtime B puts her hands down her pyjamas and says “daddy puts his willy in my fanny”.</p>	I28
13.10.13	<p>“I’m going to draw daddy’s willy. It’s a big willy.</p> <p>At bedtime, B puts hands down her pyjamas and says “daddy puts his willy in my fanny”</p>	I29
14.10.13	<p>At breakfast, “You know when daddy puts his willy in my bum bum.. I love it.. then he takes it out and stretches itam I allowed to say that?”</p> <p>“It’s because mummy bites me here.. It hurts me”</p> <p>“ my mummy smacks me and then she smacks me harder... harder”.</p> <p>ABE interview :</p> <p>“Mummy smacks me”</p> <p>“You know where daddy puts his willy?”</p> <p>On returning to waiting room during interview, B says to foster carer and Esther “ you know daddy puts his willy in my bum bum”.</p> <p>At bedtime, B interrupts the story being read to her by FC several times and says “do you know daddy puts his willy in my bum bum”</p>	<p>I29</p> <p>G65 G70</p> <p>I29-30</p>

15.10.13	<p>During contact session, B asks M “ Does my Daddy put my willy in my bum? Does my daddy put my willy in my bum?”</p> <p>At bedtime, B puts hands down pyjamas and rubs herself saying “do you know daddy puts his willy up my bummy. do you know I like it? Daddy loves me.”</p> <p>“Mr D goes there” - points to her vagina, and “Daddy goes there” – points to her bottom.</p>	G150 I30
16.10.13	<p>“You know when daddy smacks me. He puts his willy in my face”.</p> <p>When asked by FC what she wants for dinner, B replies “ a willy – that would be tasty”</p> <p>During story time, B kept interrupting “can I tell you something? Daddy puts his willy in my fanny?”</p>	I31
17.10.13	<p>B saw an advertisement for a bald man and says “ That’s Mr D. He puts his willy in my fanny when he has a top on”</p>	I31
19.10.13	<p>“My daddy smacks me”</p> <p>“How come my mummy smacks me?”</p>	I32
20.10.13	<p>B kisses the bedroom wall saying “this is what Mr D does” and says that he is horrid.</p>	I33
21.10.13	<p>B says “You’re naughty You smack E at the contact centre”</p> <p>At bedtime, “Can I tell you something. Daddy goes here (points to bottom) and Mr D goes here (points to vagina).</p>	I33 I34
22.10.13	<p>“Why does daddy smack me/ I’m safe here aren’t I?”</p>	I34
23.10.13	<p>B makes allegation of sexual abuse by G who she says takes her into a shed and pokes her with a stick and touches her butterfly.</p>	I35
25.10.13	<p>“Do you know mummy hits me? She really really hits me. It hurts me.”</p>	I36
26.10.13	<p>“You won’t hit me will you? Daddy hits me.”</p>	I37
29.10.13	<p>“ My mummy slaps me”</p>	I38

	B made a willy with play doh. “Do you know daddy hits me”	
31.10.13	“Do you know I go to Gary’s shed? He smacks my bottom”	I38
01.11.13	Mummy headbutts me	I38
02.11.13	“Mummy bites me”	I38
03.11.13	“ Mummy slaps my face” “You know I go into Gary’s shed? .. He smacks my bottom and I jump on the bed.”	I39
05.11.13	“You know when my daddy hits me?... Mr D hits me too” “ You know I go in G’s shed. He bites me”. Points to her forearm and thigh.	I39
06.11.13	B alleges that G puts his tail) which is she explains is his willy) in her mouth	I40
08.11.13	B talks about how “mummy hurts me – why don’t you?”	I41
11.11.13	“I go in G’s shed don’t I’	I41
13.11.13	“Mummy hits me – it hurts”	I42
14.11.13	“Policemen will smack my bottom won’t they.... Mummy says so”. “I have to hide my bruises when I go to school don’t I?”	I42
18.11.13	“Do you know daddy hits me? And he puts his willy in my bum bum”	I43
19.11.13	‘You know when I go in G’s shed. Daddy headbutts the wall likes this”	I43
20.11.13	“ I don’t like it when mummy tapes my mouth... so I shut up”. B alleges that mummy tapes her and O to bed. B alleges that mummy hit her with hairbrush on bottom and back of thighs.	I44
21.11.13	“ I don’t like it when mummy puts playdoh in my mouth”	I44
22.11.13	B talks about a man called B who smacks her in the	I44

	<p>bedroom when she does not have “knic knics on”</p> <p>“Am I staying here now? Mummy is horrid to me.”</p>	
23.11.13	<p>“Do you know I go in Gary’s shed. He puts his tail in my bum bum.”</p>	I44
25.11.13	<p>“My mummy hits me doesn’t she?”</p>	I45
27.11.13	<p>“Mummy puts her boobies in my tail”. B pointed to her vagina when asked where her tail is.</p> <p>“Mummy puts a tail up my bum bum.”</p>	I45
29.11.13	<p>“Do you know I go into G’s shed and he slaps me and I slap him back.”</p>	I45
04.12.13	<p>“When mummy slaps me she laughs and calls me a cry baby and she does this”. B sticks both middle fingers up at FC.</p> <p>“ Do you know Nanny and Grandad smack me. He won’t come here will he?”</p>	I46
06.12.13	<p>B went to SW offices and when asked if she had fun, said “ Yes but mummy was there and she smacked me”</p>	I47
19.12.13	<p>“ Do you know daddy has a com-bomb and he puts it on my fanny..... white and it hurts- but mummy says its just a mistake...am I allowed to tell you that?” Mummy likes com-bombs because she says its really clean.”</p> <p>“ Shall I show what mummy does to me?” B picks up a strip of sellotape and puts it over her mouth. When asked by FC how it makes her feel, she says “ I cry, I’m scared... and she does this.” B uses strips of sellotape to bind her ankles together. “ I stay in bed then don’t I?”</p>	I49
23.12.13	<p>B becomes hysterical when bedroom window rattles in wind. B pulls at her hair and screams “It’s daddy! It’s daddy! He’s come to get me. He punched my face and made my cheek bleed.”</p>	I51
26.12.13	<p>At bedtime B insisted all lights were left on and said “I’m scared of Daddy”.</p>	I51
01.01.14	<p>B says she does not like school. When asked why, she replies “ because Mrs C smacks my bottom”</p>	I52
04.01.14	<p>When asked how got mark to face, B replied “mummy did</p>	I53

	it". FC pointed out that B had not seen her mother and B then said that FC had done it. When challenged, B said that she had fallen down stairs.	
05.01.14	B asks "will Miss W still smack me at school?" When challenged by FC B says hat Miss W does not really smack her.	I53
10.01.14	Emma moves to another foster placement	
12.01.14	B slaps her cheek repeatedly saying "Mummy does this". B repeatedly saying "Mummy hates me doesn't she? She really really hates me... [Mother] hates me. You don't do you?"	I54
16.01.14	During CAMHS appointment; B says " I want to live with [] Mother. Because she doesn't smack me anymore. "I don't want to live with [] Mother – just me" After appointment, B says to FC " I love you don't I, I want to live with you don't I?"	I55
18.01.14	" L doesn't feed me" "Do you know daddy put his willy in my winky woo?"	I56
20.01.14	B told FC that she got her bottom smacked at school so [] Mother came and collected her and they had chips and nuggets at her house for tea.	I56
21.01.14	" Can I tell you about daddy? .. He slaps me but he's really nice"	I57
23.01.14	B says her winky woo hurts. When asked why, B replied " because [] Mother slaps me there". Later B claims that " muma and dadda rang me today' and said that they love her.	I57
24.01.14	B says that she saw Mr. D but then says it is G. When asked if he looked at her, B replies " He smacked my bottom" but when told by FC that no one had smacked her bottom then, B says it was not really him. When asked if Mr D was also called Gary, B agrees with the question.	I58
27.01.14	" My bum bum hurts..... because Mr D put his willy up my bum bum. He says put it in the tunnel."	I59

02.02.14	“[] Mother really hates me doesn't she” “Daddy says on my birthday. ‘I haven't got you a present’ doesn't he.”	I71
10.02.14	B makes several references to having to sleep in the bath and daddy says “I'm dirty”.	I73
04.05.14	“ R and C. C smacks my bottom.” When playing with a doll, B says to the doll “ Lie nice and still while I slip your panties off.”	I115

The evidence of Ms Wheeler.

Ms Wheeler is the Consultant social work manager. She has prepared a statement setting out her involvement with the family. In her statement she sets out her knowledge of an incident on 13th. June 2013. Mother presented at B's school in a very distressed state having self harmed by cutting her arms. She alleged a domestic abuse incident against father. Ms. Wheeler assisted Mother in finding accommodation that evening (which was not a refuge) but a refuge place was to be fund thereafter. £50 was authorised to assist mother with bedding and other essentials. In fact on the next day, 13th. June 2013, Mother informed Ms. Wheeler that she did not wish to go to the refuge and she returned to father's home. Ms. Wheeler records in her statement that mother had left father again on 8th. July with mother returning to father by 12th. July. Mother and the children then accompanied father and his parents and daughter to Norfolk on a holiday. On 17th. July 2013, Mother telephoned Ms. Wheeler on three occasions reporting an argument with father. Father had apparently left mother in the middle of a town after an argument and she had the three children with her. Ms. Wheeler tried to seek assistance for mother in the Norfolk area. In one of the telephone calls on that day mother told the social worker Ms Ayres that she could no longer cope with looking after the children. However matters seemed to calm down and the family remained in Norfolk for the rest of their holiday.

Ms. Wheeler attended at the home on 15th. August 2013 when the children were removed.

Ms. Wheeler saw Mother on 12th. September 2013 when she alleged that father had held her captive the previous weekend (7th. September 2013) and she had been denied food and water for long periods of time. Mother made a statement to the police. Mother then went to Scotland awaiting a refuge place to become available in the area.

In evidence Ms. Wheeler told me that B has now had 4 sessions with CAHMS which appear to have gone well and she is now confident in attending them on her own. The local authority have taken the view that given that this work has started and appears to be beneficial, the local authority would not seek to move B until at least next April (even if a Placement Order is made.) The current foster carer can keep B until that proposed move.

Ms. Wheeler was asked at length about the events of 15th. August 2013. She was clear that she did not notice the swelling on B's forehead until near to the end of her visit, ie. 7.00pm. She described the bump as a "huge bruise." B had spent most of the time with Ms. Ayres who had not noticed it until that time and as soon as she noticed it she pointed it out to Ms. Wheeler. Ms. Wheeler told me that at no point during her visit did any member of the family mention that B had fallen against a radiator.

Mother's evidence.

Mother's case has changed throughout the hearing and it would take too long and serve no purpose to rehearse mother's evidence in full. I have therefore summarised the salient points and will consider the changes to her case in due course.

Mother's first statement is dated 5th. September 2013. Her "first position" is that she would like all three children returned to her and father's care. Mother accepts in that statement that there has been domestic violence between her and father with father as the instigator and she states that she has left father on four occasions in order to protect herself and the children. She writes that on the last occasion that she returned to father he accepted to her that he has "issues with anger management." At the time that Mother made this statement, B had not made disclosures of sexual abuse.

Mother's second statement is dated 12th. February 2014. It is worth noting certain paragraphs in that statement which have proved to be untrue. By the time mother had made this statement she had told Dr. de Taranto that her mother had committed suicide but she had subsequently learnt that this is untrue. Mother writes, "My younger sister C informed me on 27th. November 2013 that she had been called by M, my older sister and H my brother and told that our mother had committed suicide. I was naturally very upset. I sent flowers up to Scotland from me and the children to the value of £100. It was a total surprise for me to learn that my mother was alive and well."

In relation to the allegations of sexual abuse Mother's case at that point was, "I confirm that I have never heard B make any disclosures of a sexual nature whilst she was in my care. I did not know of B being exposed to sexual language so I do not know where she would have picked up the phrases that I am aware she is now using. I would take B into the shower with me and I would use the term "butterfly" in relation to her private parts. On one occasion B did walk in on [] father using the toilet. She did ask me why daddy didn't have a "butterfly." I did explain to her at that point that boys had "willy winkles". I have noticed that B has been using the term "willy" and this does make sense as this is the terminology I have used."

In that statement mother accepts that the children have been subject to emotional abuse. Mother accepts that the children have witnessed arguments and incidents of domestic abuse between mother and father. Mother states that due to her mental health problems she was particularly vulnerable to father's "controlling behaviours." Mother gives one example of father's behaviour towards B as follows, "At bedtime I would let B look at a book in bed but [] father would take the book from her and shout at her to lie down. On one occasion I can recall B crying for about two hours and I was desperate to go up and comfort her. Father would not let me and

said “and you can just fucking sit there. You can’t go and mollycoddle her how will she fucking learn right from wrong.”

Mother describes father treating B differently from the two other children and that he would “lose his temper and shout through his teeth at her.”

In respect of Mr. O mother accepts that she went to Scotland on 12th. September 2013 after what she alleges was a serious incident of domestic violence by father. She went to stay with her mother who at that time was living with her partner R. According to mother, her mother Mrs. L was “thrown out” of the house on 14th. September 2013 and due to Mrs. L contacting Mr. O, Mr. O picked mother and Mrs. L up and they went to stay at Mr. O’s flat. In her statement mother states she was, “horrified” when Mr. O came to the house to pick them up but her mother assured her she would protect her from Mr. O. According to mother Mr. O and her mother shared a bed in the flat and she either slept on the sofa or in the spare room when Mr. O’s son was not present. Mother then writes that on 20th. September 2013 when her mother and Mr. O’s son went out to buy fish and chips, Mr. O raped her. Mrs. L and Mr. O’s son returned twenty minutes later. Mother left the property on 26th. September some six days after the alleged rape.

In her statement mother writes the following,

“When I was leaving Scotland on 26th. September 2013 to travel to the refuge Mr. O contacted me via Whatsapp. This is the time at which our text communications started. I was in Scotland between 12 and 26th. September 2013 and staying with Mr. O between 14 and 26th. September 2013. Mr. O has produced fabricated Whatsapp conversations during this period which does not make sense if I was living with him.”

“I confirm I have read the statement and exhibit from Mr. O. I believe that the same is a fabrication created by Mr. O in connection with my mother in order to cover up his assault and harassment of me and damage my chances of the children being returned to my care.”

“I found out I was pregnant by [] father during the second week I was in Scotland and had a miscarriage on 6.10.2013. At no point did I tell Mr. O that I was carrying his child. I told Mr. O on several occasions I didn’t want anything to do with him because he raped me and he told me that if I could prove it I should go to the police.”

Further on in her statement mother writes that she did not inform Dr. de Taranto that she had gone to Scotland on the first visit because,

“I took it for granted she already knew I went to Scotland as she had all other relevant paper work to the case. It was not because I was trying to hide anything or be dishonest at all in any way.”

It was in this statement that mother accepts that she cannot meet B’s specialist needs but she seeks return of O and E to her care and opposes adoption for B.

In her third statement dated 27.3.2014, Mother writes of the Whatsapp messages produced by father as follows,

“Of the transcript produced by Mr. O whilst some of it I recognise having said in Whatsapp, however the majority of the contents are not true. I acknowledge that the

computer expert says that it has not been edited and can only assume that it has been recreated by either him having two phones or doing it with someone else.”

Mother repeats her case that at no point did she tell Mr. O that she was carrying his child.

By the time mother had filed this statement, Mr. O had sent the local authority three voice clips, two of which mother accepted were her voice and one was Mr. O. The voice clips state the following,

Mother to Mr. O:

'Hello you...just thought I'd send you a message – a long message this time to say n-night daddy lots and lots and lots of love from your bump, and n-night from myself, sweet dreams and hope you have a good night's sleep. Speak to you tomorrow .. bye' [17th October 2013]

2. *'Hello you just thought I'd say n-night from me and bump' [14th October 2013]*

The third is a man's voice (Mr O)

3. *Hi [] just thought I'd I say I love you, and I'm really sorry. And I will be having words with her later. Okay ... I won't say nothing okay – I'll just say it's not on. But I love you and I'll talk to you later. [16th October 2013]*

In respect of these voice clips mother puts in her third statement, “I have listened to the voice recording clips that have been provided by the local authority. I accept that the female voice is me and the male voice is Mr. O. I would estimate that the voice clips were sent to Mr. O via Whatsapp during the period of October 2013. There is reference to “the bump” as I knew I was pregnant at the time. Mr. O was aware I was pregnant as he was in the room when I told my mother in Scotland that I had just taken a pregnancy test and the results were positive. He would ask me to send a voice clip and tell him for example to “say goodnight from bump.” I believe he just wanted to be able to hear my voice. I was going along with what he wanted. I was trying to make out that everything was OK to keep him happy as I feared the consequences of him not being happy.”

Mother's explanation for continuing communication with Mr. O was, “I was agreeing with what Mr. O was saying to me and responding with what he wanted to hear because I was fearful he would tell the local authority I had been in a relationship with him.”

Mother also writes that she has met a new partner RA. She has known this man since she was seven years old but met up with him again in January 2014. In her statement dated 27th. March 2014 mother states that she is 4 to 8 weeks pregnant with RA's baby.

When mother gave evidence she confirmed the truth of her three statements. She did not seek to amend them at that stage.

Mother was asked in chief about her allegation that father kept her in effect “captive “ on 7.9.2013. The police had investigated after father had denied the allegation and the police had secured footage of mother going into a shop. Mother told me that she must have got the date wrong but that the incident had happened. Mother denied that she had lied about this incident.

Mother told me that she now lives in a self contained flat in a refuge. Staff in the refuge are on site from 9 – 5pm. Mother may remain at the refuge for as long as necessary. It is clear to me that mother feels much more settled in the flat and the accommodation she has is vastly superior to a room in a refuge that she has previously experienced.

Mother also told me that she changed her medication in October 2013 and she feels very much better. She told me, “My functioning is a lot better – before I was on the correct medication people could be speaking to me - I would be hearing it but not taking it in – now I hear it and understand – I take it away and act on it.”

Mother told me that she thought that prior to her medication being corrected she was, “pretty ill.”

Mother accepted that she cannot care for B at the present time but seeks return of O and E to her care.

Mother told me that she remains in a relationship with RA. She miscarried one baby by him and is now pregnant again with a due date in January 2014.

In respect of the Whatsapp messages mother maintained in her evidence that “there are things I recognise and there are things I remember saying but there are other parts which I don’t remember saying.”

In terms of the allegations of sexual abuse Mother told me that she accepts that B has said what is recorded by the foster carer. Her first stance under cross examination was to say that she was “heartbroken” that her little girl can display such behaviours and of course it concerns her. Suffice to say that mother categorically denies any inappropriate sexual activity on her part in front of, to or with B. Her initial stance in evidence was that to her knowledge no one else has sexually abused B and she does not know how B has come to have the knowledge that she has. Mother acknowledged that the only people B has extended contact with is mother, father, Father’s parents and father’s three daughters.

Asked directly whether B has been sexually abused by father mother said, “I can’t answer that.” “I have never seen father do anything like that.”

Mother told me that the only time she has seen father’s penis to her knowledge is when B went into the downstairs toilet and saw father urinating. She asked mother what was in daddy’s hand and mother answered, “little girls have butterflies and little boys have willy winkies.”

Mother told me of the sexual abuse,

“I’m not in a position to say it didn’t happen but it did not happen to my knowledge.”

Mother told me that she had never spoken to B about sexual intercourse.

Mother was asked about the contact on 15.10.2013 when B asked mother, “does daddy put my willy in my bum.”

Mother told me that she was “shocked, disgusted, I just sat in silence.” During cross examination Mother accepted that “the only place B could have this knowledge is through experience.” However she maintained that she never thought that father would engage in any sort of sexual activity and she pointed out that as a woman who had been sexually abused as a child she “would not contemplate putting her child through that.”

Phrases used by B were put to mother and mother accepted that B would have heard father saying to mother phrases such as, “Why the fuck did you say that.”

Mother told me that father did not bathe B and had told her that he did not feel “comfortable” bathing her yet he did feel comfortable bathing his own child although he did on occasion change B.

Mother told me that the word she uses for “vagina” with B is butterfly.. Father has used the word fanny but not in a sexual context – it has been used in the household as a term to suggest someone is making a fool of themselves, “she’s making a fanny of herself.” Ie. it is not used in a sexual context.

Mother could not think of any time when B has been in a shed and mother does not know a Gary.

Asked about Father accepting a caution in respect of O on 25.1.2012, mother told me that an argument broke out between mother and father. Mother was holding O and father put his fist up to mother’s face and caught O on the back of the head.

Mother accepted that she would smack rather than hit B but she did not accept that she hurt her. She accepted B may have been frightened. Mother told me she would smack B once every 3 – 4 weeks on the nappy or on the hand. Mother denies locking B in the bedroom. Mother told me she had not locked B in her bedroom for about 1 year before she had been removed. She denied ever slapping any of the children on the face.

In relation to the bump on B’s head, mother told me that she had returned from an appointment with the health visitor, B ran through the front door, along the hallway and tripped over hitting her head on the floor. She had a little egg shaped bump on her head which had some purple colouring on it. Mother put some ice on it. Mother told me that she had asked B to point this out to Ms. Ayres when she arrived on 15th. August 2013. Mother denies pushing B or hitting her head on a radiator as suggested by B.

Mother told me that she had met father on line. On 28th. December 2010, she had travelled from Scotland with B. Mother then told me that on the day she met father she was in fact going to stay the night with an aunt in Northampton and did not intend to spend the night with father. In fact she and B went to father's house, engaged in sexual intercourse on that first evening and despite separations, remained in a relationship until 12th. September 2013. Mother accepted that she did not know father when she went back to his house

Asked about the domestic incident when father had a knife mother told me, "I am 100% positive that he held a knife to my throat."

Mother stood by her account of an attempted rape on 2.3.2012. She told me that father had stopped short of rape in the afternoon but in fact that evening had proceeded to have sexual intercourse with her when she did not wish to have sex.

Mother was challenged about the several occasions when assistance was offered to mother to stay in a refuge or alternative accommodation and mother accepted that she returned to father. Mother told me that father had assured her that the violence would stop. Mother told me that looking back and having completed the [] programme she regretted her decision to keep returning to father. Mother told me that she accepted that the children have "suffered immensely" and that had she realised how much it would have affected the children she would not have entered into the relationship. Mother emphasised that she has benefitted enormously from the [] programme and she is not going to repeat the mistakes of the past.

In terms of her current pregnancy mother told me that she had in fact been using condoms and therefore the pregnancy was unplanned. Mother told me that although RA has bought her a ring which she wears on her engagement finger (she was not wearing it in court) she is not in fact engaged.

Mother was cross examined about why she did not tell Dr. de Taranto that she had gone to Scotland and that she had had contact with Mr. O. Mother tried to maintain her stance that she thought Dr de Taranto would have that information. When cross examined further ie. that information was not in any of the papers and therefore mother knew the Dr. could not have that information, finally mother accepted that she had deliberately withheld that information as she did not want anyone to know. Even at that point mother said, "I wasn't dishonest I just didn't say anything."

Mother was then cross examined at some length about why she told Dr. de Taranto that her mother had committed suicide. Mother maintained this stance for some time. She told me that the first time she found out her mother had not committed suicide was from the social worker Ms. Julie Davies. Eventually, when text messages were put to her that even up to 27th. November 2013 she was texting Mr. O referring to her own mother, Mother accepted that the whole story about her mother committing suicide and that she had ever thought that her mother had committed suicide was untrue. Mother told me that she wishes her mother was dead. She said, "Because all she and Mr. O have done is make my life hell." "By saying she was dead I wanted to believe she was dead – I did not want her to make my life hell anymore."

Mother was asked about the messages between her and Mr. O. Mother continued to deny she was ever in a relationship with Mr. O. However she accepted that she had sent a picture of a baby scan to Mr. O which she had, “downloaded from the internet” and had told Mr. O that this was his baby that she was carrying. Her explanation for this is that,

“He had raped me in September – I wanted to fear him into thinking he could not get out of it.” However, mother still maintains that she was pregnant and that she had a miscarriage in October 2013 but the baby was in fact father’s baby not Mr. O’s.

It was put to mother that she had lied to Mr. O about the baby which she accepted.

Perhaps in a telling moment she said,

“I was hoping Mr. O was not going to be an issue.”

Mother accepts she sent photographs of her and the children to Mr. O.

Under cross examination from father, mother accepted that there were only a few occasions when she left the children alone with father. She occasionally went out in the evening to carry out her work with [a company] but most of the time she completed this in the day and it did not require her to be out of the house of long periods of time.

One issue in the case is that father is adamant that mother told him that a former partner PS raped her when she was pregnant with O and that the rape happened in front of B. Mother categorically denies that this rape took place or that she ever told father that it had. Father refers to a rape when being assessed by Mr. Isobel and Ms. Deamer but mother told me she thought father was referring to the rape by Mr. O.

Mother told me that father often referred to her as a “slag” and that B could have heard that.

Mother made allegations of rape against father both in November 2011 and in March 2012. There is a police report of an alleged rape dated 2.3.2012. This allegation relates to an argument between the parents in the sitting room when father pulled at and stretched mother’s clothing but stopped short of raping her in the sitting room. However mother on her own evidence got into bed with father that evening and mother told me she refused sex but father penetrated her regardless. Mother told me that she was forced to have sex on several occasions when she did not want to.

Mother described one incident of rape when father forced her to have sex and mother told me,

“I felt like defenceless little child.”

Mother was asked why she did not proceed with the allegations of rape against father. She told me that she withdrew the allegations of rape against father under pressure from him. She also told me,

“In order to protect myself and my children I had to protect him.” Mother said,

“Do you seriously believe I would leave to go to a refuge with children only due to verbal abuse.” Mother told me father, “emotionally hijacked” her.

Mother accepted that father would shout at B and on one occasion shouted at her that “I’m not her fucking daddy – you can make her dinner.”

Under cross examination on behalf of the children mother accepted that she feels her mental health issues have not been “fully addressed.” She would like help with her anxiety. Mother accepted she can be dishonest and a therapist would “work on that.”

Mother accepted that her mood swings impacted on her care of the children.

Mother was asked about the occasion (set out above) when father took the book off B at bedtime and told mother to go downstairs. She heard B crying for about two hours. Mother told me that she wanted to go upstairs but that father would stop her.

Mother accepted that if father went near B “You could read in her face she was scared.”

Mother accepted that on at least one occasion father refused to make B dinner and told her she would have to wait for mother to come down to make her dinner.

Mother went further in her evidence towards the need and said that she can now see a connection between the allegations that B has made and her not wanting to lie down.

Mother told me,

“I’m thinking now possibly likely that something has happened – by something I mean sexual abuse.” “It is more than likely in my head she has suffered some kind of abuse.”

Mother could give no explanation as to who D, B or G are.

Mother accepted that she and father use condom and that condoms were in the bedroom drawer.

Mother told me that on one occasion Father put duct tape on her mouth and around her wrists. She was taped up for roughly one hour and she was seated on the sofa.

The evidence of father.

Father has filed two statements. In his first statement dated 3rd. September 2013 father makes the following concessions,

“I also acknowledge that there has been domestic violence between mother and I in the past and that on occasions the children have witnessed this. I accept that this has had an impact on the children and their emotional welfare...

I have never physically harmed the children. I accept on one occasion O was hurt whilst I was arguing with mother and I was cautioned as a result of this. Mother was holding O and I raised my fist to mother and I brushed O’s head. This was an accident and I deeply regret this incident.

On one occasion whilst mother and I were arguing I picked up a knife off the kitchen work top. However I immediately returned this to the worktop. I did not raise the knife to mother’s throat.

I also accept that mother has made allegations of rape against me but these are unfounded and have not been pursued by the police or mother. I acknowledge that we argue and that in the past I have pushed, grabbed and raised my fist to mother but this

is the extent of the violence between us. We are both responsible for starting arguments and being violent towards each other.”

At the stage of the first statement father was seeking return of O and E to the joint care of himself and mother.

In his second statement dated 4.2.2014, father denies sexually abusing B or acting in any way which is sexually inappropriate.

Father points out that he has three older daughters (now 19, 17 and 14) one of whom lived with him for six years. There has been no social services involvement in respect of any of these children and there is no evidence of allegations of sexual abuse made against father in the past in respect these or any other children.

Father denies over chastising any of the children.

In respect of the domestic violence Father says,
“I accept that the relationship between mother and I was characterised by domestic violence although I would say that this was more of a verbal nature than a physical one but I do not deny that on occasions this became physical. I accept that pushing and shoving is abusive. Not every disagreement between mother and myself was physical. I do accept that this behaviour was unacceptable and could have impacted on the children’s emotional needs. This is why I engaged with the [] programme and I undertook at least 6 sessions. I would have continued but when allegations of sexual abuse were made the [] programme was suspended until the outcome of enquiries. It has always been my intention to re-start this programme.”

Father opposes O and E being placed for adoption and supported return of them to Mother’s care.

In evidence father told me that he is in full time employment and his hours are Monday to Thursday 7.30 – 4.30 and on Friday between 7.30 – 3pm. He therefore had limited time at home with the children, namely evenings and weekends. He told me that on arrival home he would play with B, sometimes outside in the garden. B would go to bed at about 7pm. Saturday morning were taking up food shopping and Saturday afternoons would be family time at home or visiting his family, his children, parents or brothers.

Father accepted that on occasions mother would go out in the evening to work for [] but she would be out of the house for ½ hour maximum and often B would be with her.

Father told me that he never bathed B although he has helped mother bath B when she was pregnant with O. He told me he did not feel comfortable bathing B although he did not feel this way bathing his own daughters. However, he would change the nappies of all three girls.

Father accepted that he had smacked B “on the bum” on a couple of occasions. However he told me he didn’t discipline O because, “she didn’t do anything wrong.”

Father told me that he would walk B up to her room but, “most of the time B would come back down anyway.” He told me that he would not spend time alone with B in her bedroom. Father said that he would tell B to get back into bed. He did not feel that he treated B any differently to O and E.

In respect of the allegations of sexual abuse Father is very clear that he does not know why B is making the allegations and cannot explain her knowledge of sexual matters. He accepted that there are condoms kept in the bedside drawer. He has never seen B see a condom and does not know why she would have knowledge of them. Father told me B has never seen him without clothes on and he has never discussed “willies” or “butterflies” (in the context of vagina) with B. Father told me that he does not know a G, Mr. D or “B”, all names given to people B has made disclosures against.

Father was adamant in evidence that mother had told him that she had been raped by PS. This rape is alleged to have happened in Buckinghamshire.

The various allegations of rape were put to father and he denies ever raping mother. He is clear that any sexual intercourse was consensual. Father can give no explanation as to why mother has made these allegations against him.

In respect of the caution he received in respect of the assault on Olivia, father said, “Mother was feeding O. I put my fist up to her face and I pulled it away and I brushed and knocked the back of O’s head.

The particular incident of alleged rape of 2.3.2012 was put to father, namely the incident when he mother alleges father tore and stretched her clothing. Father’s case is that this just never happened. In relation to the incident with a knife, father accepts that during the course of an argument he picked up a knife but denies that he put it to mother’s throat. He told me, “Obviously I was angry and in a bit of a temper when I picked it up – I thought better of it and put it back down again.” Father accepted he lost control at that moment but he told me this was a “one off.” His case is that he simply picked the knife up and put it back down again. He states that he was about 4 ft from mother at the time he held the knife and that he should not have done this.

Father told me that he had benefitted from the [] programme and would like to have completed the course. He could not because of the emergence of allegations. I gained the impression that father genuinely wanted to continue with the programme. He told me that he had been taught “breathing exercises” to help him to control his temper.

In evidence, when asked about domestic violence father stated that the domestic violence consisted of grabbing, pushing, slapping from both parties, they would grab things out of each others’ hands. Father accepted he would put a fist up to mother’s face and “maybe push but never a punch.” Father accepted that’s some of the arguments were in front of the children. Father told me he thought it was, “disgusting” to have been in front of the children and he accepted that this has effected them.

Asked about his relationship with the mother of his three children he told me,

“we did have arguments – there was a bit of pushing and shoving but it was not physical.”

Father accepts that he has been verbally aggressive towards mother, shouting at her and calling her a slag. “I’ve told her to leave the house if she does not like it.” He denied ever threatening to “bounce mother’s head off the walls.”

Father accepted there was argument when the family went to Norfolk in the summer of 2013 and that he walked away from mother who was standing in a town with the children.

Father told me that he believes he is capable of changing with assistance and would like to go back onto the [] programme.

Asked what he would like to happen to the children he told me, “I would still like them to go to mother but if she can’t care I will step in. I’d have to give up my full time job.”

Under cross examination from the local authority, Father told me he has recently moved and in fact “downsized” to a two bedroomed house.

Father told me that he thought he had a, “good relationship” with B, he would play football with her and give her piggy backs. “I loved B yes.”

Asked about the first meeting of Mother Father told me that as far as he was concerned Mother was going to spend the first evening in his house – there was no question of her going to stay with an aunt. Father told me he did not think about the effect on B.

Father was clear that he felt uncomfortable about bathing B because she was not his child. However he accepted he has changed B’s nappy and applied cream to her.

Counsel for the local authority cross examined father at some length putting the allegations of sexual abuse to him. Suffice to say that father’s case is a categorical denial of any wrongdoing in terms of sexual abuse. Father could give no explanation for the allegations made by B. He told me he has not used the word “fanny” in a sexual context.

The only explanation father could give for B having sexual knowledge is that he reports mother stating that she was raped by PS in front of B.

Father told me that B did not try and get into bed with her parents. On occasions mother has slept with B when B was ill. Father has never seen inappropriate sexual behaviour by mother in front of B.

Father conceded,
“I accept she is too young to make this stuff up.”

Father was adamant that he had only smacked B a couple of times and not hard. “We have not hurt her.”

Father conceded that B was scared of him when he raised his voice.

In respect of the police caution father said,
“I clenched my fist and put it to mother’s face. I was in a temper and lost control for a split second. I didn’t go to hit O if that is what you are trying to say. What O experienced was a punch on the head at 18 days old. It’s disgusting, I should not have done it – I can only apologise. At the time I meant to slap – hit out at mother.”

Father could give no explanation for B saying, “Shut up psycho baby.” He accepted he may have said to mother, “Shut the fuck up.” He has never smacked O.

Father told me he is an “easy going person.” However he also accepted that both mother and B may have been scared of him. He denied being a “controlling person.”

Father told me that he is not in a relationship and has no intention of being in a relationship. However, a page from a dating website was put to him. He is currently seeking a partner on a website.

Under cross examination from Mother it was put to him that one of his older daughter’s friends is called LD.

Father told me, “Mother loses control as well.” Father told me he has said to mother, “You deserve to be raped.” Father told me that on some days mother would stay in bed and his daughter would go round and care for the children.

By the end of his evidence father had conceded, “I do need help with my anger.”

The evidence of the Children’s Guardian.

The last witness I heard from was the Children’s Guardian. Ms. Rothmann has filed a report dated 13th. February 2014. Clearly the children’s guardian was unaware of what findings the court would make at the time of writing her report. However, on the evidence that she had available to her, in particular the presentation of the children, mother’s mental health issues and mother’s tendency to form abusive relationships, the Children’s Guardian recommended that Care Orders and Placement Orders be made in respect of each of the three children.

In evidence Ms. Rothmann confirmed that her recommendations remained the same. Having listened to the evidence she felt that in respect of the domestic violence father had started to take some responsibility for his actions. She is very concerned by what B has experienced. She is clear that there can be no further delay for these children. She confirmed that B is one of the most damaged children she has ever seen.

Findings and Analysis.

All advocates provided me with written submissions. They were each of the highest quality and I am grateful to them all for their tremendous hard work. They have all been of enormous assistance to me.

Ms. Hefford on behalf of the local authority has set out the law in her submissions. No issue was taken with her approach by any party. In short the burden of proof is on

the party making the allegation and the standard of proof is the balance of probabilities.

Whilst I of course have regard to the findings sought by the local authority, Ms. Guha on behalf of the children has effectively summarised the key issues in a schedule of findings. In my judgment the way in which Ms. Guha has set out these findings is a clear and efficient summary of the key issues in this case and I have referred to this schedule below.

Mother's mental health and veracity.

Perhaps unusually, before looking at the local authority evidence, I wish to consider Mother as a person and her veracity. These courts are used to witnesses, (both professional and lay) not telling the truth. Within care proceedings parents may lie for a variety of reasons, through fear, to protect themselves or another or because they are quite simply in denial. However, Mother has shown a capacity to lie which even within the context of care proceedings surpasses many witnesses I have hitherto encountered. Mother has lied about matters which go much further than simply denying that which is true. She has made up stories, which she did not have to make up in the first place and having told these lies she then continued with them causing her to embellish the original lie with details. The main example of this is the lie about her mother committing suicide.

Mother now concedes that she lied that her mother had committed suicide in the Autumn of 2013 and when it was discovered that her mother was alive she stated that she had been told by her siblings that her mother had committed suicide and she believed that to be true. She then embellished this lie by adding that she had sent money for flowers for the funeral.

Mother told these lies to Dr. de Taranto during a court assessment which was an integral part of care proceedings to determine the future of her children.

The lie that her mother had committed suicide was discovered through the intervention of Mr. O who spoke to Ms. Wheeler, not because Mother had owned up to the lie. It was only after lengthy cross examination when Mother was confronted with evidence of the Whatsapp messages that she was texting Mr. O and referring to her mother at the very time she was alleging to others that she thought her mother was dead, that mother finally desisted from this lie. In my judgment it was remarkable how long mother persisted with this lie under intense cross examination, which frankly became more ludicrous as the evidence emerged.

The second major area of dishonesty in mother's case centres upon Mr. O. In my judgment mother was thoroughly dishonest in her assessment with Dr. de Taranto when she failed to mention that she had been to visit Mr. O in September with her mother and had stayed in his flat. Furthermore she then failed to mention ongoing contact, telling Mr. O that she was pregnant with his child and sending photographs of her children to the man who has been convicted of sexually assaulting her when she was a child. These omissions are extremely serious. It was compounded by the lie that her mother had committed suicide when mother knew her mother was actually living with Mr. O. I do not accept mother's account that she had not told Dr. de Taranto that she had been to Scotland and seen Mr. O because she "assumed" Dr. de Taranto would know because she had all the papers. She knew that that information

was not in “the papers” because she had not disclosed it to anyone. This information only came to light because Mr. O decided to intervene in these proceedings and inform the local authority of what had been going on, something which Mother on her own admission did not expect or foresee. In my judgment she thought she could conceal it all because no one from the local authority would have contact with Mr. O. I can understand why it came as a surprise to Mother that Mr. O chose to become involved and give evidence against her given their history.

Mother finally admitted in evidence that she deliberately withheld this information, but only after being confronted with cogent evidence which she could no longer explain away. Mother lied about the level of contact between herself and Mr. O and then lied about the provenance of the Whatsapp messages.

Mother’s case is that she had sexual intercourse with Mr. O on 20th. September 2013 due to being raped. Mr. O accepts there was one incident of sexual intercourse which was consensual. I am satisfied to the requisite standard that mother continued contact with Mr. O after returning from Scotland and that the Whatsapp messages have not been edited but are an accurate record of the communication between Mother and Mr. O. It is regrettable that the local authority was put to the cost of instructing a computer expert to verify that these messages had not been tampered with and I accept the conclusions of that expert report.

Mother’s case in respect of the rape is that after spending several days with Mr. O, she was left alone for 20 minutes with Mr. O one evening when her mother and Mr. O’s son went to the fish and chip shop which was literally across the road. According to mother, in that time Mr. O raped her. Mother did not report the rape to the police. She did not leave the flat for a further three days. She then entered into Whatsapp communication with Mr. O for three months. The tone of those messages is certainly friendly, if not romantic. She told Mr. O she was carrying his child. The voice clip messages by mother are in a tone that one would adopt certainly as a friend or girlfriend. The communication between this couple is entirely consistent with a situation where two people are in a romantic or sexual relationship. There is nothing in the communications to suggest anger or rage by mother at what Mr. O has done if Mr. O had raped her on 20th. September 2013.

I of course take into account that Mr. O has been convicted of sexually assaulting mother as a child and therefore one must treat Mr. O’s denials of rape with extreme caution. However, looking at the other evidence in this case, in my judgment and I find, there was one act of consensual sexual intercourse between Mother and Mr. O in September 2013. For reasons I do not understand, mother then sought to continue contact with Mr. O, supply him with personal information about her life and her children including sending photographs of her children to Mr. O. She told him that she was carrying his baby even downloading from the internet a photograph of a baby scan and emailing it to him so that he could see his unborn child. There is a question mark as to whether mother was pregnant at all during the Autumn of 2013 and certainly there is no evidence that mother sought ante-natal advice or care from her GP or Milton Keynes Hospital about a pregnancy. However, even assuming mother was pregnant, on her own case, it was not Mr. O’s baby but Father’s. It is again baffling why mother would tell Mr. O this lie unless at one point she was genuinely

considering setting up home with him at the end of the care proceedings as suggested by Mr. O, or she wanted to taunt Mr. O.

Mother's behaviour is extremely concerning when considered;

- Mother stayed in the flat of her childhood abuser.
- Mother had consensual sexual intercourse with Mr. O on one occasion.
- Mother continued communication with Mr. O which led him to believe they were in a relationship (even if she had no intention of being in such a relationship.).
- Mother told Mr. O she was carrying his child and gave him hope that she wanted to set up a family with him.
- Mother gave Mr. O information about the care proceedings and about her three children.
- Mother failed to disclose the above to childcare professionals and then lied about all of the above when discovered.
- In my judgment Mother has admitted some parts of this story but has continued to lie throughout about other matters which I have made findings about.

I have of course considered the Lucas Direction. Whilst I of course accept that because mother has been found to have lied about these matters, it does not mean that she has lied about all matters in the case. However, I must treat all of mother's evidence with extreme caution because it is clear that mother has the capacity to lie on important issues.

I remain puzzled as to why mother makes up lies, in particular the lie in respect of her mother's suicide. There was no need to make up this lie in the first place. Mother's final explanation is that she said her mother is dead because she would like her mother to be dead due to the pain and hurt she has caused her. A more cynical explanation has been put forward namely that she tried to incite sympathy when undergoing the assessment with Dr. de Taranto by saying that her mother had died shortly before and another that it is some sort of attention seeking behaviour. It may be that she lies as a function of her personality disorder. Whatever the reason, it is profoundly worrying and makes working with this mother extremely difficult. This is a lady whose word cannot be trusted on important issues. That is a very difficult starting point for child care professionals working with mother in the future.

In considering Mother's veracity at this point in the judgment I want to make it clear, that such a finding about mother does not shift the burden of proof. The burden of proof remains firmly on the party making the allegation and it remains for the local authority to prove the threshold criteria. I must assess the cogency of the evidence which supports any findings sought by the local authority before considering Mother's case. If the evidence produced by the local authority is insufficiently cogent to support any finding, the fact that mother has lied on other matters is irrelevant. The local authority has not made out its case.

I must consider Mother's ability to lie in the context of her mental health difficulties. I of course accept the conviction against Mr. O and accept that Mother suffered severe childhood sexual abuse. Although I have not heard from Mrs. L, I accept Mother's mother failed to protect her and that Mother has feelings of anger and betrayal towards her mother. Ms. Deamer has set out in her assessment the many traumatic experiences this mother has suffered. In my judgment the evidence is clear that

Mother did not enjoy a safe and supportive childhood. As mother has reached adulthood she has entered into unsatisfactory and at times abusive relationships. She has already lost the care of three children and has no contact with them and now faces the loss of her next three.

I accept the expert evidence of Dr. de Taranto that mother suffers from *severe emotionally unstable personality disorder*. I have set out at length the relevant parts of Dr. de Taranto's report in respect of mother which I accept. Mother is a deeply troubled and vulnerable woman who has suffered trauma heaped upon trauma. I accept Dr. de Taranto's opinion that mother is in need of long term therapeutic intervention, something which mother also accepts and tells me she is willing and anxious to undertake. I know that mother has commenced some counselling and has received support from workers at the refuge. In my judgment Mother's emotional and psychological difficulties are deep seated and profound. She has sought stability and affection through male partners rather than ever having the security and stability within herself to enter into a relationship on an equal footing. I feel great compassion for mother as I understand the traumatic childhood she has suffered and the lack of support she continues to feel. However, she has made poor life choices and in my judgment is only at the beginning of her journey to try and repair the emotional and psychological damage of the past. In my judgement her behaviour during Autumn 2013 as set out above when she had contact with Mr. O and the lies she told, shows how dysfunctional and distorted her thinking process remains. Mother tells me that her mental health has substantially improved since a change of medication in October 2013. However, she continued communication with Mr. O post October 2013 and told lies to Dr. de Taranto in December 2013. Moreover, her pattern of entering into relationships extremely fast has continued. Mother tells me she is now in a relationship with RA since January 2013. Her account as to whether she is engaged to RA was unsatisfactory. Clearly RA has given her a ring which she has been seen wearing on her engagement finger but which she chose not to wear when in court. She gave contradictory and unsatisfactory answers when asked the very straight forward question "Are you engaged." It may be that she is or it may be that she would like to be. Again, Mother cannot be relied upon to tell the truth even on an issue such as this. Mother told me that she became pregnant within two months of starting a relationship with RA, miscarried and is pregnant again. Once again, I do not know if that is true but if it is, mother is facing yet another pregnancy and birth when she has so many emotional and psychological issues to work through and at the time she is asking for return of two of her children.

In my judgment, Mother's ability to meet the needs of her children is severely impaired by her personality disorder. In my judgment, Mother is not going to be able to provide a safe, secure and nurturing home environment until she has undergone therapy and addressed the issues causing her to lead a chaotic lifestyle. I accept the evidence of Dr. de Taranto in respect of Mother's profound psychological difficulties.

Domestic violence issues.

Both parties concede that section 31 is met on the basis of domestic violence.

The local authority seeks the following findings;

The parents' relationship is characterised by domestic violence and the children have suffered emotional harm due to this. The Mother has been unable or unwilling to extricate herself from the relationship, has minimised the violence & has prioritised the relationship over the needs of the children

I have already stated why I must treat mother's evidence on all matters with caution, due to her proven ability to lie. However, father has accepted that he has been emotionally and to an extent physically abusive towards Mother. As father gave evidence he conceded far more than in his statement. He conceded that he had an anger management problem and that he would very much like to have continued with the [] programme.

Having heard mother and father give evidence I am satisfied that their relationship was marked by frequent verbal arguments during which father swore and was abusive towards mother including calling her a "slag" and on one occasion telling her that she deserved to be raped. I also accept that the relationship was marked by physical abuse whereby on father's own admission mother was "pushed and shoved." Father told me that on more than one occasion he put his fist up to mother's face and sometimes pushed it rather than punching her. Having seen Father in the witness box I am satisfied that he is a man who can lose his temper quickly. He does not like to be challenged and at times in the witness box he was struggling to maintain control.

He admitted that mother and B may have been scared when he raised his voice.

I also consider there to be force in Mother's case that she would not have left father on several occasions to go and live in a refuge had she not been suffering abuse at home. In my judgment this mother craves stability and security and she would not have chosen to move to a refuge, often at short notice with young children, unless she really felt the need to leave the home for her own protection.

On this basis I am satisfied that the above finding is proved.

I need to consider particular incidents. Father received a caution for assaulting O on 23.1.2012. I am concerned that father sought to minimise this incident and his account is sanitised compared to Mother's police statement at the time. The fact remains that father was so angry that when Mother was holding their child of only a few weeks old father pushed his clenched fist up towards mother striking the back of the head of his new born child. All of this occurred in front of B. Whilst serious injury was not caused, in my judgment father minimises the level of fear and anxiety this behaviour would have engendered in mother, a lady who has already suffered serious trauma and in B.

The local authority has particularised specific incidents on which they seek findings;

On 11.6.13, during an incident of domestic violence, the Mother reported that Father had held a knife to her throat. Following this incident, despite Social Services having organised a place at a refuge for the Mother and the children, the Mother refused to go to the refuge.

Father also accepts that on one occasion on 11.6.2013, during an argument he picked up a knife. I found his evidence in respect of this incident wholly incredible. He told me he simply picked it up and put it back down again and that he did not point the knife at mother or threaten her with it. Mother's case is that Father held the knife to her throat. In my judgment the most likely scenario is that father, at the very least, pointed the knife at mother in a threatening way. There can be no other plausible explanation for father picking the knife up during an argument other than he had lost control and wanted to threaten mother. Again I consider this to be a very serious incident and must have caused mother great distress and further trauma.

On 5.5.11, the Mother alleged that Father had thrown her out of the house and reported that there had been several assaults upon her in recent days.

Father accepts that there were times when he 'asked' the Mother to leave the family home, although having seen him given evidence in my judgment it is more likely than not that he told her to leave. In my judgment and I accept mother's case in this regard, she would not have left the home to go to temporary accommodation or a refuge if she had felt safe and comfortable with father. I was struck by how cold and uncaring father appeared to be about mother leaving home with young children. It appeared that as long as he was not to be disturbed or inconvenienced he was not troubled that his partner carrying his own child (at this time) would be under stress and possibly in unsuitable accommodation.

On 23.8.11, the Mother telephoned social worker and reported that Father was hurting her and that it was not safe at the home. She later contacted the EDT and reported that Father had been verbally aggressive and was asking her to leave the home.

On 7.9.11, the Mother contacted Social Services stating that she wanted to leave the family home immediately. An emergency place was found for her and the children at G H. The Mother attended but did not stay the night at the refuge.

On 12.6.13, the Mother requested to meet with the Social Worker at the school and asked her to organise a place at a refuge as she wished to flee from the domestic violence. She spent only one night at the refuge and then returned to the family home with the children.

Whilst I am not going to make findings in respect of each of these incidents, I am satisfied that mother sought help and assistance on a regular basis following verbal and physical assaults and threats from father. Once again I do not accept that mother would have sought to leave father's home had she not felt under threat. It is not in dispute that Mother spent one night in G H on 7.9.2011. She told me that she returned because she did not consider it to be suitable accommodation although the local authority had secured a refuge for the following night.

Father threatened to 'bounce the Mother's head off every wall in the house' . The Mother went to a refuge with the children but returned to the family home on 12.7.13.

It is not disputed that mother left to go to a refuge at this time and in my judgment it is more likely than not that she did so due to a domestic violence incident. On this issue I prefer the evidence of mother and accept that father threatened to “bounce her head off every wall.” Father is a man who on his own admission can say extremely unpleasant and abusive things to mother during an argument and I am satisfied that father did make this threat which caused mother to leave at that time.

I accept that the local authority has attempted on several occasions to secure a place of safety for mother and the children. Only for mother to return to father.

On 18.7.13, the Mother reported to the Social Worker that she was unable to care for the children and that she and Father had been arguing 24/7 and she did not want the children to witness these arguments.

I am satisfied that mother had effectively reached breaking point whilst with the children in Norfolk on holiday and asked for the children to be removed from her care. I am troubled that the relationship between the parents was so conflicted that mother was left alone in the street with all three children and father had walked off leaving mother desperate and in distress. Whether or not the arguments were “24/7” I do not know but I am satisfied that the parents were arguing on a very frequent basis. The children, in particular B and O must have felt extremely scared and insecure at all that was happening.

Once again father’s rather cold and callous attitude towards the welfare of his own children, even if he had been driven to desperation by mother is concerning.

Father has told the Social Worker that the Mother ‘can give as good as she gets’.

I was troubled by father making this comment. It may be that mother can be unreasonable and hysterical but that does not justify father’s anger, aggression and violence. In my judgment this comment was another attempt to minimise his own behaviour. He has an anger management problem and he needs to address it.

I am concerned that despite the level of domestic violence, Mother kept returning to father and indeed went on holiday with him in the summer of 2013 leading to her requesting that the children be removed. Mother’s insecurity led her to go back to father which in effect meant that she was prioritising the relationship over the children. However, I am aware that mother has no family to whom she can turn. She is socially isolated.

The local authority has not sought to pursue the allegation made by mother against father that she was effectively falsely imprisoned on 7th. September 2013. The police have disclosed clear evidence that mother, far from being trapped in the home was out shopping. Mother maintained her case that she may have got the date wrong but the incident happened. The local authority is right not to have pursued this allegation. I make no finding in respect of it. The evidence against father in respect of this incident is unreliable.

The allegations of rape.

On 28.11.11 at a Child In Need meeting, the Mother made allegations of domestic abuse by Father. On the same day, she attended at the Police station and made allegations, including one of rape. Following this, the Mother and the children were placed at a refuge. The Mother returned to the family home on 30.11.11 and stated that she wanted the charges against Father to be dropped.

On 2.3.12, the Mother made a further allegation that she had been raped by Father.

Mother alleged in November 2011 that father raped her on several occasions. The form of rape was usually both parties being in bed and father continuing to have sexual intercourse with mother when she did not want it or actively consent to it. This particularly happened in the late stages of pregnancy with O.

I have found this a very difficult issue in the case. In my judgment, neither party is a reliable witness and I found the evidence of both parties profoundly unsatisfactory. Having seen the parties give evidence I am satisfied that father can be controlling and aggressive. I am satisfied that there have been occasions when he has had sexual intercourse with mother when she did not want it to occur. Whether she actively told father she did not want sexual intercourse I cannot be clear about. That does not excuse father's behaviour but father is sufficiently egocentric and controlling to believe that when he wants sex, mother will as a matter of course consent. In fact Mother told me that on occasions when she has been raped (as she saw it) she has felt the defenceless child that she was when abused by Mr. O and therefore did not actively resist. I am not minimising rape. Rape is a serious offence and sexual intercourse should only occur with active consent. However, mother is a vulnerable and chaotic individual. Whether her feelings towards having intercourse at any given time were made clear to father is not something I can make a finding about. However unsatisfactory, that is the extent of the findings I can make in respect of mother's allegations that father has raped her on several occasions.

However, mother made an allegation against father on 2.3.2012 that father effectively attacked her by ripping at and pulling her clothes. This was downstairs in the property in the sitting room. Mother's affect when describing this incident was very different to almost any other part of her evidence. She became genuinely extremely distressed and was able to give an account with consistencies with her police statement. Her account is that Father stopped short of rape at that time although father forced her to have intercourse later that evening when again, she got into bed with him. Father denies that this incident took place. Having heard mother and father on this issue I am satisfied that there was an incident in March 2013 when father effectively attacked mother, ripping and pulling at her clothing stopping short of rape at that time. I am satisfied that mother was extremely distressed by this incident.

Allegations made by B as reported by the foster carer.

The local authority relies upon the disclosures made by B to her foster carer in terms of emotional, physical and sexual abuse. I say at once I was extremely impressed with the foster carer. Although she is not an experienced foster carer, she impressed

me as a thoroughly genuine, decent and responsible person. She answered all the questions put to her in a calm way and I am satisfied that she has not sought to lead or influence B. In respect of the allegations of sexual abuse, B was not taken into care because of any concern about sexual abuse. The concerns were about domestic violence and bruising to B. Therefore there is no evidence to suggest that this foster carer incited B to make any allegations against her parents or anyone else.

I have of course taken account of the fact that the foster carer did not make contemporaneous notes. There was a delay in B making disclosures and the foster carer typing them up a delay of between 1/2 – 3 hours depending on what she was doing that day. I accept that there can be mistakes in reporting what has been said if contemporaneous notes are not taken. However, I am satisfied that the foster carer made every effort to record the notes accurately. I am satisfied on the balance of probabilities that B said that which is reported by the foster carer. The question for me is what weight am I to put on the disclosures and what is B actually reporting. What in fact has happened.

B suffering emotional and physical abuse.

I accept the evidence of Dr. Helps that B is an extremely damaged little girl who appears to be in a constant state of anxiety. I have set out Dr. Helps's opinion at some length and I accept her description of B. The question is what is the cause of her extreme anxiety and compulsive behaviours such as constant hand washing.

Whilst very serious allegations have been made, one key aspect of B's care is that B was parented by mother who was suffering mental health problems. The example given by Ms. Deamer as set out above shows the harsh and critical interaction between mother with B.

I have considered the disclosures made by B which have been particularised by both Ms. Hefford and Ms. Guha.

B makes several disclosures when she talks about being smacked by mother and father and of her mother hating her. The local authority has particularised some of the comments made by B as set out below;

B has stated: 'I won't get smacked here will I? Mummy smacks. Mummy hurts me ... I don't like it' [see G138].

On 30.8.13 B told the SW: 'I like that I can leave my bedroom here 'cos when I was at home I had to stay in my bed lying down ... [and then after she spilt some water] ... Daddy slaps me' [see F55]

On 30.8.13, B told SW Ruth Ayres: 'Mummy smacks me, my Mummy hates me'. [see F56]

On 25.9.13 B stated to a teacher: 'Do your Mummy and Daddy smack you? 'Cos mine do'. [see F58]

On 2.10.13 B told the foster carer: 'Mummy bites me and locks me in my room and says that a strange man will come and get me. I don't want to see Daddy because he smacks me and Olivia and Mummy and Mummy smacks Daddy'. [see F60]
B stated to the foster carer: 'I'm naughty aren't I ... No... Mummy slaps my face and laughs...'. [see G143]

In my judgment B's disclosures about being shouted at, denigrated and slapped are extremely concerning. She has repeated that mother and father have smacked her and that it hurt. She appears to need constant reassurance that she is a good girl and as Dr. Helps told me, her presentation is one of an all pervading anxiety. Both parents accepted in Court (and have accepted throughout the proceedings) that they used to smack B. Both mother and father presented this as light tapping on the hand or the nappy rather than smacking, hitting or in any way hurting B. It was put to Mr Father in cross examination that B was scared of him and he agreed with this 'when he shouted'. He also agreed that the Mother was scared of him. At the same time, Father would have the Court believe that he is an 'easy going' individual. Following on from my findings in respect of domestic violence, I am satisfied that there was a climate of fear in the household and part of that fear for B was being smacked.

I am particularly concerned that B was scapegated by F. Clearly father differentiated between B and the other two children by not feeling "comfortable" in bathing B. The evidence that emerged particularly from mother was that at times when father was angry, he would not only isolate mother but also B. I accept the evidence of mother that on one occasion father refused to make B's dinner and told her that her mother would have to make it. In my judgment the evidence is clear that father was irritated by and intolerant of B in the household. I am satisfied on the balance of probabilities that B was shouted at, smacked and scapegoated within the household. I was particularly troubled by the evidence mother gave that B was sent to her room and she could hear B sobbing for two hours. Mother did not go to comfort B out of concern for reprisals against her by father if she did so.

The parents accepted that they would take B to her room for 'two minutes' when she was naughty as a time out exercise. I am concerned by B's account that she was made to lie down on her bed as a punishment and to stay in her room. It is most unusual for a three year-old child to say that her Mummy hates her. It is submitted that the smacking of B as described by the Mother (as a 'tap') is simply not the case. It is clear that smacking looms large in B's memory and that she associates smacking with pain and feelings of hatred emanating from her Mother.

Whether or not mother ever struck B in the face I cannot make a specific finding but I am satisfied that B experienced a harsh, critical and abusive environment in which she was in a state of fear or anxiety about whether she would be shouted at, smacked or whether there would be conflict between mother and father.

I cannot make any specific findings that O or indeed E were ever smacked. However, I am satisfied that all three children were at risk of emotional abuse and inappropriate physical chastisement given the treatment of B. It may be that O and E would not have been scapegoated by father to the same degree but I am satisfied that neither of these parents were capable of creating a warm, nurturing and child centred

environment for their children. They both have emotional issues which get in the way of them identifying and recognising, let alone prioritising their children's needs.

Bruising to B's legs.

The bruising to B's legs appears to be fingertip bruising. However, the paper medical evidence is equivocal and the local authority has not sought to call any further medical evidence and does not seek a finding that the bruising to B's legs were caused by fingertip bruising through an adult gripping the leg. These bruises in the context of this case with serious allegations of sexual abuse are extremely concerning. I am thoroughly dissatisfied with the parents' proffered explanations for the bruising, namely father giving B a piggy back or Father's father catching B from falling. In my judgment neither explanation is likely to cause the bruising that was seen on B. The bruising therefore remains unexplained but I cannot make any wider finding than that in respect of this bruising and I do not rely on this bruising when I have gone on to consider the allegations of sexual abuse.

The evidence in respect of the "egg shaped bump" to B is confusing. The local authority seeks a finding that the parents failed to seek medical attention for this bruise. Once again the evidence of the parents is contradictory. The difficulty with the local authority's case is that the social workers Ms. Ayres and Ms. Wheeler were present at the family house on 15th. August 2013 and yet did not notice the bruise until the end of their visit at about 7pm even though they had been there for three hours. I do not have medical evidence as to how long it would have taken for the bruise to "come up." I am deeply troubled that B has said her mother hit her head on a radiator but the situation is too confused to make any finding. I am satisfied B had a bruise on her head on the evening of 15th. August 2013 but can make no findings as to how or when it occurred and therefore cannot make a finding that the parents failed to seek medical attention for it.

The allegations of sexual abuse.

In approaching these findings I am keenly aware of the gravity of the findings sought by the local authority against these parents. I am also aware that there has been no suggestion of allegations of sexual abuse made against father in the past and that he has raised and had ongoing contact with his three daughters. Similarly there has been no allegation of sexual abuse made against mother before these proceedings.

B underwent an ABE interview but did not make any allegations. I have therefore not had the benefit of hearing and seeing B give evidence herself.

The local authority attempted to arrange a medical examination of B on 25th. October 2013 but B became too distressed and the examination did not take place. There is no medical evidence supporting these findings.

The burden of proof is firmly on the local authority and the parents have to prove nothing.

Has the local authority presented cogent and compelling evidence on which I can place weight in order to be satisfied that;

- B has been sexually abused/suffered inappropriate sexual experiences.
- If so can I be satisfied whether mother and/or father participated/perpetrated the abuse
- Depending on the above has either mother and/or father failed to protect B from sexual abuse?

It is also perhaps important to note that Mother's case is that she now accepts that B has been sexually abused and that given her knowledge of who was in contact with B, she believes that Father must be the abuser.

Father's case now is that he accepts B is likely to have experienced some sort of sexual abuse but he is not the perpetrator and he knows nothing about it.

As I have set out above, I am satisfied on the balance of probabilities that B has made the allegations. I have confidence in the foster carer as a truthful and responsible witness who understood the gravity of the situation and attempted to give clear and truthful evidence. I am satisfied that B made several allegations over a period of time and that the foster carer recorded them carefully and she did her best to be accurate. I have taken into account the fact that there was a time delay between B speaking with the foster carer and the foster carer noting the recordings (on occasions up to three hours.) An honest witness can make mistakes when recording something unless even if it is written down extremely carefully. I have therefore considered exactly what it is recorded that B has said, how often and in what circumstances.

It is submitted on behalf of the parents that B has told proven untruths and therefore she cannot be believed. The examples relied upon are as follows;

B has told the foster carer things which cannot be true, i.e. there are occasions upon which B has, for example, told the foster carer that her parents phoned her and told her that they loved her [see I57] and she has commented that Ms Wheeler, Team Manager, has smacked her bottom. It is submitted on behalf of the local authority that this should not detract from the veracity of B's allegations of sexual abuse due to this distinction; the events which B has obviously invented (i.e. seeing Mummy and Daddy), are those of 'normal' childhood imagination and which may or have definitely happened. By stating that she has seen her parents is clearly within her experience. The reason for B stating this may be because she misses seeing mother and father and therefore has invented this story.

I accept the submission that the difference with the allegations of sexual abuse are that they required a detailed level of knowledge of sexual activity which neither parent can give an explanation for. They cannot have simply emerged from B's imagination without some actual experience. In my judgment these incidents do not fundamentally undermine the allegations made by B save in respect of identifying the perpetrator of the sexual abuse which I will discuss in due course.

I have considered the reported allegations very carefully and am very grateful to Ms. Guha for the way in which she has set out the allegations/disclosures made by B. I have had regard to the following;

- a. In my judgment one of the most compelling factors in B's allegations is the content of the allegations. The allegations show a detailed knowledge of sexual matters. In my judgment I am satisfied that the allegations made by B show an awareness of oral, vaginal and anal intercourse, masturbation, the use of condoms and of the male penis changing shape and size when B describes a willy being "stretched." These are not matters which any three year old child should have any knowledge of within a sexual context.
- b. B is able to link sexual activity with sensation. I was particularly concerned by the following disclosure; "Do you know daddy has a com-bomb and he puts it on my fanny..... white and it hurts- but mummy says its just a mistake... am I allowed to tell you that?" Mummy likes com-bombs because she says its really clean." This disclosure indicates knowledge of a male penis with a condom on, it being white and whatever then happens hurting B. Furthermore, B links the wearing of a condom with the concept of "being clean."
- c. I note that the first allegations made by B were nearly two months after being in foster care and on 08.10.13 following a medical examination earlier that day when she became highly distressed when the doctor attempted to examine her genital area [oral ev of FC K89-90]; It may be that this examination triggered fears and/or memories for B and it may be that B felt safe enough with the foster carer at that time to start making disclosures.
- d. The sexual abuse allegations made by B were consistent and repeated over many months. B has never said that they were not true or that she was telling stories.
- e. Mother and father have now accepted that it is likely that the most likely explanation for B having this detailed knowledge of sexual matters is by having witnessed and/or experienced these things. However neither parent can give any explanation as to how B could have this knowledge. Mother's explanation now is that father has perpetrated this abuse. There is no suggestion or cogent evidence that B has experienced or witnessed any inappropriate behaviour in foster care.
- f. I am concerned by B's behaviour. Whilst this is perhaps not the most compelling of factors, her behaviour in the following ways is consistent with a child who has experienced inappropriate sexual experiences. For example; B in form of masturbation, making a willy of play doh, asking for a willy for her dinner as they are 'tasty';
- g. I am concerned by B's sexually disinhibited behaviour e.g. approaching strange men and telling them that she loved them and wanted to go home with them [Dr. Helps, Ruth Ayres & FC] represents violation of her own personal boundaries [Dr.H – K29];
- h. I found one compelling factor was B's ability to role play and make two comments which particularly concerned me namely; On 4.5.2014, B was playing with a doll when she says to her doll "lie nice and still while I slip your panties off" [I 115] On a separate occasion she said, "I do PE I take off my leggings, my jeans, my pants," she then lay down on the need with naked lower half and said, "that's it nice and relaxed." [I35.]
- i. B stated that she had had her mouth taped so that she would keep quiet and her ankles being bound together with tape so that she stays in bed [I49];

admission by Mother that B had to be prised down to lie down in bed [E79] as she was reluctant to do so;

The above are factors in respect of the allegations made by B which I have found compelling evidence that B has suffered sexual abuse/inappropriate sexual experiences.

Having considered the primary allegations I then look at the child. I accept the opinion and diagnosis of Dr. Helps in respect of B. I accept that B is suffering from Reactive Attachment Disorder by Dr. Helps; a relatively rare diagnosis that is not uncommon among young children who have been abused, neglected, maltreated or not had their needs met [E112-3]. Dr. Helps opines that “her current presentation is highly likely to be linked to her lengthy exposure to the volatile and abusive relationship between her mother and father, to her mother’s changeable mental health and likely to poor and possible abusive interactions with her mother and father.” [Oral evidence at K15,17,21.]

Dr. Helps and the Children’s Guardian both told me that B is one of the most damaged and troubled little children they have ever assessed/known. Moreover Dr. Helps described in graphic terms how B had no sense of personal sense and even with her, Dr. Helps felt that B was tactile and over familiar with her in a most concerning way which went beyond a child being simply disinhibited. Her presentation is consistent with a child who has been highly traumatised and violated. Many children sadly witness domestic violence but are not as anxious and traumatised as B presents. B’s constant hand washing at this young age is extremely concerning. Whilst her presentation is not diagnostic of sexual abuse, it is entirely consistent with a child who has been emotionally, physically and sexually abused. In my judgment, the narrative that B gives is a cogent and compelling explanation for her presentation.

Having considered the above, I am satisfied that when B has made these allegations she is not parroting that which she has heard but she is describing personal experiences. I am therefore satisfied to the requisite standard that B has been sexually abused and has experienced inappropriate sexual activity including attempted or simulated oral, vaginal and anal intercourse. I am satisfied that whether or not full intercourse has taken place, there has been activity imposed upon B either vaginally or anally which has caused B pain and hurt her. I am satisfied that she has seen an erect male penis with a condom on.

I now have to considered whether I can identify the perpetrator of this abuse. I have also considered the possibility that B has been abused but has become confused as to who has abused her or “Mis-identified” the perpetrator. It may be that this is a case of “transference” ie. stating the abuse was perpetrated by father when in fact other individuals were involved for example as B identified Ms. Wheeler as someone who smacked her when she did not, but B is correct that she has been smacked.

The majority of the allegations made by B are against “Daddy.” The local authority highlights 23 occasions when B has made an allegation and references Daddy. B went to live with father when she was only 11 months old. There is no evidence before me that she has known or called any other person “Daddy.” Moreover B identifies three other names who have been involved in the abuse namely, “ B,” “G”

and “Mr. D.” Of course these may not represent three other people. The point here is that B has differentiated different acts with different people and has not simply always referred to “daddy.” Mother and father claim not to know any person by any of these names.

There is no evidence of any other male person having long periods of contact with this child other than mother and father. It emerged rather belatedly in the trial that father’s daughter C cared for the children for some periods, particularly when mother was suffering from depression and would stay in bed for periods of time. However there is no suggestion from either party that C or any of her friends have sexually abused B and B does not refer to C as a person who has abused her nor has she described negative incidents with C.

Mother did not work save for part time work with [] which she carried out either when B was at school or she would take B with her. Mother does not put forward any other person who had contact with B and could have abused her.

I am concerned that father differentiated B from his children. In my judgment he found B an irritation and she was scapegoated in terms of being chastised and verbally abused. On father’s own admission he differentiated between B and his children in terms of not feeling comfortable bathing B although he told me he was prepared to change her nappy.

I have found that father has an anger management issue and can be a threatening and controlling individual. Father accepted that B was scared of him when he shouted. Whilst this does not show a propensity to sexually abuse children, father has shown a callousness towards B which concerns me greatly.

Perhaps the most compelling factor is that B has specifically named father as the perpetrator on several occasions.

Having considered all of the evidence and in particular relying upon all of the factors set out above, I am driven to find on the balance of probabilities that Father is the perpetrator of the abuse described by B. I am also satisfied on the balance of probabilities that at least one other male individual has sexually abused B.

I now turn to the role of Mother. It is submitted on behalf of mother that if I make findings of sexual abuse against father, I should not assume that mother knew. Mr. Hamilton submits that prior to October 2013, mother was unwell and may not have been cognisant of exactly what was going on in the house. She may have been so depressed that she was not sufficiently attuned to her daughter’s needs to detect any negative reaction by B. However, mother’s evidence before me was that she was aware of B’s excessive handwashing and anxious behaviours by 2012.

As Ms. Guha points out in response to this submission there is no medical evidence before me to suggest that mother’s mental health was such that she would have been so ill that she would not have been aware of such serious abuse taking place. I reject this argument put forward on behalf of mother although I accept mother’s vulnerability and distorted thinking may affect her ability to protect B.

The first allegation B made was on 8th. October 2013 when B described her mother masturbating. B does not link father to that event although makes a disclosure against father on the same evening. Mother could give no reason for B to say this. Once again B has knowledge which it is difficult to understand how she could have without witnessing that behaviour. B does not say that mother is present when father is abusing her. However, B described being taken into "Gary's shed" where "he puts his tail into my mouth." B describes Mummy being in the shed and giving her biscuits.

I am very concerned by the allegation made by B that her mother tapes her and O's mouth, "So I shut up." B does not link this direct disclosure to her being silenced during being abused but it is very worrying that in the context of a case where I have found that a child has been sexually abused, the same child disclosed having her mouth taped in order to be silent and implicating mother in that act.

I have found that mother is a highly vulnerable and damaged individual who has suffered significant trauma in her life including childhood sexual abuse. I am extremely concerned by her distorted thinking patterns which led her to have sexual intercourse with Mr. O, her childhood abuser and to send photographs of and information about her children to Mr. O. I accept Mr. O's account that mother told him she wanted to start a new life with him with her children. (Whether she ever meant this is another matter.) In my judgment mother has shown that she has distorted thinking and her ability to protect her children from emotional and physical and possible sexual abuse is severely impaired. Moreover by taking B to stay with father on the first night she met him without any real knowledge or understanding of whether father posed a risk is clear evidence that mother put her need for a relationship before B's safety.

Having considered all of the evidence I am satisfied that mother has on at least one occasion acted in a sexually inappropriate way in front of B by masturbating. Whether or not this was in the presence of father or another person I can make no finding. Nor can I make any finding as to why mother behaved in this manner, whether she was trying to please a male partner or she was masturbating for her own enjoyment and was unconcerned that B was present.

In considering mother's knowledge of the sexual abuse I am satisfied to the requisite standard that mother was aware that B was being abused by father. Whether she actively promoted this abuse or simply could not stop it, I can make no finding although the references to mother being present when a third party "G" abused the child is concerning. Father was not alone with B for sufficiently long periods of time in order for him to abuse B without mother being present in the house. It is incredible that B would not have cried, screamed and protested either during or after such abuse (unless silenced by tape over her mouth.) It is incredible that father could have abused B in the way B has described and I have accepted, without being detected by Mother. At no stage does B state that daddy told her not to tell mummy and indeed B asks mother during a contact session on 15th. October 2013, "Does my Daddy put my willy in my bum? Does my daddy put my willy in my bum?" There is no suggestion that B was disclosing this to her mother for the first time but almost an assumption that Mother would be able to answer the question.

I have found trying to decide the level of mother's knowledge and involvement in this case extremely difficult, but on the balance of probabilities I am satisfied that mother knew that B was being abused by Father and did nothing to stop it. She failed to protect B despite having substantial if not full knowledge of what was happening to her. The reason why mother failed B to this extent is unclear and I am not going to speculate. I am concerned that these parents abused B together and therefore made a pact not to give evidence against the other. Father's case by the end of the hearing was that he accepted the most likely reason for B having sexual knowledge is because she has been sexually abused but his case remained that it was nothing to do with him and he had no knowledge of it. However, it is baffling that if that were so, father would continue to support mother in seeking care of the children when B had suffered so grievously in Mother's care. Father at the very least should have been concerned by mother having contact with Mr. O. By the end of the case and after mother had stopped giving evidence her case firmed up to being that she believed father had abused B. In my judgment, mother knew from the outset of this abuse and did nothing to prevent it. The situation of B is truly tragic.

The local authority has proved its case in this regard.

FINDINGS (TO BE READ TOGETHER WITH THE NARRATIVE ABOVE)

The threshold criteria are made out in respect of the three children as follows;

- 1. B has been sexually abused whilst in the care of the Mother and Father and :**
 - i. the Mother has exhibited inappropriate sexual behaviour in front of B on at least one occasion;**
 - ii. the Father has sexually abused B;**
 - iii. Mother had substantial or full knowledge of the abuse father was perpetrating upon B.**
 - iv. Mother has failed to protect B from sexual abuse perpetrated by Father;**
 - v. Mother and Father have failed to impose appropriate sexual boundaries and have and are likely to expose B to inappropriate sexual behaviour exhibited by themselves and/or their associates;**
 - vi. E and O are at risk of suffering sexual abuse in the care of either Mother or Father either by being the perpetrator or by failing to protect.**
- 1. B has suffered harm and O and E are at risk of suffering harm as a consequence of being physically abused and/or being overly chastised by Mother and Father.**
- 2. B and O have suffered significant harm and B, O and E are at risk of suffering significant harm as a consequence of being exposed to domestic violence between Mother and Father which both adults failed to protect the children from.**
- 3. Mother's psychological and personality difficulties have prevented her from providing consistent and adequate care to the children and from being emotionally available to her children on a consistent basis. The Mother has self harmed; attempted to take several overdoses and attempted suicide on 1 occasion in the family home whilst she had the care of the children.**

The applications for Care Orders.

When considering an application for a care order I must have regard to section 1 of The Children Act 1989. The welfare of each child is my paramount consideration. I must have regard to the welfare checklist under section 1(3). It follows from the severity of the findings that in my judgment these children have suffered and/or are likely to suffer significant harm in the care of either parent. Considering the findings made and the lack of honesty exhibited by both parents, in my judgment there is no prospect of any of these children being returned to their parents' care in the foreseeable future. In my judgment neither parent has yet told the full story. I have had regard to the evidence of Dr. de Taranto in respect of mother. There is no work or treatment available to either of these parents which, in my judgment, will enable them to care for any of the children within their timescales, given the severity and constellation of parental deficits.

The applications for a Placement Order in respect of each child.

I must consider section 1 of the Adoption and Children Act 2002. I must consider whether adoption is in the best interests of each child for the rest of their lives. I must consider the welfare checklist under section 1(4).

In considering whether to make a Placement Order I have considered the authority of **Re B-S (Children) [2013] Civ 1146**. I remind myself of what a Placement Order means for this child. It is the most draconian of orders. In particular I remind myself of paragraph 22 of **Re BS** namely,

“The language in **Re B** is striking. Different words and phrases are used but the message is clear. Orders contemplating non consensual adoption – care orders with a plan for adoption, placement orders and adoption orders – are a “very extreme thing, a last resort”, only to be made where “nothing else will do.” Where no other course [is] possible in [the child’s] interest”, they are “the most extreme option”, a last resort when all else fails” to be made “only in exceptional circumstances and where motivated by *overriding requirements* pertaining to the child’s welfare, in short where nothing else will do.”

I have also specifically considered paragraphs 32 – 34 of **LRP (A child) (Care Proceedings: Placement Order.)** per Pauffley J.

“The legal principles of application when the court is confronted with applications of this kind are well known, Where possible, consistent with their welfare needs, children deserve an upbringing within their natural families (**Re KD [1988] AC 806; Re W [1993] 2 FLR 625**). Care plans for adoption are “very extreme” only to be made when “necessary” for the protection of the children’s interests, which means “nothing else will do,” “when all else fails”. Adoption “should only be contemplated as a last resort” (**Re B [2013] UKSC 33; Re P (a child) EWCA Civ 963; Re g (a child) EWCA Civ 965.**)

Before I could consider placing LRP elsewhere than with her parents, or one of them, I must be sure there is no practical way of the authorities or other agencies providing

the requisite assistance and support which would allow her to be cared for by at least one of their parents (**Re B-S (Children) [2013] Civ 1146.**)

I must analyse and consider all of the realistically available competing options and I must weigh in the associated positive and negative factors. I have to be satisfied there is a sufficiency of evidence in relation to each proposal so as to undertake a global, holistic and multi-faceted evaluation of LRP's welfare."

I am grateful to Ms. Wheeler for setting out the arguments in respect of adoption and long term fostering for these children. There are no family members who have been assessed as suitable for caring for these children. I have to consider whether long term fostering is a realistic option for these children. In respect of O and E I do not accept that this is a realistic option at their ages. I cannot deny these children the chance of a permanent and stable family life. They need to be placed as soon as possible (and I fully expect them to be placed together) in an adoptive placement where all their needs can be met for the rest of their minority and they will feel part of a family unit for the rest of their lives. Neither of their parents is going to be in a position to care for them safely for the foreseeable future. Given the risks both of these parents pose to their children, I do not consider it to be in their best interests to have continuing contact with their parents post adoption.

In respect of B, I accept that there will be a delay in finding an adoptive placement for her. She is a damaged and extremely vulnerable little girl. She needs a great deal of care and attention and reparative parenting. In my judgment her current foster carer has started providing her with that care and I commend her for her work. I sincerely hope that B can be placed for adoption as she too needs and deserves a permanent family placement as soon as possible. I am not prepared to deny her the chance of finding such a placement at this stage.

I have considered section 52 of the adoption and Children Act 2002. I am satisfied for the reasons set out above that the welfare of each of the children requires that the consent of mother in respect of each of the three children and of father in respect of O and E is dispensed with. I make a Placement Order in respect of each of the three children authorising Buckinghamshire County Council to place the children with any prospective adopters who may be chosen by them.

In my judgment there should be contact between B and her sisters after placement and I strongly encourage the adopters of O and E and (if placed of B) to promote that contact.

I therefore make a Care Order and a Placement Order in respect of each of the three children. Given the seriousness and range of risks that these parents pose to their children separately and together, in my judgment these orders are the only realistic orders that can be made to safeguard these children's welfare. They are the only orders which will meet the children's need for a permanent family life. In my judgment they are necessary and proportionate to the risks posed to these children by their parents.

Once again I thank and commend the advocates for their assistance. I thank the child care professionals and the Children's Guardian. In particular I would like to thank Ms. Deamer and Mr. Isabelle for their very careful and insightful assessments.