

**Report focus**

Research into the scale and pattern of recurrence (the successive removal of children from their parents through care proceedings) in Wales.

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# Women in recurrent care proceedings in Wales: a first benchmarking report



## About this report

There is growing national and international recognition of what is commonly termed the ‘repeat removals’ problem—the successive removal of children from their parents care through care proceedings. Here we report findings from research undertaken by the Nuffield Family Justice Observatory Data Partnership team, led by Professor Karen Broadhurst (Centre for Child and Family Justice Research, Lancaster University) and Professor David Ford (Population Data Science, Swansea University). Using valuable administrative family court records produced routinely by Cafcass Cymru, we present the first ever estimate of the scale and pattern of recurrence in Wales.

The Cafcass Cymru data used in this study is available in the SAIL Databank at Swansea University, Swansea, UK. All proposals to use SAIL data are subject to review and approval by the IGRP. When access has been granted, it is gained through a privacy-protecting safe haven and remote access system, referred to as the SAIL Gateway. Anyone wishing to access data should follow the application process guidelines available at:

<https://www.saildatabank.com/application-process>

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## About the Nuffield Family Justice Observatory

The Nuffield Family Justice Observatory (Nuffield FJO) aims to support the best possible decisions for children by improving the use of data and research evidence in the family justice system in England and Wales. Covering both public and private law, the Nuffield FJO will provide accessible analysis and research for professionals working in the family courts.

The Nuffield FJO has been established by the Nuffield Foundation, an independent charitable trust with a mission to advice social well-being. The Foundation funds research that informs social policy, primarily in Education, Welfare, and Justice. It also funds student programmes for young people to develop skills and confidence in quantitative and scientific methods. The Nuffield Foundation is the founder and co-funder of the Ada Lovelace Institute and the Nuffield Council on Bioethics.

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## Overview

- Between 2011 and 2018, we identified 4,345 mothers (as respondents) in s.31 care and supervision proceedings.
- These mothers appeared as respondents in 5,071 episodes of s.31 care and supervision proceedings:
  - 4,345 index episodes;
  - 641 first repeat episodes;
  - 85 second repeat episodes;
  - 19 third/fourth repeat episodes.
- The majority of applications were for care orders, with very few supervision order applications.
- One in four mothers were at risk of appearing in more than one set of proceedings within eight years.
- Most repeat episodes occurred within the first three years. If mothers had not returned to court within three years, risk of return markedly decreased.
- The intervals between proceedings are short (on average 17 months between the start of one set of proceedings and the next), leaving women with little time to demonstrate to the courts that their lives have changed.
- The risk of recurrent proceedings was higher for mothers who were younger when they had their first child.
- Three-quarters (74%) of children in repeat proceedings were under a year old, a higher proportion than in the index episodes (42%).
- A higher proportion of women experienced the loss of their children to adoption in recurrent care proceedings than in their first episode.
- The risk of returning to court was higher for women who had a child placed for adoption or with the extended family at the end of their first care proceedings.
- We found no evidence of variation in the risk of recurrence by court area, although the volume of cases coming before the courts will vary due to differences in population size.
- The findings firmly endorse Welsh government's investment in prevention and indicates that programmes like *Reflect* are vital.

## 1. Introduction

Since the publication of the first estimate of the scale and pattern of women's recurrent appearances in care proceedings in England (Broadhurst et al., 2015), there is growing national and international recognition of what is commonly termed the 'repeat removals' problem.<sup>1</sup> For a proportion of birth mothers – and also fathers – history can repeat itself and result in the successive removal of children from their care through family court proceedings. Care proceedings are issued in England and Wales under the Children Act 1989 when children are considered at risk of actual or likely significant harm. Although some parents will have children returned to their care at the close of care proceedings, for many, care proceedings result in the restriction or removal of parental responsibility through court order. Children can be placed in out-of-home care, kinship care, or with adoptive parents.

When parents have a child removed from their care, loss is felt acutely (Broadhurst and Mason, 2020).<sup>2</sup> This loss also impacts on the child, wider family network and siblings. Although few would argue against protective action, which includes removing children, preventing parents' recurrent appearances in care proceedings is a pressing priority. Based on empirical research in England, there is now firm evidence that a sizeable proportion of birth mothers return to court (typically following the birth of a new baby) having previously had children removed from their care. In 2015, the lead authors of this report estimated that one in every four women would return to court over a seven-year period.

The discovery of the 'repeat removals' problem has prompted a major change in how local authorities and the courts think about the impact of the family justice system on family life. Since 2015, a raft of new preventative initiatives has emerged that aim to help mothers (and more recently fathers) avoid recurrent family court proceedings. For the first time, women are able to access highly skilled, intensive help, following the removal of a child from their care. In England, new projects include the high-profile *Pause* programme and *Breaking the Cycle*.<sup>3 4</sup> In Wales, the *Reflect* programme, pioneered by Barnardo's in 2017 and first piloted in Newport, is now being rolled out to all local authorities in Wales.<sup>5</sup>

In this report we present the first ever estimate of the scale and pattern of recurrence in Wales. Adapting the methodology first established by the lead authors in 2015 (Broadhurst et al., 2015), we have used valuable administrative family court records produced routinely by Cafcass Cymru.<sup>6</sup> The findings we present regarding the scale and pattern of recurrence

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<sup>1</sup> Broadhurst, K., Alrouh, B., Yeend, E., Harwin, J., Shaw, M., Pilling, M. and Kershaw S. (2015) Connecting events in time to identify a hidden population: birth mothers and their children in recurrent care proceedings in England. *British Journal of Social Work*, 45(8), pp.2241–260. See <https://doi.org/10.1093/bjsw/bcv130>

<sup>2</sup> Broadhurst, K. and Mason, C. (2020) Child removal as the gateway to further adversity: birth mother accounts of the immediate and enduring collateral consequences of child removal. *Qualitative Social Work*, 19 (1), pp. 15-37.

<sup>3</sup> For details see: [www.pause.org.uk/](http://www.pause.org.uk/)

<sup>4</sup> For details see: Bellew, R. and Peeran, U. (2017) *After adoption's breaking the cycle programme: an evaluation of the two-year pilot, September 2014 to August 2016*. London: Coram.

<sup>5</sup> For details see: Roberts, L., Maxwell, N., Messenger, R. and Palmer, C. (2018) *Evaluation of Reflect in Gwent: final report*. Cardiff: Cascade. Available at: <https://sites.cardiff.ac.uk/cascade/our-projects/reflect>

<sup>6</sup> *ibid.*

in Wales are remarkably similar to those we previously reported for England and firmly endorse the Welsh government's investment in the Reflect initiative.

## 2. Data source and methods in brief

The primary source of data for this study were records produced routinely by Cafcass Cymru, concerning all cases of care proceedings in Wales since 2011.<sup>7</sup> Records were acquired by the SAIL (Secure Anonymised Information Linkage) Databank at Swansea University in April 2019. The SAIL Databank is a secure research environment, which provides researchers with access to anonymized records. The project proposal was approved by the SAIL Information Governance Review Panel (IGRP) at Swansea University, and received ethical clearance from Lancaster University. Cafcass Cymru, the data owner, also approved use of the data for this project.

The focus of our analysis was on s.31 public law care and supervision proceedings issued between 2011 and 2018 (calendar years).<sup>8</sup> The Cafcass Cymru data tables were restructured to focus on the mother as the main unit of measurement. Records were restructured by linking each 'unique'<sup>9</sup> mother to all her s.31 care and supervision applications, and then by linking children, and their birth fathers (where available), to the mothers' records.

Quantitative analysis methods were used to produce a descriptive profile of mothers' index and repeat episodes of care proceedings. Frequencies and percentages were calculated for categorical variables, while measures of central tendency and spread (median, lower/upper quartile and interquartile range) were used for continuous variables. Survival analysis (Kaplan-Meier<sup>10</sup>) was used to estimate the probability of recurrence for birth mothers.

**Figure 1: Episodes captured in our dataset (mothers and s.31 proceedings)**



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<sup>7</sup> Cafcass Cymru is routinely involved in all s.31 cases of care proceedings. A Family Court Advisor, employed by Cafcass, is appointed by the court to represent the child.

<sup>8</sup> Cafcass Cymru does not collect data on voluntary admissions to care under s.76 in Wales. Therefore, our analysis will underestimate the total number of birth mothers who experience loss of a child to public care.

<sup>9</sup> By unique, we mean that duplicate records were removed.

<sup>10</sup> For details see: Hosmer, D. W., Lemeshow, S. and May, S. (2008) *Applied Survival Analysis: Regression Modelling of Time to Event Data*, 2nd edn, London, Wiley. Collett, D. (2003) *Modelling Survival Data in Medical Research*, London, Chapman and Hall.

Full details of the process of data restructuring and de-duplication, and the analysis strategy can be found in the technical appendix that accompanies this report.<sup>11</sup> A similar approach was taken in work previously published by the lead authors.<sup>12</sup>

### A note on terminology

**Legal episodes, episodes or proceedings:** refer to the activity that takes place in the family court between the issue of a s.31 (care or supervision) application and its closure by Cafcass Cymru.

**Index episode:** refers to the first set of proceedings recorded in our dataset for any given mother – NB. the mother may have appeared in care proceedings before 2011, but reliable electronic Cafcass Cymru records only date back to 2011.

**First repeat and second repeat:** refer to the subsequent two episodes.

**Child:** refers to a subject in s.31 proceedings.

**Mother:** refers to a female respondent in s.31 applications, who is the birth parent to at least one subject in that application.

**Father:** refers to a male respondent in s.31 applications, who is the birth parent to at least one child in that application.

**Legal outcomes:** refers to the outcome for children at the end of care proceedings, based on the legal order made.

- **Placed for adoption:** where children are on an Adoption order or a Placement Order at the end of proceedings
- **In care:** where children are on a Care Order at the end of proceedings (this may mean a child is placed in foster care, with kinship carers, or at home with parents)
- **With family members:** where children are placed with kinship carers at the end of proceedings on a Special Guardianship Order, a Residence Order or a Child Arrangements Order.
- **With parents:** where children remain with (or return to) the care of their parents (on a Supervision Order, Family Assistance Order or Order of No Order, or where no order is made) at the end of proceedings.

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<sup>11</sup> The technical appendix indicates the approach taken for this particular analysis for Wales and differences between the team's earlier work for England,

<sup>12</sup> Broadhurst et al. (2015) *ibid*.

Broadhurst, K., Mason, M.C., Bedston, S., Alrouh, B., Morriss, L., McQuarrie, M.T., Palmer, M., Shaw, M., Harwin, J. and Kershaw, M.S. (2017) Vulnerable birth mothers and recurrent care proceedings. Lancaster: Lancaster University. <http://wp.lancs.ac.uk/recurrent-care/publications/>

Bedston, S., Philip, G., Youansamouth, L., Clifton, J., Broadhurst, K., Brandon, M., & Hu, Y. (2019). Linked lives: Gender, family relations and recurrent care proceedings in England. *Children and Youth Services Review*. <https://doi.org/10.1016/J.CHILDYOUTH.2019.104392>



### 3. Key findings

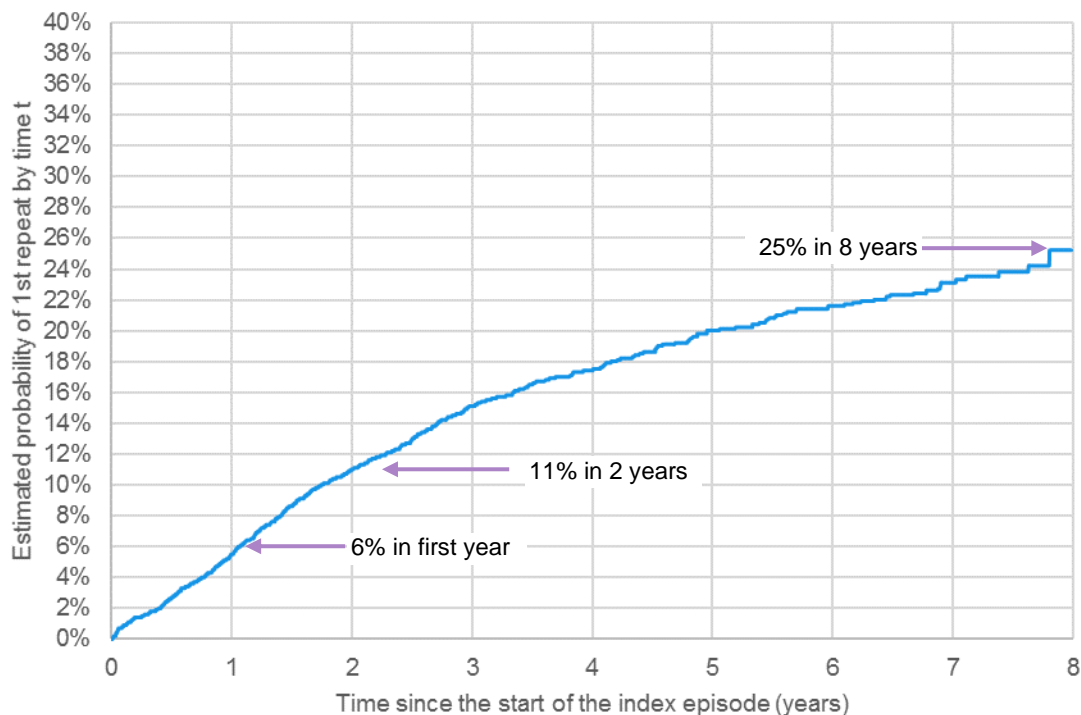
For the purposes of this summary report, we have condensed our findings to address the following five questions:

- What is the scale and pattern of birth mothers' recurrent appearances in Wales?
- What is the age profile of mothers?
- What is the age profile of children in recurrent proceedings?
- What are the legal outcomes for children at the end of proceedings and is this associated with risk of recurrence?
- Can we see variation between the Designated Family Judge (DFJ) court areas in Wales?

#### 3.1 What is the scale and pattern of the problem?

Using methods of survival analysis, one **in every four mothers** (25%) who recorded an index episode of care proceedings in Wales (between 2011 and 2019) was at risk of a **repeat episode** within eight years. Thus, recurrence is a sizeable problem in Wales, with a scale that is very similar to that previously calculated for England (Broadhurst et al., 2015).<sup>13</sup>

**Figure 2: Probability of recurrent care proceedings**



<sup>13</sup> ibid. The authors estimated that one in every four mothers in England would return within a seven-year period.



## Intervals between recurrent care proceedings

Most repeat episodes occurred **within the first three years** of the index episode. If mothers had not returned to court within three years, risk of return markedly decreased.

The median interval between the start of the index episode and the start of the first repeat episode was short, at 17 months (or 75 weeks). **22% of episodes overlapped**. When care proceedings overlap, a new set of proceedings starts before the index proceedings have concluded, meaning that some women are exposed to continuous legal proceedings.

The median interval between the start of the first repeat episode and the start of the **second repeat episode** was again short, at 69 weeks (16 months). 13% of the second repeat episodes overlapped with the first repeat episodes (i.e. the second repeat episode started before the conclusion of the first repeat episode).

For birth mothers who have had children removed from their care, the interval between one set of care proceedings and the next may constitute a vital window for recovery. However, the short intervals we have observed (both following the index and first repeat) are out of sync with what is known about realistic timeframes for recovery from problems such as mental health or addiction (Sidebotham and Heron, 2006<sup>14</sup>; Brandon et al., 2008<sup>15</sup>; Bockting et al., 2015) – problems that are common in the lives of women whose children are removed through court order.<sup>16</sup>

### 3.2. What is the age profile of mothers at entry to motherhood?

We inferred the age of the mothers at entry to motherhood by the age of the oldest child in their index episode.<sup>17</sup> Figure 3 illustrates that 41% of the mothers in care proceedings were under the age of 21 when they had their first child – 14% were under the age of 18 and thus legally regarded as children.

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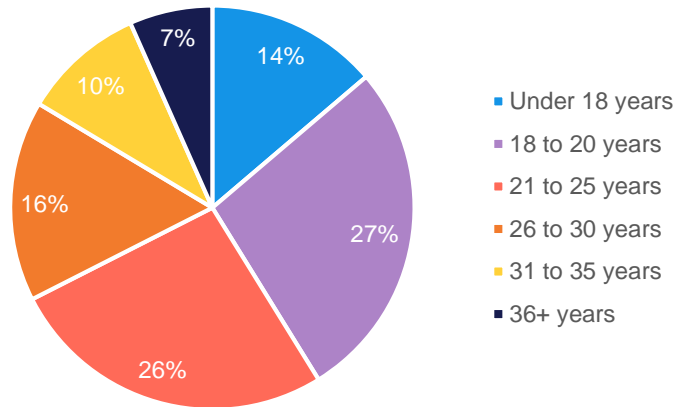
<sup>14</sup> Sidebotham, P. and Heron, J. (2006) *Child maltreatment in the "children of the nineties": a cohort study of risk factors*. *Child Abuse and Neglect*, Vol.30 (No.5). pp. 497- 522. doi:[10.1016/j.chiabu.2005.11.005](https://doi.org/10.1016/j.chiabu.2005.11.005)

<sup>15</sup> Brandon M., Belderson P., Warren C., Howe D., Gardner, R., Dodsworth, J. Black J. (2008) *Analysing Child Deaths and Serious Injury through Abuse and Neglect: What Can We Learn? A Biennial Analysis of Serious Case Reviews 2003–2005*, London, Department for Education, available online at <http://webarchive.nationalarchives.gov.uk/20130401151715/https://www.education.gov.uk/publications/eorder/ingdownload/dcsf-rr023.pdf>

<sup>16</sup> Bockting C. L. Hollon S. D. Jarrett R. B. Kuyken W. and Dobson K. (2015) 'A lifetime approach to major depressive disorder: The contributions of psychological interventions in preventing relapse and recurrence', *Clinical Psychology Review*. [10.1016/j.cpr.2015.02.003](https://doi.org/10.1016/j.cpr.2015.02.003).

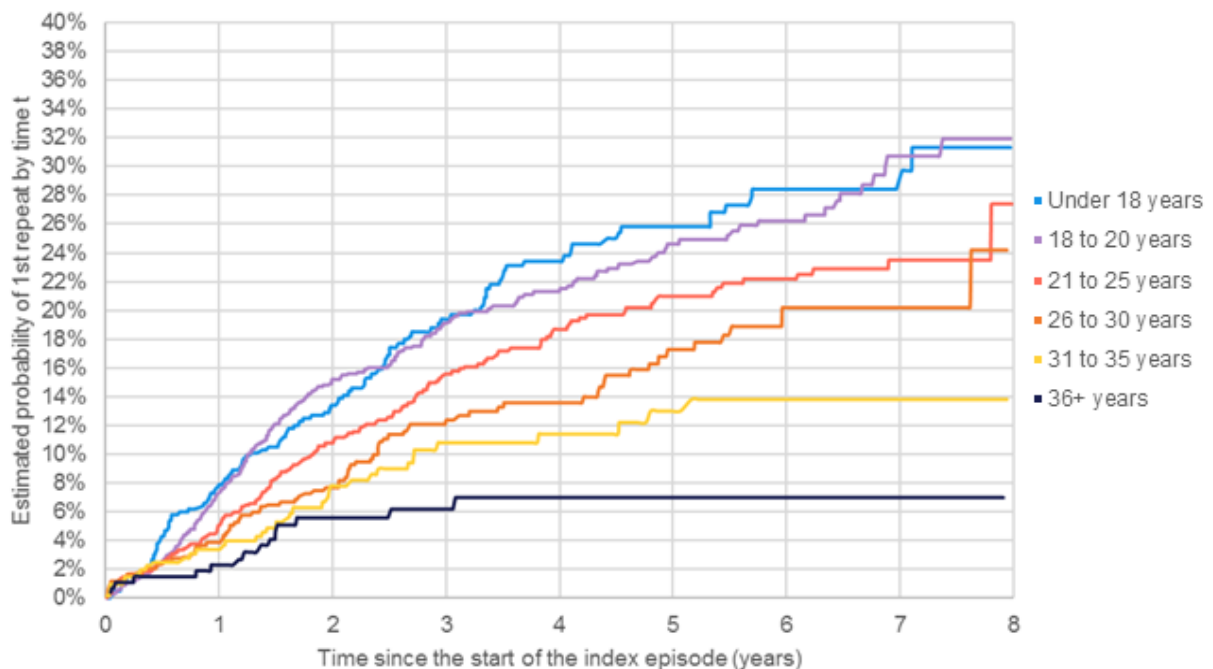
<sup>17</sup> Some mothers may have had older children who had not been involved in care proceedings or who had appeared in proceedings prior to 2011 when reliable electronic Cafcass Cymru records date back to.

**Figure 3: Age of mothers at entry to motherhood**



Women entering motherhood at a younger age were at a higher risk of reappearing in a further episode of care proceedings (figure 4). The probability of recurrence rises to around 32% for mothers aged under 21 - almost one in every three of these younger women is likely to reappear in a subsequent set of proceedings within eight years. In contrast, the probability of recurrence is around 14% for the group aged 31 to 35, and only 7% for those aged 36 years or above.

**Figure 4: Probability of recurrence by mother's age at entry to motherhood**

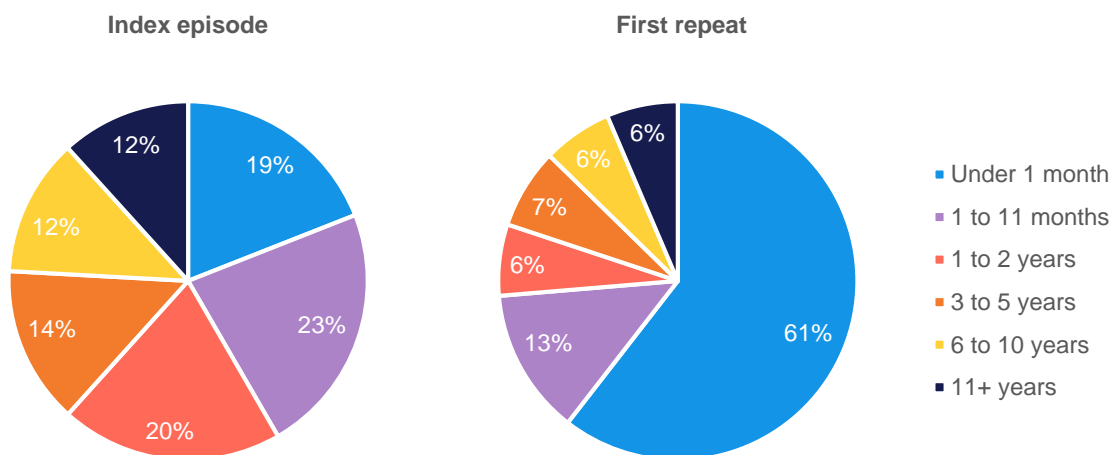


### 3.3 What is the age profile of children in recurrent proceedings?

It is important to note that recurrent care proceedings can concern children who have previously appeared in an earlier set of proceedings. In our earlier work, we have referred to these children as ‘**recurrent children**’ – the *same* children appear in only a small proportion of cases. In our Welsh cohort, recurrent children constituted only 7% of the children in the first repeat episode, and 8% in the second.<sup>18</sup> By far the largest proportion of children who appear in recurrent care proceedings in Wales are therefore siblings born subsequent to the removal of an older sibling who the court has not seen before.

In keeping with findings in England, the number of very young children subject to proceedings rose sharply in the first and second repeat episodes. In **61% of first repeat episodes**, care proceedings were issued for infants aged less than one month old. This contrasts with only 19% at the index episode. Infants aged three months or under comprised **69%** of the first repeat episodes. Again, this pattern is remarkably similar to that observed in England (Broadhurst et al., 2015).<sup>19</sup> Older children are infrequent in recurrent care proceedings.

**Figure 5: Age of youngest child at the start of care proceedings**



We have previously commented that local authorities and the courts appear to take far more pre-emptive action early in the life of an infant where the courts already know a mother. We have also reported the rising number of newborns in care proceedings in Wales.<sup>20</sup> Putting

<sup>18</sup> These are children who we expect are children who have returned home or been placed with kin, but the placement has broken down and hence fresh proceedings are issued.

<sup>19</sup> *ibid.* The authors drew the same observations about infants in care proceedings in England. In a first repeat episode, over 70% were aged under one year and nearly 60% were aged less than one month.

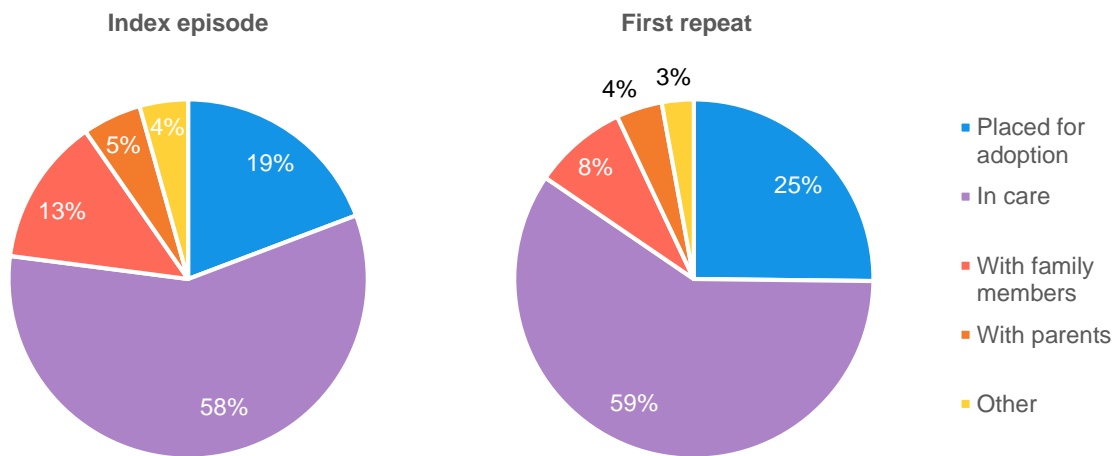
<sup>20</sup> Alrouh, B., Broadhurst, K., Cusworth, L., Griffiths, L., Johnson, R., Akbari, A., and Ford, D. (2019) *Born into care: newborn babies and infants in care proceedings in Wales*. London: Nuffield Family Justice Observatory. Available at <https://www.cfj-lancaster.org.uk/news/bornintocarewales>

these observations together, recurrence is a social issue in Wales, which primarily concerns younger mothers and the very youngest children in the family justice system.

### 3.4 What are the legal outcomes for children and is this associated with risk of recurrence?

From Figure 7 below, we can see that **a higher proportion of women experienced the loss of one or more children to adoption** in the first repeat episode than in their index episode (index: 19%; first repeat: 25%). In terms of the legal outcomes for children, again the trend is the same as in England (Broadhurst et al., 2015).<sup>21</sup>

**Figure 6: Legal outcomes at the end of care proceedings**



Proportionally fewer children were legally placed with family members at the close of proceedings in the first repeat than at the mother's index appearance.

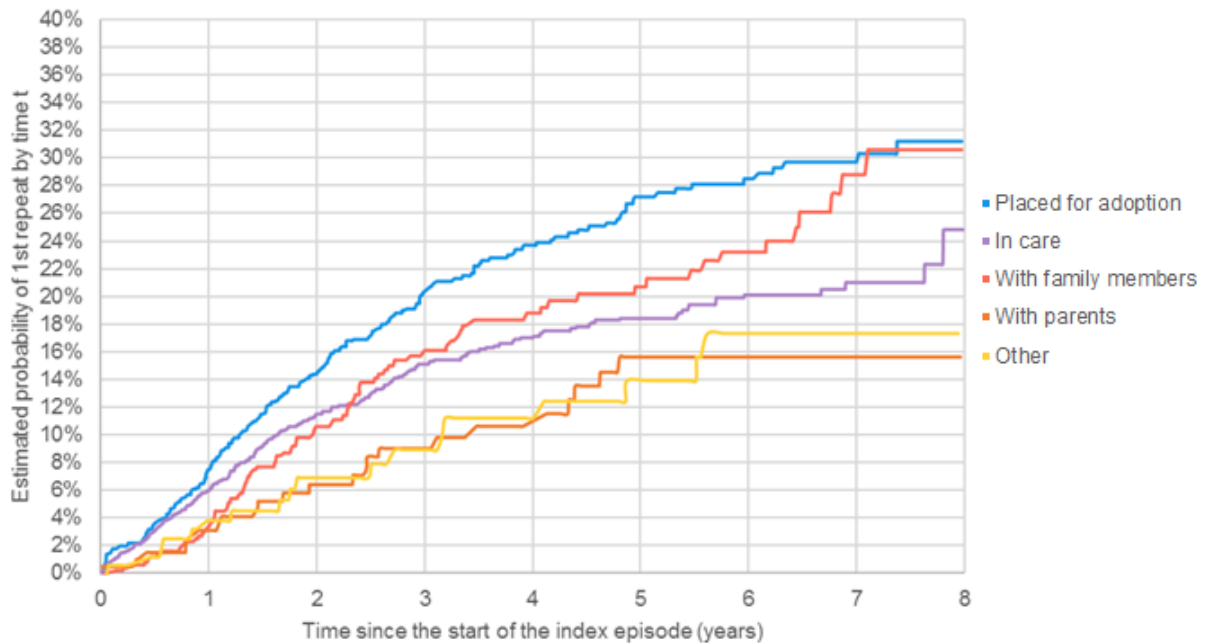
The picture for all legal outcomes remains very similar between the first and index set of proceedings. Thus, we might tentatively conclude that in recurrent proceedings, more women are likely to experience the adoption of their children, rather than see children placed with family and friends (beyond their index appearance).

In this report, we have also examined the relationship between legal outcomes and recurrence. From Figure 8 below, it is possible to see that if a child returns to or remains with their parents at the end of proceedings the likelihood of (mother's) recurrence reduces. Conversely, adoption is associated with the highest rate of recurrence. Both of these findings are consistent with observations reported in earlier work for England, and the US

<sup>21</sup> Ibid. Overall, the number of children placed for adoption is lower in Wales than in England at both the index and first repeat episodes.

(Grant et al., 2011).<sup>22</sup> Therese Grant and colleagues observed that when mothers with substance misuse disorders retained a child in their care, the risk of rapid repeat pregnancy reduced. The researchers argued that removal increases the likelihood of a “replacement baby”, as women consciously or unconsciously respond to their loss.

**Figure 7: Probability of recurrence by legal outcome**



Interpreting legal order data for children in Wales is complicated because of changing trends in the use of care orders. In our earlier work, we determined that increasing numbers of infants appear to be subject to care orders at the close of proceedings (Alrouh et al, 2019<sup>23</sup>). Anecdotal evidence is that increasing use is being made of care orders for infants placed with parents at home or with kinship carers. Thus, the observations we have drawn in this section require further testing. In order to gain a more robust picture of the relationship between legal order outcomes and the probability of recurrence, further work is needed to link children’s family court records to their placement data.

### 3.5 Can we see variation between the Designated Family Judge (DFJ) areas in Wales?

Around half of the all episodes (index, first and second repeats) were issued in the Cardiff and South East Wales designated family judge (DFJ) court area, followed by approximately a third of the episodes in Swansea and South West Wales. North Wales has the smallest contribution in terms of the number of cases (18% of index, 18% of first repeat and 14% of

<sup>22</sup> Grant, T., Huggins, J., Graham, J. C., Ernst, C., Whitney, N., and Wilson, D. (2011) Maternal substance abuse and disrupted parenting: distinguishing mothers who keep their children from those who do not, *Children and Youth Services Review*, 33(11), pp.2176–85.

<sup>23</sup> *ibid.*

second repeat episodes). The volume of cases seen by the courts will be impacted by the size of the local population.

However, in terms of the probability of recurrence, the DFJ areas evidence a very similar picture. Despite the differences between the three DFJ areas in terms of the overall number of mothers in s.31 proceedings, differences in likelihood of recurrence was not statistically significant. Further research is needed to link recurrence rates to other sociodemographic data, such as deprivation, health, education, and employment, to produce richer insights into the patterns of recurrence.

#### 4. Policy and practice implications

The findings we have reported in this first analysis of recurrence in Wales, based on the cases of 4,345 mothers (of whom 641 were recurrent), are remarkably similar to those reported for England in 2015 (Broadhurst et al., 2015).<sup>24</sup> It is very clear that **a sizeable proportion of mothers are at risk of recurrence in Wales (one in four) when we observe patterns over an eight-year window.** The risk is heightened for younger mothers.

The short intervals between, or overlapping episodes of care proceedings, evidence the extent to which **women's lives are caught up in continuous, or closely spaced, family court proceedings.** As we noted in England, the courts and local authorities are likely to act early in the life of an infant if a mother has already appeared as a respondent in care proceedings. The rising numbers of infants born into care is a particular concern for Wales and there is little hope of this changing, unless more is done to prevent recurrent care proceedings.

The **youngest mothers** in our cohort evidence the greatest probability of recurrence. A small but concerning number of mothers are aged less than 18 years of age when they appear in their first set of care proceedings. **Adult developmental journeys** must be considered both in terms of preventative services and the support required for young parents to enable meaningful participation in care proceedings. At present the Cafcass Cymru dataset provides eight years of high-quality valuable data. Over time, it will be possible to gain a longer view of the trajectories of mothers (and fathers) through care proceedings, mapped against the adult life course. It does appear that adoption heightens women's risk of recurrence – which is in keeping with the international literature which suggests that women seek to replace a lost baby. Further research is needed to link recurrence rates to other sociodemographic data, such as deprivation, health, education, and employment, to produce richer insights into the patterns and risk of recurrence.

The Reflect programme, originally pioneered by Barnardo's in Newport, continues to be developed, and the ambition is to ensure that this programme is offered by every local authority in Wales. **The new evidence we present endorses Welsh Government's investment in this initiative.** We did not see evidence of variation in rates of recurrence by court area, although service provision will need to be based on the size and needs of local

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<sup>24</sup> *ibid.*

populations, possibly with shared programmes in areas with lower numbers of families entering care proceedings.

This report also provides further evidence to support the messages set out in the recently published Commission on Justice for Wales, which argued for further preventative measures to reduce the need for care and recurrent care proceedings.<sup>25</sup> Scaling up investment in initiatives such as Reflect will deliver returns not just for the family justice system, but over time, may also reduce demand on other health and social care services. For families, including mothers, fathers, siblings and extended family networks, services like Reflect bring hope in terms of change, but also help regarding resolution of loss.

Currently there is no statutory mandate regarding the provision of tailored rehabilitative support to parents following child removal, which may threaten the sustainability of the Reflect programme, despite current government endorsement. This first report for Wales provides the first **benchmarks of recurrence** against which progress to reduce women's repeat appearances in care proceedings can be measured. In the context of continued downward pressure on public service budgets, the need for an informed approach to investment is ever more pressing.

Our first analysis of recurrent care proceedings was published in 2015 for England. At that time, it was not possible to undertake similar work in Wales based on full-service population-level data, because the electronic case management system was not sufficiently mature – records only dated back to 2011. However, this first report for Wales using Cafcass Cymru anonymised records demonstrates the potential of this administrative data. The secure environment of the SAIL Databank, together with investment from the Nuffield Family Justice Observatory and Welsh Government, holds out the promise of identifying predictors of recurrence at an earlier point – which may avert the pain of repeat removals for parents, children and wider family members.

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<sup>25</sup> Commission on Justice in Wales (2019), *Justice in Wales for the People of Wales*: Available at: [https://gov.wales/sites/default/files/publications/2019-10/Justice%20Commission%20ENG%20DIGITAL\\_2.pdf](https://gov.wales/sites/default/files/publications/2019-10/Justice%20Commission%20ENG%20DIGITAL_2.pdf)



