

**THE TRUTH ABOUT THE CHILDREN'S CARE SYSTEM, THE LINKS
BETWEEN CARE AND CUSTODY AND THE ROLE OF ALCOHOL IN
CHILD NEGLECT**

Sir Martin Narey

Abstract

On 19 March 2019, Sir Martin Narey gave his inaugural address on being appointed Visiting Professor at the Policy Evaluation and Research Unit (PERU) at Manchester Metropolitan University. In this, he reflected on his life and career in the Prison Service, Barnardo's and roles for Government since retirement. In doing so he commented on the links between alcohol, imprisonment and the care system. This paper reproduces this inaugural address.

Keywords

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Introduction and thanks

Thank you. It is genuinely a privilege to be asked to become a Visiting Professor, just a few years after this university was good enough to flatter me with an Honorary Doctorate. I'm particularly grateful to Kevin Wong, whom I got to know in a similar role at Sheffield Hallam. It's good to work with academics like Kevin who are so willing to offer a platform to a sometimes contrary and non-academic view. And some of what I have to say this evening might be considered contrary.

I'm not sure whether there are rules about inaugural lectures. But, having given this a lot of thought – and I hope this isn't too self-indulgent – I decided to use this opportunity to draw on two key issues from my past working life and one from my current, semi-retired working life. So, I'm going to say something about prisons and offending, and something about the children's care system (and the links between the two). And I'm going to say something about drink and what we might do to reduce the undoubted harm caused by alcohol abuse.

Alcohol

I'd like to start with alcohol before saying rather more about prisons and children's care. The link between all three issues is, of course, disadvantage. That's evidenced by the harsh reality that so many of the people we incarcerate – men and women, but particularly men – will have had miserable and damaging childhoods, will have spent time in care and now, as adults, will have a drink problem.

Let me first volunteer that I chair an organisation called the Portman Group, which is funded entirely by the alcohol industry. It's a not-for-profit organisation, and its purpose is primarily to reduce the harm which alcohol can cause. But we do not claim any independence from the drinks producers who fund us.

I became Chair about six years ago, starkly aware of the havoc alcohol can cause when consumed irresponsibly. In prisons and at Barnardo's I saw, vividly and repeatedly, the damage drink makes to the lives of some men, women and their children. So, when I joined Portman, I wanted – for example – to see large cans of high-strength beer taken off the market. I'm talking about Tennent's Super and similar beers, not untypically containing about a third of the current recommended maximum weekly drinking guidelines in just one can. Sometimes I've seen men enter prison, still in possession of the remainder of the four-pack of such beers – a four-pack which was destined, of course, to be drunk within a couple of hours, and which contained about the same amount of alcohol as two bottles of wine. These beers are not often bought to please the palate. But they're frequently bought as a fast way to reach intoxication and oblivion.

Now, large cans of Super and many more products like them have gone. They either have been removed completely from sale or now contain less alcohol. Their removal has become part of a welcome trend, which has seen most of us consuming less alcohol than we used to – even when, in terms of liquid volume, we might drink the same amount.

I like having a drink. Indeed, part of my motivation for chairing the Portman Group was that despite being aware of the harm which alcohol can cause, I believe that, overwhelmingly,

drink adds a great deal to much that is a good in British society. Nearly all the important dates in my life – my wedding and the 40-year celebrations of that, our children's births, our children's own weddings, along with innumerable visits to sporting events, the theatre and music events – have been made better by being able to have a glass of wine or a beer or two.

That enjoyment is boosted when one can make choices informed by the relative strength of different drinks. For some years now, alcohol producers have been marketing many more lower-alcohol products, some of which are indistinguishable in quality and taste. The millions of people who enjoy Prosecco don't seem troubled by the fact that typically, it's almost 20% weaker than standard wine. And many beer drinkers, both in the pub and at home, are warming to some of the new generation of less strong beers, typically a third weaker than mainstream products. The move to lower-strength alternatives, including very low strength and non-alcoholic beer, seems pretty unstoppable and is hugely welcome.

Most of us drink responsibly. But a small proportion of the population do not. Drinking overall in the UK, as measured on a per-head basis, has fallen during the last decade and binge-drinking is in decline. Drinking by children has seen hugely welcoming falls. But the worry is that about a third of the alcohol consumed in England is drunk by just 4% of drinkers (Bhattacharya et al., 2018). Around 3% to 4% of adults are drinking at high-risk levels.

If we are to reduce the proportion of the population who seriously harm themselves through drinking, if we are to discourage those drinking relatively modestly *at the moment* from drinking more and harming themselves and often those around them, we need health guidance which addresses the acute dangers of excessive drinking. We don't have that at the moment.

The current guidance from the United Kingdom's Chief Medical Officers is that both men and women should drink no more than 14 units of alcohol a week, which equates to about five pints of traditional-strength beer in the UK. Some other countries' safe drinking levels – particularly for men – are much higher. In Ireland the safe level for men is 21 units, 50% higher than in the UK. In the USA it's 25 units, and in Spain it's almost 40 units – almost three times our safe drinking limit.

That said, most adults comply with the new UK guidance. But the risk from drinking doesn't increase in any tangible way if you drink, say, 16 or 18 units a week instead of 14. Dr David Spiegelhalter, the distinguished Oxford statistician, has said that the risk to life caused by drinking 14 units of alcohol a week is about the same as eating two bacon sandwiches per week, or sitting on the sofa watching an hour's TV. In truth, risk doesn't increase all that much at double the recommended low-risk levels. Of course, we shouldn't encourage people to drink more than the current weekly limits. But our focus should be on people who are putting themselves at a high risk of harm and are drinking vastly more than those limits, regularly consuming more than 35 units a week if you're a woman or 50 if you're a man.

We need guidance which helps people to avoid those genuinely dangerous levels of drinking. Such guidance would certainly say that adults should seek to drink less than 14 units a week. It might also say that, occasionally, drinking a little more than this is unlikely to be dangerous. But it might warn you that regularly drinking much more than this is hazardous and is likely to lead to early death and a miserable quality of life along the way. Such guidance, effectively marketed, could do much to alleviate the harm, including harm to families, caused by those who drift into alcohol abuse and who will likely kill themselves.

That is not to say that reducing harm can only be achieved by more pragmatic health guidance. The drinks industry can do more. Some ciders, unconscionably strong, remain on sale, and some of the new craft brewers are beginning to produce very strong quasi-Belgian beers. Some of these beers, in my view, have no place in a marketplace from which the young and the vulnerable must be protected.

The progress that the Portman Group has made in recent years has been important, but – if I'm honest – modest. We could have made more progress; perhaps further accelerated the move towards the availability of a wider range of more lower-strength products; been braver in removing from the market products which might harm the vulnerable and young; and given much greater publicity to a complaints process that allows members of the public to recommend – to an independent panel – the banning of any product they consider to be irresponsible. It's a good complaints process. But too few people know about it. And that's partly because our modest budget doesn't allow us to advertise it.

We could have done more, and done so more quickly, if more alcohol producers were as courageous and as responsible as the eight companies which currently fund us. I'm not being critical here of small producers who might genuinely not be able to afford to support us. But there are large drinks producers in the UK who fail to support the only organisation which regulates their industry; which takes harmful products out of the market; and, through informal advice, stops the appearance of so many more. Frankly, those companies should be ashamed.

Prisons

Enough about my current professional concern. Let me move on to prisons. Very little of my career was planned. Indeed, there has been a great deal of serendipity. When I graduated from the then Sheffield Polytechnic in 1978, I went to work in the NHS.

In a few years, I was doing reasonably well, managing a small group of hospitals in Lincolnshire. By this time, it was 1981 and Jan, my wife, had our first child. So, we went through a stage of life which many of you will recognise, where we didn't go out very much. And that was why, in the summer of 1981, I became hooked on a BBC documentary, made by a brilliant filmmaker called Rex Bloomstein, about life in Strangeways, Manchester's notorious Victorian prison. I have the copies of the eight episodes of this remarkable documentary in my loft still. I doubt that any government would allow such a film to be made today. It was utterly candid and showed a prison in which men lived in filthy conditions, where there was little or no opportunity to improve their life chances, and the harshness of the prison and its regime appeared to be a matter of pride.

Later that year, one Sunday evening, Jan passed across to me a copy of the Appointments pages of the *Sunday Times* and said, jokingly, 'there's a chance here for you to see a real prison'. She was referring to an advert encouraging young graduates to train to be prison governors and offering a visit to a prison for anyone who might be interested in applying. I had no such intention. But I'd mulled over the prison documentary a great deal and wanted to see whether things really could be that bad. So, I rang the Home Office, feigned interest in applying and, on Christmas Eve, I was allowed to visit Lincoln Prison. Lincoln was – and is – a smaller version of HMP Manchester. But the reality of a local prison was much worse than the candid BBC presentation of *Strangeways* prison. It was vile. It stank of excreta, not surprisingly, because men, held three to a cell designed by the Victorians for just one man, were defecating and urinating in buckets. No one that day was doing anything constructive. There was a small classroom block, but it was patently out of everyday use. Most of the eight hundred or so men incarcerated there on that day, were – in popular prison officer parlance – behind their doors, although a few were in a workshop sewing mailbags.

Much of that – the apathy, the lack of care, the pointlessness of prison – I'd seen in the *Strangeways* documentary. What I hadn't seen or experienced, however, was the routine contempt towards every prisoner I saw and from every prison officer I heard. Later, in a brief interview with the governor when I asked about rehabilitation, I was laughed at. The whole experience was horrifying. But, as I left Lincoln that afternoon, I knew that there was nothing else I wanted to do with my working life. Over Christmas I completed my application and a few months later I was back at Lincoln, not for the day but for four months, in a prison officer's uniform and learning some of the realities of incarceration.

Sixteen years later, I found myself as the Director General and Chief Executive of the Prison Service. I'd love to be able to tell you that I made a big difference. That I transformed the Prison Service and made it into a progressive organisation, one which made imprisonment largely rehabilitative. But I didn't. And as a measure of abject and tragic failure, I couldn't stop 590 men, women *and children* taking their own lives on my watch.

Those suicides were not always, or even often, attributable to being in custody. When I was leading prisons, 20% (1 in 5) of all men and boys being received had, before their term of imprisonment, tried to take their own life. And for women and girls, the proportion was 40%: 2 in 5. But that didn't make the waste of 590 mostly young lives, which had come to such a desperately tragic end, any easier to bear.

I was fortunate enough to persuade the NHS to take over prison healthcare, and we began to import hundreds of nurses and doctors. In one auspicious year, 300 psychiatric nurses arrived. Drug treatment was introduced everywhere, and we expanded education hugely. I demanded an absolute concentration on boosting basic skills because I knew that illiteracy and innumeracy made more than two-thirds of the prisoner population unemployable. As a result, and as confirmed by independent research from Nacro¹, we increased the proportion of prisoners getting jobs after release by 10%.

¹ The National Association for the Care and Resettlement of Offenders.

Meanwhile, I was utterly intolerant of abuse and sacked any officer who so much as laid a hand on a prisoner. But there was no heroic transformation of Strangeways, of Lincoln or of any other prison. Just modest improvements as part of what became known as the Decency Agenda. Some of those improvements – being spoken to with respect, having clean toilets to use, spending much more time out of cells and seeing loved ones in visits halls that were family friendly and welcoming – were not insignificant to prisoners and their families, and alleviated some of the misery of prison life. Since then – and this is a tragedy – many of those improvements have been lost again.

I spent 23 years working in or managing prisons – as friends sometimes point out to me, that's more time spent inside than some fairly serious criminals. I regret not a moment of it. And, during the time I led the service, we did make some statistically significant reductions in prisoner reoffending. But they were small and came only because I was fortunate enough to persuade the Treasury to invest in prisons in a way that my successors can only dream of.

But, I stress, the success was modest and expensively obtained. The harsh reality is that UK prisons with the numbers we incarcerate can only be marginally rehabilitative and we should be suspicious of – no, that's too diplomatic – we should deride phrases like *the rehabilitation revolution*, coined by a recent Justice Secretary. For the most part, time spent inside is not constructive, it is not likely to boost employment prospects, and it's likely to increase the chance of homelessness and damage family ties. That's because there are simply too many prisoners, too few staff and too little access to education, which I believe is the most reliable route out of recidivism.

That said, you might be surprised to hear that I don't support the current Prisons Minister's well-intentioned determination to abolish short sentences of imprisonment. And that's because, much as I'd like prison to be entirely rehabilitative, and much as I once believed it might be, prison is not just for rehabilitation. Imprisonment in a civilised society, where citizens trust the state to respond to offending rather than turn to vigilantism, must also serve the needs of retribution and deterrence.

I'm afraid this determination to abolish short sentences seems to recognise only the rehabilitative role which prison might play. And it rests on a certain romanticism about those entering prison for short periods. I sometimes hear politicians talking about a population of naïve offenders who make individual mistakes and find themselves suddenly plunged into jail, where their criminal sophistication is born. Such a view does a grave injustice to our judiciary, both magistrates and judges, who, in my experience, do everything possible to avoid the use of custody for all but serious or persistent offenders.

When Michael Gove was Justice Secretary and – briefly – I returned to the justice arena as one of his advisers, he too was interested in the possibility of abolishing short sentences. I helped persuade him not to do so by conducting a short survey of prisoners received into one large local prison over a single month and who were sentenced to six months or less. On average they had more than twenty previous convictions, many had already been inside on numerous occasions, and almost all had been given the opportunity, sometimes repeatedly, to serve sentences in the community.

If we want to reduce the prison population – and I do – then I believe that ministers are looking at the wrong end of the problem. The current record population is not caused by more offenders going to prison. It's caused by many of those offenders getting sentences vastly longer than they might have experienced a few decades ago. We need to look at shortening those sentences, probably as a reward for prisoners doing things in prison to maximise their chances of employment. Very little is gained in terms of rehabilitation, punishment or retribution by ten years inside that is not achieved by, say, seven or eight years.

The care system

I stepped down as the head of the prison and probation services in 2005, largely because the bringing together of those two services under a thing called the National Offender Management Service was veering so far away from the exciting model I'd agreed with Number 10 and the Treasury. The bedrock of the new organisation was the capping of the prison population at 80,000, something which David Blunkett, as the then Home Secretary, was brave enough to do. But when he was replaced by Charles Clarke, who promptly abandoned such plans, I resigned. The prison population today is, of course, around 83,000.

As I've admitted, serendipity has played a big part in my working life. Watching a TV documentary steered me towards the prison service. And then I moved from there to Barnardo's largely because, on the day I'd agreed with my boss in the Home Office that it was time for me to go, a head-hunter phoned me and asked whether I might be interested in reviving a charity which for many years had been the largest and most well-known children's charity but had lost recognition from the public and influence with government. I refused, categorically. But he persisted and after meeting Dr David Barnardo, eminent surgeon and great-great nephew of *the* Dr Barnardo, I was persuaded.

At the time I joined Barnardo's, I'd seen very little of the care system. But I'd met lots of young people in prison who had been in care and was seized with a conviction that being taken into care had propelled them to prison. Saying, as I did in August 2006, that 'the state, as a parent, fails [children in care] terribly' was both wrong and unfair. But I was hardly out of step with general opinion. That view had been long-established, and it is still frequently heard, particularly from politicians. So, for example, Barry Sheerman, a long-standing and distinguished Chair of the Education Select Committee, has talked of 'the perception that entering the care system is catastrophic for a child's future prospects'.

When, newly arrived at Barnardo's, I added my voice to those making this simplistic and fundamentally misconceived assertion, it brought only warm words and an invitation from Alan Johnson, then Secretary of State for Education, to lead an independent working group to examine the scope for reducing the children's care population. I was delighted to do so and determined to deliver recommendations which would achieve just that, seeing a falling care population as incontrovertibly a good thing. That view was rarely challenged in the formal evidence I heard and read. But sometimes, in the margins of consultation events or at conferences, front-line social workers would sidle up to me to whisper their anxiety that the direction of travel was not as clear as I thought. The whispers grew, I became nervous

about my initial certainty, and eventually I concluded, almost certainly to ministerial disappointment, that we should not have targets for reducing the numbers in care.

At about this time I started to see a little more of the work of Barnardo's in this area. I recall a particularly fascinating day in one of our services talking to parents – more specifically, mothers – who were seeking the return of their children from care. Our job at Barnardo's was to assess their readiness to re-assume their parenting responsibilities. What I saw made me uneasy.

My practice whenever I visited a Barnardo's service was to reflect for a day or two on what I had seen and then to share my thoughts with senior colleagues and trustees. After this visit I wrote:

[I was worried that staff] seemed to be working in a context which required them not to do what was unequivocally the best for the child, but instead one which tasked them, whenever possible, with keeping children with their mothers or returning such children to their mothers. One family was described to me as being guilty of the most abject neglect of their children who, when entering care, were filthy, suffering exceptionally serious dental decay and were not attending school. Now fostered, the children, 10 and 14, were doing reasonably well and were both at school. Meanwhile we seemed to see success in this case as eventually returning the children to a mother who, I was told, had very limited awareness of the inadequacy of her care for her children. I wondered why on earth we would contemplate taking such a risk and the answer that 'blood was thicker than water' certainly did not convince me.

As I began – tentatively at first – to utter publicly the view that we might have to think about taking more, not fewer children into care, my motives were attacked. Some correspondents said I was drumming up trade for Barnardo's Children's Homes (ignoring the fact that the last one had been shut two decades earlier) and there was a great deal of offensive comment on the internet.

I did not know it at the time, but there was no shortage of very sound research to back up my anxieties about the children we leave in neglectful and abusive homes and of the relative success of the care system.

The reality is that care can be much improved, and in reports for this government on children's homes and fostering I've made recommendations which will do that. But, as Emeritus Professor Mike Stein from the University of York has cogently opined, 'The simplistic view of care as failing young people should be confined to the dustbin.' The truth is that the care system in England has an undeservedly poor reputation. In reality, most children entering care benefit from the experience. Not all do, of course, and there are some sad and notorious failures. But, overall, the research about care is clear. To quote from 2009 research led by Donald Forrester, now at Cardiff University:

Studies consistently found that children entering care tended to have serious problems but that in general their welfare improved over time. This finding is consistent with the international literature [and] has important policy implications. Most significantly it suggests that attempts to reduce the use of public care are misguided, and may place more children at risk of serious harm (Forrester et al., 2009)

Education

The care system is particularly criticised because children in public care perform very poorly in education compared to the general population, with only about 6% of care leavers attending university compared with half of the non-looked-after population. But this is a near fatuous comparison when children in care have suffered so much abuse and neglect before entering care and when the proportion of children with special educational needs is four times higher in the care population than the general population. The reality is that when it comes to education, far from failing children, the care system can serve children well. Research by Judy Sebba and colleagues in 2015 compared the educational progress of in-care children with a similar group of children left at home, on the edge of care. They found that:

Care generally provided a protective element and that early admission into care combined with longer placements were associated with consistently better outcomes than those experienced by children who entered the care system later, those who stayed in care for short periods of time, and children classified by the local authority as being in need (children on the edge of care). (Baginsky, Gorin and Sands, 2017)

Children's views

Children's views about the care system are, generally, remarkably positive. Although they have strong views on how and why it could be improved, their overall sense of well-being is surprisingly high. Recent research conducted at the Hadley Centre for Adoption and Foster Care Studies at the University of Bristol was funded in order to give local authorities a better understanding of the experiences of children in care and the practices which help children to flourish (Bright Spots, 2017).

The research discovered that although more looked-after children than in the general population disliked their appearance, feared bullying and had reduced access to the internet, more than three-quarters of children trusted their carer and only 5% did not. Ninety-seven per cent of children said they had a trusted adult in their lives and 89% said they liked school (most of the time). More than 80% felt involved in decisions made about them by their social worker, and about the same proportion felt settled in their placements. Crucially, 83% of children thought their lives were getting better in care and, remarkably, a larger proportion of children in care than in the general population always felt safe (Selwyn, Magnus and Stuijzand, 2018).

Custody

So why is it that I met so many young people in prison who had spent time in care? Doesn't that suggest that the care system, as I once suspected, propels young people towards custody? Recently the Prison Reform Trust asserted that that half the children in custody in England have experienced care. Research in 2013 suggested that the proportion was a third rather than half (Kennedy, 2013). And the proportion in care immediately before custody is almost certainly lower still. A survey of the population of all children in custody in a single day in 2017 (which I conducted) found that just 28% had been in care immediately before their incarceration.

That's still a high proportion and reflects the reality that children in care are significantly more likely to be subject to criminal proceedings than other children. That might appear, at first, to be evidence of unfair treatment by the criminal justice system. But it should not really surprise us. To compare children in care with the wider population of children, most of whom have experienced the love and stability of parental care, is to misunderstand the plight of children who enter care. We should expect that children who have been neglected, abused and damaged, as so many have been, will comprise a relatively large proportion of children who are subject to criminal proceedings.

The encouraging progress of many children in care is truncated when, with admirable intention, but sometimes with too much optimism, we return those children home. We should help parents to change and reclaim the care of the children whom, in my experience, they indisputably love. But we have too often let children down by returning them to parents only for them to be neglected once again. In landmark research from 2010, Elaine Farmer at the University of Bristol talked of children being returned to parents 'because of an over-optimistic view of the possibility of parental [and] in the face of long histories suggesting the contrary'. She found that two years after the children in her study had been returned to their parents, three in every five (59%) had been abused or neglected once again (Lutman and Farmer, 2012).

Many of those who subsequently graduate to custody will be from a worryingly large group of children who enter, leave and re-enter the care system repeatedly as consecutive efforts to return them home fail. As previously reported (Narey and Owers, 2018), one recent study found that over 40% of young people who re-entered care aged between 10 and 15 had already had three or more previous periods in the care system (Boddy et al., 2008). Those children have been failed.

Of course, I understand the financial burden that a growing care population imposes on local authorities. But the care population is not – as is frequently asserted – at record levels. In 1981 there were 92,000 children in care in England. The magnitude of that fall does not support – certainly not with any long-term perspective – the proposition that the current numbers represent a care crisis as opposed to a financial one. And policies which explicitly or implicitly seek to bear down on numbers in care risk failing to protect children who need our protection. And that's because, as I once told David Cameron when he was Prime

The truth about the children's care system, the links between care and custody and the role of alcohol in child neglect

Minister, for all its faults, despite how much could be done to improve it, our children's care system is the UK's hidden public sector success story.

Thank you for listening to me. I'll be very pleased to take questions.

References

- Baginsky, M., Gorin, S. and Sands, C. (2017) *The fostering system in England: evidence review*. London: The Department for Education.
- Bhattacharya, A., Angus, C., Pryce, R., Holmes, J., Brennan, A. and Meier, P. (2018) *How dependent is the alcohol industry on heavy drinking in England?* London: Addiction: Society for the Study of Addiction.
- Boddy, J., McQuail, S., Owen, C., Petrie, P. and Statham, J. (2008) *Working at the 'edges' of care? European models of support for young people and families*. London: Thomas Coram Research Unit, Institute of Education.
- Bright Spots. (2017) *Local authorities delivering good care experiences for young people*. University of Bristol, School For Policy Studies.
- Forrester, D., Goodman, K., Cocker, C, Binnie, C. and Jensch, G. (2009) 'What is the impact of public care on children's welfare? A review of research findings from England and Wales and their policy implications.' *Journal of Social Policy*, 38(3), pp. 439–456.
- Kennedy, E. (2013) *Children and young people in custody 2012-13: an analysis of 15-18-year-olds' perceptions of their experiences in young offender institutions*. London: HM Inspectorate of Prisons/Youth Justice Board.
- Lutman, E. and Farmer, E. (2012) 'What contributes to outcomes for neglected children who are reunified with their parents? Findings from a five-year follow-up study.' *British Journal of Social Work*, 43(3), pp. 559-578.
- Narey, M. and Owers, M. (2018) *Foster care in England: a review for the Department for Education by Sir Martin Narey and Mark Owers*. London: The Department of Education.
- Selwyn, J., Magnus, L. and Stuijzand, B. (2018) *Our lives our care: looked after children's views on their well-being in 2017*. University of Bristol School for Policy Studies; Coram Voice. [Online] <http://www.bristol.ac.uk/media-library/sites/sps/documents/hadleydocs/our-lives-our-care-full-report.pdf>