

The Street Weapon's Commission

CS John Carnochan

Commissioner

Welcome to you both. Two senior representatives of Strathclyde police, very welcome here today and thank you very much for coming. John Carnochan, Detective Chief Superintendent, with a long and if I may say so very distinguished and successful...

CS John Carnochan

Thank you.

Interviewer

...record in policing, largely on the CID, serious crime, senior investigating officer front with a lot of success there. And Karyn McCluskey who I think if I remember rightly started as a nurse...

Karen McCluskey

I did.

Interviewer

...through forensic psychology, became an intelligent analyst and now heads up what must be I suppose one of the biggest intelligence analytical departments in the UK. With a team of basically also analysts working for you. You're operating in Strathclyde and Strathclyde for the purpose of this is to a large extent Glasgow, though not altogether Glasgow, we know. And it has this quite dreadful reputation which you're trying very hard with others to try and change. Murder capital of Europe, by far the highest percentage per head of population of murders of anywhere, any city in Europe. And murder by knife, by knife crime, 4 times, very nearly 4 times greater than anywhere else in England and Wales. I mean really is a problem, which of course it's why you're here today and why we're trying to draw from you some of the lessons of where it's come from and particularly where it's going. I wonder if

perhaps Mr Carnochan you could start off and tell us how you see the balance between the traditional role of policing, which is simplistically why don't you lock them all up and put them away and throw the key away, which is one point of view, oversimplified to make the point? How you balance that against the need to interpose early on and prevent people coming to that point in the first place. Now there is a balance, I'd be very interested later in the discussion to explore that with you. But can you very quickly sort of approach that dilemma first and see how Strathclyde police are handling that balancing act.

CS John Carnochan

Absolutely. First of all thanks very much for the invite. We need all the help we can get in resolving some of the challenges that face us throughout the UK. The balance is right, I think what's happened over the years, or what's tended to happen for various reasons is that criminal justice, which was a service of last resort when everything else failed, when people moved outside the boundaries of society in terms of breaking the law, it was a last resort. And what happened over the years, it's become the service of first resort. It's where we've gone to all the time to try and solve our problems. So we legislate, we define antisocial behaviour, but we don't define pro-social behaviour. We seem to go there all the time and there's an attraction to that because it's very visible, it's very swift. You can see things happening one year on another year and there is a certain I suppose in some areas satisfaction to see that justice is not only done, but seen to be done. And I think it's quite right that we should have a robust criminal justice system, but I think the ethos we're trying now to, in view of Strathclyde and throughout Scotland is the notion that criminal justice on its own won't solve the problem. The rule of criminal justice is to give everyone else some leg room, or elbow room until they found the solutions long term that will solve the problem. So that's 43 percent of the prison population in Scotland are there for nonsexual

violent crime. Detection rate for murders in Strathclyde police over 30 years, 90 something percent, that's clearly not an issue. It's about that relying on this as being the solution. It's not the solution. It's far from the solution. It's always the point of impact. And I think as well it's worth stating too that if we concentrate solely in relation to violent crime, then we're making it a criminal justice solution. We're the violence reduction unit not the violent crime reduction unit. Violence in a domestic violence field, we know very little about what goes on there. It's very little reported to us. Does that mean we do nothing about it? Of course it doesn't. Everyone has a role to play in that. We know that the number of serious incidents of violence that turn up at hospitals throughout the UK is about 50 percent of what's reported to us. So the idea of looking at reported crime and up or down if the detection rate's better, if it goes down, up or down 2 or 3 percent is largely irrelevant in the great scheme of things. So that's where we're coming from. It's taken some time but I think we're starting to get there now how we think about it.

Commissioner 1

John, I didn't realise it was you cause I'm hopeless on surnames, but nice to see you again.

CS John Carnochan

It is indeed yeah. Nice to see you.

Commissioner 1

How are you? Last time I did see you, you were making a speech that was an impassioned defence of youth services and youth work and early intervention community projects. And it was probably one of the most powerful speeches I've ever heard. Since we've been in Glasgow your name pops up everywhere, or the VRU pops up everywhere as being dynamic in pioneering and innovative. And youth work is one place, an educational kind

of response to some of these challenges. You're a police officer by background. There's a policing response that Geoffrey's kind of mentioned, but we've just been to the hospital this morning, A&E covey that you fund we understand, who are doing a lot of work around the idea that this is a public health challenge and I just wondered how you feel about that?

CS John Carnochan

Well it is a public health challenge. Fundamental, that's exactly what it is. The public health model requires that we understand the whole problem, so that's about increasing reported crime, that's about knowing and have a knowledge of it all and proper surveillance. And we're about to establish [endurance] surveillance across a whole health board starting next month.

And I would hope that within a couple of years we'll have that throughout Scotland, so we'll have a clear picture. It's about once you understand that what are the causal factors. Once you understand better what those are, you can think about protective factors; you can think about risk avoidance and anticipatory care; you can scale things up better. Immediately you think about public health, you have a whole new language, a whole new lexicon of words that make it much easier to explain the issues that we have. You also start to think about generational change and not this year compared to last year. You talk about fundamental changes and how we do things and I think that's the important thing about public health. It's about identifying the idea that, for instance we have offender services and victim services set up differently. Now that's absurd. When Karyn prepared the report that established the Violence Reduction Unit, it was starting off as a homicide reduction strategy. Now immediately Karyn identified that that assumed that every homicide was intentional and it's absurd. It's not. These young men don't go to school with an ambition to be murderers. They don't run about in gangs. In fact they don't actually stab with the intention of murdering. It's not something they think about. It's not a cognitive thought that they have. So public health

absolutely only way to go.

Commissioner 1

And my other question was really about this point about planned versus opportunistic violence. I mean I see in the paper where somewhere there's a list of the different kind of weaponry that might be used. Some are stuff that you might leave the house with. Some are stuff that you pick up on the way and some of the stuff is you pick up wherever something kicks off. And I just wondered what the balance is there because presumably the strategic response needs to be rather different?

CS John Carnochan

Well it does, responses require to be different if we start to go back into the [silencers] again.

Commissioner 1

Yeah, yeah. I'm conscious of that.

CS John Carnochan

We still need to have a robust policing. Yeah. We still need that robust policing response. And we need to be much more innovative in how we do that. That's absolutely fundamental. So when I speak about public health that's not to say that we won't get better at arresting people, at doing the things that we do and we're meant to do. But I think when we step back from that we need then to think and understand a bit better how we arrive there that day and perhaps what we could have done to make that different. And that's about, I mean violence I think has 2 elements to it. One is an individual's propensity to be violent. And the second one are the societal factors that allow that to happen. Now the societal factors might be within that ecological model, might be individual or might be parenting for instance is

a real issue. But it might also be alcohol. It might also be CCTV are placed in the streets. So it's understanding I think both of those and where we legitimately as police officers have a role to play and actively delivering it. And where as police officers we have a role to play in actively asking others to deliver what they're meant to deliver.

Commissioner

It gives us a question about alcohol and that might draw in Karyn as well in what you see, but first of all, Gus please.

Prof. Gus John

Yes, before I come on to the... and thank you both, but before I come on to the question of alcohol, I want to return to Howard's point about violence as a public health issue. I can't understand why there is not more of a focus on domestic violence and gathering reliable information on that, particularly given all we've heard about the extent to which some young people are socialised into violence because of the culture of violence in the home. What is your explanation for the lack of attention and indeed strategies for dealing with domestic violence?

CS John Carnochan

Well I'll accept your premise first of all to answer it and then I'll come back to why perhaps I don't fully accept the premise. But it's absolutely true that the first, the most important 4 years of a child's life are up to age 3. So antenatal care it's all very important. I think we have got lots of strategies in place in relation to domestic violence and domestic abuse. We have a specialist court. We have, in every division, we have family protection that's involved. We have much better information exchange in partnership working with social work colleagues and all that's getting better. It's not exactly 100 percent and a gold standard, but it's getting much better. I think too that an observation

that we'd make is no matter how many policies we have to do with that, it requires the victim to say I've had enough. And that's very difficult to strategise about. That's about community wellbeing and confidence. That's a much broader question because once an individual says I've had enough I think we have got relatively good policies that kick into place and strategies that deal with that. And I think the reason that perhaps it's taken us a little bit of time to get there is we're only now thinking in the past couple of years about public health. We're only now starting to think about that anticipatory care and thinking much more about that fundamental primary prevention notion that we didn't have before. We would just give people the jail. And also I think in general there are still some stigmas around domestic violence and a whole range of things around that. It's still for instance if you've got a Scottish government it's placed in the equalities unit. Now I'm not sure why it's an equalities unit.

Prof. Gus John

Right.

CS John Carnochan

Does it mean if an equal number of men are victims than that's it, ok? So I think we need to think now and move domestic abuse forward and move it much higher up the agenda. And it's certainly moved in Strathclyde with the arrival of our new chief constable.

Prof. Gus John

And given how central alcohol is to all of this and certainly from the work that Karyn has done is very clear that it's not just about alcohol abuse, but alcohol use on the part particularly of young people. And certain beverages have a lot to answer for in this regard Buckast, or maybe. What can be done about alcohol?

CS John Carnochan

Well there are rooms full of research about what we should be doing about alcohol. Make it more expensive, make it less available. But that's what we do, we make knives and guns less available because they play a part in violence and we restrict who can have access to them. We need to think about how we do that with alcohol. But first of all we need to identify that alcohol in Scotland, in fact alcohol in the UK is a whole population issue. It's not a young person's issue. It's a whole population issue. So there's no point in adults saying you shouldn't do that, but we're doing that. And that's where we learn how to do it. And I think you're right too in relation to some of the violence that we see throughout Scotland, it's not drunk binge drinking use. It's young men who take low acute doses of alcohol and it disinhibits them and they take risks that they otherwise wouldn't take. And they are and I'm not going to name anyone because they're very litigious that was very brave of you. But they're high in sugar and they're high in alcohol and they're very cheap and very available. You get them in fridges so they're nice and chilled and that's absurd, that's absurd. So that's what we need to do about that. It's to stand up and say we're Scotland, we have a problem.

Commissioner

Did you want to come in on this?

Karen McCluskey

Yeah, I would just say the alcohol policy at the moment when we're talking about prevention, what we say to people is if you drink more than 21 units a week, you're going to get liver cirrhosis that's long term, that's 40 or 50. So when you're 18 actually that makes no difference to you whatsoever. So people don't, are not really caring about how many units they're drinking a week. And I mean that's some of the work that you saw in the dental school

probably yesterday, is the fact that it's not until people are actually injured that they start to think you know that sort of behaviour isn't actually doing that much good. So we're trying to capitalise on things like teachable moments when people are injured, when they're arrested, when they're convicted. That's when they're actually motivated to change.

Commissioner

So can you just describe some of the other factors that lie behind the sort of violence culture then? You know we've mentioned drink, but what about the...?

CS John Carnochan

Well look when we started to look at this, we found that because we didn't start off with a public health notion. We started off trying to look at this in a fresh way and to try and engage partners we identified a shared agenda. And what we found very, very quickly is when we drew a graph that involved where the victims of violence lived and where the offenders lived and where the incidents happened, the graph along one axis had areas of deprivation. And areas of higher the deprivation the more violence there is. Now if you look at health and health outcomes it's the same shape of graph. If you want educational outcomes, turn it round the other way because it goes in the opposite direction. So we've immediately got a shared agenda. And what's happened over the decades is not that we haven't understood that, but what we've done up until now has not made a significant difference to it. It's kept going. You know I think we've perhaps descaled communities over the years. You know in parachuting in and telling people we're going to solve their issues for them and not listening to what people say. I mean if you listen to young people today, they will say that they want things to do that's what they said 30 years ago, 25 years ago, 5 years ago. And if we don't do something about it that's what they'll be saying next year as well. So for us I think it's not

about not knowing what works. It's our ability to coordinate and deliver what works is the challenge because we know what works. Give young people something else to do and in relation to the areas of high deprivation, these young guys are perhaps born into a household that while mum's pregnant, she's victim of abuse. And that can happen anywhere not just in areas of high deprivation. But a victim of abuse we now know the effect or the negative effect that has on the development of the baby in the womb. The same effect, negative effect that foetal alcohol syndrome does, that smoking does, that drugs do. So why are we not recognising that? Why is it when we recognise a good quality early years education for everyone will make a big difference. And yet we spend money opening new universities and close nurseries. Why is that when that research is there? So I think we need to be starting to make strides towards what we want. And I do feel that in Scotland we are now. I mean it's a public health problem in Scotland and it's accepted as that. The Government buy into that. The chief medical officer in his report this year had a section on violence that can root. That's the first time ever we've had that. It's a recognition. Now it's not going to happen, switch the light on and it's going to be there because we have to work with the services we have and start to shape what we need. And if you were starting with a blank sheet of paper today to solve the problems we have, I don't think you would design the services the way we have. So there's a lot of energy needs around that.

Commissioner

Can I move the focus on to Karyn McCluskey and talk to you about the harder end, the sharper end some people say of policing. Accepting the value and I'm not in any sense turning my back on the value of what's been said so far, but looking at the more traditional role of policing, the old role, which was about control and managing the streets and making the place safer at that end. Could I ask you in that context what your experience is with taking those

who are already within the criminal justice system and making them subject to asbos as it would be in England, or curfews I think you use here, controlled orders, that regime of regulatory control post court. Does your intelligence analytical process engage that as well? And does that lead to some sort of improvement in the situation?

Karen McCluskey

Of course it does. I mean any short term, you know measures that the police put in place will have a short term result. If you look at Operation Blunt, which was a huge operation in 1992, any departments when they were measuring the amount of people that were coming through their doors as a result of violent crime said, for 9 months the crime went right down. They weren't getting as many people through their doors. It stopped because the amount of policing resources that were put into it were just, you know were overwhelming and the violence crime went right back up. So short term measures are absolutely fantastic and we need to do them. And I think they police do them very well. There's always scope for us to get better. It does have an effect. Curfews have an effect, bail checks have an effect. A whole range of things have an effect. It's the longer term stuff that we need to get much better at.

Commissioner

Can I ask you to what extent you follow it up? My experience is that all of these ideas are a great idea and they should work and they should work admirably. My experience tell me that they only work if you supervise. So somebody with some sort of control order and forgetting the particularity of the work. Something that the controller says you must be in by a certain time, you mustn't go to a certain place, you must stay away from certain people, only works if you supervise it and make sure that you observe and make sure that is being adhered to. And where it doesn't work and in many parts of

England it does not work because there's no supervision. I wondered whether you had a more rigorous supervisory regime either from police or some other agency, which ensures that they are checked up on regularly and the curfew does work. Could you help us on that?

Karen McCluskey

I think Glasgow's been quite pioneering as far as this is concerned. You know they check bail conditions, curfew conditions, you know they go and visit, you know they do it intermittently, so it's not all at the same time. You know and people actually are adhering to it and we can see a change in their behaviour. They're not going out, they're adhering to their conditions and I think that's probably been one of the strongest things that Strathclyde police has probably put in place. So yes we do do that I mean that's our, you know that's, I think that's common sense. That's common sense policing. There's no point in having them otherwise.

Commissioner

Exactly.

Commissioner 3

One common feature to this issue of street weapons that we have in Scotland as in England and indeed in Wales is the sense, or rather lack of sensitivity that young people have about the kind of damage knives could do. You have discussions with young people and they tell you that they see nothing wrong with stabbing somebody. They don't expect the same kind of result as using a gun for example. What do you think can be done to sensitise young people more to the disastrous consequences of carrying knives? I mean I know your unit addresses this issue, but I'm thinking now of the various television campaigns we've had over time about the evils of drink driving and so on. Are you contemplating or are there any measures of that sort that's targeted

principally at sensitising young people to the dangers of using knives?

CS John Carnochan

Yeah, I mean that's a big, big question. I mean what we're really talking about is normative behaviour. And what we find is that, I mean I use the, there was a young lad not far from here was tragically murdered, hit in the head with an air gun. And he was going to the shop with his older brother. He'd been pushed in a go chair, he was only 3 years of age and there was a man with an air weapon shooting at firemen who were at the scene nearby. It was teatime. And he shot the young boy in the head and the young boy died. And there was a woman interviewed on television that night and asked about this and what she felt about it and a local woman. She said 'it's dreadful that wee boy get in the way'. Because everything else about that scenario seemed to be ok. So if we want to change that normative behaviour, we need to define what the normative behaviour is. We need to help and listen to people in communities that say you know it's not enough. And no matter how much we impose it and I think if you scale up the analogy I use for domestic abuse, communities as well. And communities do often stand up and very bravely say we've had enough of this; we want this to finish. We need to be much more responsive to that and cease those opportunities to do that. But in terms of how we change individuals, I think we need to do all of these things all at the same time. You know it's as simple as that. I mean I often think, in Glasgow for instance I believe that 75 percent of the young people in Glasgow are absolutely fine; live good lives and be everything they can be. We've got 5 percent who are troubled and troublesome and they're at that hard age and identified quite readily by more services. And then what we have then is that 25 percent that are just, 20 percent that are just there that are on the cusp. Now we need to provide services for all of those groups. And not only all of those groups and all of the individuals in the groups, but at the right time in their life to do it. It's the teachable moment that Karyn spoke

about. We need to be flexible with our resources to pick up on these teachable moments. But a teachable moment might be a 4 year old that you identify. It might be a pregnant mum that you identify. If you are a young couple, both professionals and earning £40,000 each, driving BMWs, living in nice houses, a nice area and a wide social network, wide family network and you decide to have a baby; it will be difficult bringing that baby up. If you start to take away some of those protective factors and say well you don't earn £40,000 a year, you don't live in a nice area, you don't have a car, you don't have a wide social network. You live on your own. You live in a flat and below the flat is a drug dealer and on the other side of the flat's a really angry guy who batters his wife. Now bring up your child.

Commissioner

And John we...

Prof. Howard Williamson

We know those, Mark and I are laughing because we've only heard teachable moment this morning and we were joking about it outside that every time we heard it mentioned we would not be able to avoid a smile.

Commissioner

This was at the...

Commissioner

..which you fund.

Prof. Howard Williamson

But we completely understand the thinking behind that, very important. And the 5 percent, 25 percent sort of model is also very interesting. My question as someone with a background in youth work and youth work broadly defined,

is the problem is we haven't got people who seem to be reaching that 5 percent. They're pretty damn good at reaching the 25 percent, but targets and you know performance measures and time and patience and lots of things like that seem to militate against them getting stuck in at the sharp end with some of those really challenging young people, giving them time, patience, understand, tough love, better discipline, boundaries, those sorts of things. The old fashioned if you can call it that youth work, used to have the time to do and I just wondered whether you, it's easy to talk about everything wraps together and you need to do it all for those young people. But you actually also need to have conditions that enable you to do the right kind of thing for those kids. And sometimes the media doesn't like us to do the right thing for those kids cause they don't think we should give them any treats you know. But nevertheless if we're going to turn their lives around they need time and patience. And those are you know lacking in the broad political framework that we live in at the moment. Would you agree with that?

CS John Carnochan

Well I do to an extent, but I do think as well it's, I think lots of our services over the decades have almost become ends in themselves. They become, you know there's a whole industry around us and partnerships the classic. We're always talking about partnership working as if it's some universal good. The truth of the matter is if the police want to do something on their own and they do it, it works a treat. If social work want to do something on their own and it works a treat. It becomes a challenge when we have to do it together. So if we think about that what happens then is we say well I'll work with you because if you and I do a partnership together it will make our jobs easier. Or you and I will work in partnership and we'll get a bigger slice of the funding. And the truth of the matter is we've forgotten about the outcome. We've forgotten about the service we're delivering often. And there's lots of really good professionals working away every day, but sometimes I think we

need to get through that permafrost and remind ourselves there's a service here. This is about outcome that we need to be doing. And I think in Strathclyde in police terms that's what we're trying to do. It's about activity and understanding what we are meant to do. I mean our chief constable, our new chief constable Steve House at great expression he said 'I don't mind police officers organising football matches for young people. I don't mind them being there to make sure everything goes ok, but I don't want them refereeing them and I don't want them playing because that's not your job to be doing that. That's somebody else's job to be doing that'. And we've ended up doing it because well we're there and we see it needs to be done and we've just got to do it and that's happened lots of times.

Prof. Gus John

I just want to add a rider to Howard's question. I mean according to the briefing that we've had, I think it's, from Karyn's department it suggests that there's some £621 million spent annually on police and seek criminal justice issues around violence and the cost of violence. And similarly almost 600 million cost to the health service. Given those dark figures and all the other stuff about the number of murders and so on and so forth that we've got, what measures are there from Scottish Government, Glasgow City Council, whatever to front load activities of the sort that Howard is talking about, so that there is a major investment in the sort of preventive stuff that may be done with prolific offenders or whatever?

CS John Carnochan

Well I think first of all that what we're talking about is core business for local authorities. We're not talking about luxuries. This is core business. How you look after your citizens is core business whether the citizen is 12, 8 or 17. And so you should be doing that. So I think the money's already there. I think we need to spend it smarter before we start looking for more money

because what's happened and I think that's one of the reasons where you know at this stage, certainly and I can't comment for England and Wales where we're always, if we're asking somebody to do something, where's the money, where's the money? The money's already paid out. The money's already there. The budgets for Glasgow and Kilmarnock and Dumfries, big budgets take account of that. So I think what the Government can do and I think what they've started to do here and what the previous Government started to do, we now have an early years minister for instance and we have a health and equalities task force that has 5 ministers on it including the justice minister, community safety minister, education minister, enterprise minister. We presented to and submitted evident to it, so that we're now starting at that end, Government to do what Government should be doing, which isn't micromanage what's happening in communities throughout Scotland or England, but actually to set a direction in the policy and give people the confidence to say this is going... And politicians have said in Scotland, this will take at least 10 years and probably generations. They wouldn't have said that 5 years ago. They're saying it now because everybody else knows that's what's true. So I don't think they should be micromanaging. They should be supporting people in certain direction. And I think that's where we're heading with it.

Commissioner

In our brief you've given us a portrait of a typical Glasgow youth murder. I wonder if you could talk to us a little bit about that and describe it?

CS John Carnochan

Well we did that when we started to speak our uncomfortable truths about 3 or 4 years ago. And we said that at that time it was oh it will be a kitchen knife for instance and it will be a particular group. And the truth of the matter, it is not. It will be a young man, he'll be between 12 and 18. He'll have a low

acute dose of alcohol. He'll not be any more than half a kilometre from his own home. He'll have a lock in knife that he took out the house before he left. And it will be a stand up fight and who wins and who loses, who gets buried and whose parents visit the grave and whose parents visit the prison. It's completely random. And that's why we need to think of offender services and victim services as being the same. You know if we and it's back to the criminal justice. What we've done up until now is waited until criminal justice gets involved as a trigger for intervention. It's too late when we get the fall. They've already fallen off the cliff you know. And indications would have been there much earlier. I mean kind of the classic where we had a dreadful month of a man and there was a woman and her son who was 16 and a teacher said, a primary school teacher said, 'I knew he would be a daily rated headline'. You go and speak to lots of teachers and I bet they could tell you the same thing. And what they mean is that young guy's at risk. And that's how we need to think of that. We need to get ourselves out of the notion of interference and intervention and think if that young boy was at risk of some genetic disease, you would quite happily inoculate him. You would quite happily you know do something in relation to health. Well the evidence is as profound that says that societal and family issues around that young person and his behaviour and how he develops are as profound. And we need to start and be brave enough to do that. You know heard the stigma argument for instance. You think these young guys aren't already stigmatised. Their aspiration doesn't go beyond 3 streets. It's absurd and it's a reason for doing nothing and we need to be brave and get by that I think.

Commissioner

Mr Carnochan we could carry on talking to you all day and to Karyn McCluskey, but before you go, I don't want to stop this but I have to stop this because the camera's run out of steam. They're stoking them up with shovels as we speak. Is there anything that you particularly wanted to get out that we

haven't given you the chance to? Standing outside before you came in, I do hope I get the opportunity to make that one point. I put it to both of you, a point each. Is there anything you badly wanted to get out on record and you haven't had a chance so far?

Karen McCluskey

I would say this is an issue about young man. This is a colour blind issue. I mean we see the London press and you know we hear about young black men. This is about young men. And we have young men now who have grown up without fathers. You know there are no visible male role models in their society. So they're failing education at school. They're failing socially. There's not a place for them in the family. They're creating their own social constructs now within Glasgow and Scotland about what it is to be a man. And we lack mental, we lack a whole range of skills. We lack males to stand up and be counted.

Commissioner

It goes right back in to the family doesn't it?

Karen McCluskey

Absolutely. But you know...

Commissioner

Cause if the role model's in the family, correct me for what I believe, and I put it as a question to you, if the role model is there in the family, likely you'll be ok? If the role model isn't, likely it may go wrong. It's not an absolute.

Karen McCluskey

I don't think it needs to be within the family. It can be a janitor, it can be a teacher, it can be somebody in sports, it can be a whole range of people. We

visited a violent offenders' programme and a young man that had gone through a very in depth 6 month programme. And one of the young men stood to one of the prison officers, 'you've been like a father to me'. He'd never had a father. He didn't realise what it was to be a good male role model. So what he thinks is to get through life you've got to fight, you've got to drink, you've got to take drugs, all that risky behaviour and no empathy.

Commissioner

...trust in adult is a good way of putting it.

Karen McCluskey

Absolutely.

Commissioner

It's a trust term actually.

CS John Carnochan

Yeah I mean I think if we view, you know connecting that early years thing, I mean it's absolutely fundamental that what we acquire early years in those skills, those communication skills particularly of empathy, to understand how we get on with each other. I mean after all that's what human rights are. Human rights are about how you get on with a stranger in the street and your neighbour and that's we've now legislated for that for goodness sake is it. We shouldn't need to do that. Communities had that empathy there. And for me it's about those skills are the skills that allow you to make good decisions about yourself. About make good decisions about what you eat, about exercise, about alcohol intake, about drugs, about violence, about behaviour. So young people who get and who don't have those skills, get themselves involved with drugs, get themselves involved in gangs. If you're a young woman, may get yourself pregnant to early because you haven't made

good decisions about that. So it's the same risk. It's the same sort of non cognitive issues that are around that. And so that's the shared agenda, that's the shared client group, which is a dreadful expression, but that's the same. So why are we not coordinating better? It's just about that. It's absolutely about coordination.

Commissioner

Gus has got... He's going to have the last word.

Prof. Gus John

I just wanted to comment on what Karyn said. When I accept much of that we know that the major part of the problem is not only the absence of role models, but the absence of appropriate role models because you could be in a home with a father and if you're enduring the level of violence that you see him meeting out against the woman, whether it's your mother or not. It triggers all kinds of things for you as well. So I think we have to be careful not to place so much emphasis on the absence of a male figure as distinct from the quality of what the male figure in the house gives to the younger.

Karen McCluskey

Good is the word that I probably missed out from that. It has to be a good male role model.

Commissioner

It's like parenting. It's not about good or bad parenting. It's just about being as good as you can be.

Commissioner

Thank you very much indeed. I said it when you came in and I say it again now, the reputation of both of you in your own separate ways and in your joint

way as well, it is quite profound here in Strathclyde. It has been very obvious to us in the briefs and where we've been this morning. Thank you for what you've told us today. Thank you very much for what you're doing and if you carry back a word of thanks to all those that you operate with, I'd be very grateful.

CS John Carnochan

Thanks for the opportunity.

Commissioner

Thank you.

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