

Working at the cutting edge

Kevin Browne (University of Nottingham) talks to Lance Workman about his international work on institutional childcare practices

Your current position is Professor of Forensic Psychology and Child Health at the University of Nottingham, but you didn't start out in that field. Can you take me through the sequence of events that led you into forensic psychology?

My PhD was on the ethology of aggression, using direct observational approaches like sequential analysis of behaviour and cluster analysis to investigate the biological function of aggression in animals. Child psychologists started to get interested in these ethological techniques to look at parent/offspring interactions. So a number of us started to shift from ethology and behavioural biology to child psychology, applying these techniques to parent/child interactions and child behaviour in the 1980s.

My first introduction to forensic psychology was when I was awarded a Medical Research Council fellowship in 1983, to look at interaction in aggressive and non-aggressive families with a view to detecting families at risk of child maltreatment. The project was carried out at the University of Surrey, which was my first post-doc position.

Interestingly the funders insisted we go in blind to the aggression status of the family (high risk or low risk). I managed to avoid any untoward experiences except one where a live-in boyfriend set the Alsatian on me. I managed to get the laptop into the dog's mouth as it bit. I still have the laptop but it's got tooth marks where the dog broke its teeth and ran off! This experience enhanced my sense of respect for the difficult work of social workers and health visitors.

I can see why! Where did your interests take you next?

In the mid-1980s the existence of sexual abuse in the family began to emerge. In 1985 I secured a position as lecturer in health psychology at the University of

Leicester Medical School, which was very progressive in terms of medical education, as it allowed me to introduce the concept of child abuse and neglect into the pre-clinical and clinical curricula. At that point I worked quite closely with paediatricians and epidemiologists on the development of screening tools for parents considered a high risk for child maltreatment. After a couple of years training in psychodynamic counselling and teaching communication skills to clinical students, I joined Clive Hollin and Kevin Howells in the School of Psychology at the University of Birmingham as a senior lecturer in clinical criminology and developed one of the first master's programmes in criminological psychology.

During this time I worked part-time at Glenthorne youth treatment centre in Birmingham, looking at the consequences of childhood histories of abuse and

neglect. We found that four out of five young offenders had a history of child abuse and neglect before the age of five.

Also 80 per cent of them had had eight or more care placements before they arrived in Glenthorne with an average age of 14 years. Indeed, 55 per cent of them had been assaulted by more than one person in their lives. We began to see a pattern from victim to offender. Interestingly, we found that those who had at least one parent that wasn't abusive could break the cycle... those who had two parents that were abusive were the ones that went on to perpetuate the cycle of violence. They had no one to turn to.

"anyone who has shown the child love can make a big difference"

You're saying that if they have one person they are strongly attached to then they can break the cycle. So are you saying that people like Bowlby got it right?

Bowlby initially thought the biological

mother was of paramount importance – but he changed his mind after Rutter's work showed that any sensitive carer could promote the optimal development of the child. So the emphasis that I would place is that anyone who has shown the child love can make a big difference. You have to have been loved to show love to others. Those children who have shared an experience of a secure emotional attachment, whether it be to an aunt, an uncle or a grandparent, as long as it was unconditional love, then that seems to help break the cycle. Children that don't experience this are quite vulnerable and often meet the wrong person that offers conditional love that may lead to an inappropriate sexual relationship. This confuses the child. So often when we work with children that have been abused they still may have confused feelings about the offender due to receiving affection at a cost. In one sense they split the good person and the bad person in the offender. According to Melanie Klein, this is quite effective as a psychological defence mechanism and for their own psychological stability.

Presumably this is an international issue?

Yes. I worked worldwide in the 1990s for the International Society for the Prevention of Child Abuse and Neglect. This led to an invite from the World Health Organization [WHO] to spend a sabbatical with them in 1999 and then half-time employment as a child care and protection expert.

We began to become interested in countries in transition and how they responded to children that had been abandoned, neglected or abused, which usually meant 24-hour residential care without a parent in a large institutional setting. I began to work very closely with the WHO looking at what harm these institutions were doing to children, and established the first WHO collaborating centre on child care and protection at the University of Birmingham. As Director of the centre I kick-started – together with Catherine Hamilton-Giachritsis – 10 years of EU funding to support programmes to identify good practices in the de-institutionalisation of children across Europe.

These institutional childcare practices must vary considerably between countries?

In 2005 we produced a book and a number of journal articles that described institutional care of young children less than three years old across Europe, and we investigated eight countries in detail

and surveyed the rest. This began to raise awareness about the issue, and we identified a myth that all of these problems of young children placed in institutional care were limited to Eastern Europe – when in fact Belgium, France and Spain have significant numbers of children in care.

What about the UK then? How does childcare work in this country, and should we feel good about our systems?

For under-threes the UK as a whole has less than 0.1 per 10,000 in institutional care. The UK has a very sophisticated social work network and foster care system – although underresourced. The Children Acts 1989 and 2004 are an excellent piece of legislation, one that has been copied by many countries. It protects children and gives a structure to the childcare services, which means that very rarely will a child under seven be anywhere other than in a family home, with relatives or in a foster home with surrogate parents in a one-to-one relationship. After seven years, children may live in small homes, but we wouldn't call them institutions – they are usually homes with fewer than 10 children in them.

So our small children's homes are quite different to the sort of institutions we have seen in Europe. However, after about the age of 12 things start to go wrong in the UK. We have a punitive system to deal with young offenders. Unfortunately young offender institutions are beginning to be privatised and are less concerned with therapy than they are with managing the behaviour of these young people in need and in conflict with the law. And we have more young people living in young offender establishments than elsewhere in Europe.

I'd be interested to hear what you think about celebrities adopting children from less developed countries – I'm thinking about people like Madonna and Angelina Jolie.

While working with David Canter and Lawrence Alison at the University of Liverpool between 2007 and 2009, Shihning Chou and I investigated international adoption practices. We have shown statistically that international adoption does *not* reduce the number of children living in institutions. In fact it creates a market and promotes institutional care. Article 21B of the UN Convention on the Rights of the Child

clearly states that there is nothing wrong with international adoption providing it is in the best interest of the child. However, international adoption is all about finding the right child for the parents with little concern for child rights. Only domestic adoption promotes the concept of offering the right parents for the child. That's why international adoption on the internet is wrong – for the child at least. With international adoption, the child is a commodity to be bought and sold in a large worldwide market. When I first began working in Romania in 2002, approximately two in every 1000 Romanian children were being internationally adopted at an average cost to the adoptive parents of £2500. These practices were stopped in 2004 with the introduction of new adoption laws in Romania, but the uncontrolled market just shifted to Bulgaria, Moldova and Ukraine. We have evidence of charities

standards. I spent two and half years (2003 to 2006) advising the Romanian Prime Minister on childcare issues, which was relatively successful. We managed to deinstitutionalise 4000 Romanian children and introduce 400 healthcare workers to visit family homes and help stop children being abandoned. This has led to my latest EU-funded study at the University of Nottingham, which has been mapping the extent of child abandonment and infanticide and looking at preventative measures, together with Shihning Chou and Kate Whitfield.

A lot of people would find the things you have seen and dealt with quite disturbing. I have to ask you, as you have children yourself, does what you have experienced ever get to you?

Yes, very much so. What is interesting is that I worked with abused neglected children for many years before I was a father. Now I have three boys 14, 11 and 7, it does change things. You can always look at things objectively as a psychologist – and that's a defence mechanism. But the ability to intellectually defend yourself against what you see erodes away once you become a father. Especially when I came across a toddler in the Czech Republic that was the spitting image of one of my own boys, that was very disturbing. Of course, what you want to do is exactly what Madonna did, and pick the child up and take it home. But you can't do that with 4000 children. It is a very emotive response and you do need some level of support when you get home.

But what balances those emotions out is the successes. When Save the Children and UNICEF presented my evidence to the UN General Assembly, 192 member states passed guidelines that no child under three should be placed in institutional care. So now UNICEF has the responsibility of making it happen as one of their priorities when working with governments to implement the UN resolution. This is big step forward and I am still involved as a UNICEF consultant.

You say you are able to influence various governments with these UN resolutions. How did you get on with the authorities in these countries – were they positive about your work? We made lots of friends in some countries



Professor Kevin Browne delivering a workshop on deinstitutionalising and transforming children's services in the Ukraine

in Bulgaria, Romania, Moldova and the Ukraine advising mothers to abandon their children so that they could put them up for international adoption.

You have had a lot of success with your work in helping to improve children's lives – particularly in Romania. As a psychologist, how did you manage to have that sort of influence in an Eastern European country?

As a WHO and UNICEF consultant I had the privilege of working in Romania with Baroness Emma Nicholson (as the EU rapporteur) and J.K. Rowling (as a sponsor of charity work). I was recommended to the Prime Minister of Romania to chair the High Level Group for Romanian Children, the task being to help close institutions for young children in the country and help to bring childcare and child welfare services up to EU

interview

and enemies in others. I'm not very welcome in the Czech Republic, but very welcome in Romania.

Clearly you have achieved a lot in your work in real terms. If you could make one change to help children what would that be?

That's a tough question. Well I recently gave evidence to Lord Mackenzie for the Child Poverty Bill – I outlined a number of things that I thought were important for children. In most countries there has been a shift away from social and community principles towards financial entrepreneurship and capitalism in child care. I have no doubt that children and families have suffered because of this. For example, there are now a lot more single-parent families because of economic migration for work. So I would like to see the pendulum swing back to re-establish the principle of the child's right to grow up in a family, and health, education and social services, free at the point of access, to ensure that all children reach their optimal development and have their rights upheld as outlined by the 1989 UN Convention on the Rights of the Child,



Professor Kevin Browne meeting with representatives of Our Kids Foundation and the Kiev Local Government

which includes the right to free education and health care and help offered to parents in difficulty.

When you look back on your career, with the sort of work you do, there must have been both highs and lows for you.

Well, I've worked in over 50 countries worldwide and I have had varied experiences of trying to change things for

children in such faraway places as Columbia, Ecuador, Thailand, and with mixed success. For example, when helping a charity rescue child prostitutes from tea parlours in Bangkok only to have them sent back by the same gang one month later.

When I look back on my career the thing I find especially important to me personally is that the UN Secretary General asked me to be a lead author on his *World Report on Violence against*

Children, published in 2006. This allowed me to identify problems with institutional care, and we were able to disseminate best practices to de-institutionalise children and promote foster care for the optimal development of children without parents. There is no way I designed my career pathway, a lot has been the result of chance. But as a psychologist, I've had opportunities that I never thought I'd have.



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