

FRIENDS OF THE SCOTSMAN /

We must recognise that people can change – not just lock them up in jail

Most of us would consider prevention and rehabilitation as fundamental to creating safer communities in Scotland and tackling the harm caused by crime.

Some would strongly advocate locking people up as the tough option. But the evidence shows that community sentences are more effective at reducing reoffending than short prison sentences. It's not an easy debate. So how do we invest in what works and helps people move beyond their past?

Taking a compassionate approach comes first. It means believing people can change and can come back from their mistakes. Someone's past – where they grew up, their family background or previous negative and damaging experiences – does not have to define them. Diverting more young people away from the justice system does create safer communities. It does break the cycle of offending and reduce the social harm and financial costs for individuals, families and communities.

Often it is poverty, inequality and adverse childhood experiences and the trauma resulting from domestic abuse, addiction to drugs and alcohol that underpins offending behaviour.

Let's be clear, growing up in poverty or in care in childhood doesn't equate to a troubled future but nor is it what we would want for children and young people in Scotland.

Our ambition must be to prevent



Amelia Morgan reports on efforts to break the cycle of reoffending with meaningful support into employment

harm and to reduce the risk of offending, enabling people to be healthier, happier and transform their prospects.

Organisations and charities, such as Venture Trust, run specific development programmes aimed at supporting people to take charge of their own life, acquiring the necessary resilience and skills to take responsibility, be ready to sustain employment and nurture positive relationships built on trust and a positive sense of self.

Several of Venture Trust's programmes are aimed at young people experiencing challenging life circumstances. We work collaboratively with partners to give individuals new skills, boost their confidence, motivation and aspirations, and look to move towards education, employment, volunteering and training. Our Inspiring Young Futures programme has enabled hundreds of young people to get their lives back on track and away from the potential involvement in the criminal justice system.

The Scottish Government's Justice Vision and Priorities and the

subsequent proposal to end jail terms of less than 12 months will set challenges to address reoffending in communities. There are currently about 20,000 individuals subject to social work orders each year in Scotland (95 per cent subject to community payback orders). More than three-quarters (76 per cent) of total social work orders commencing in 2015-16 included an element of unpaid work or other activity, and in the region of 40 per cent are not completed as planned.

These challenges require us to be bolder, to be confident that we can deliver collaborative and effective community-based interventions, which all the evidence suggests are a better option for the majority of individuals in the criminal justice system.

At Venture Trust, we would argue that we need to place far greater emphasis on rehabilitation in addition to unpaid work as part of any community sentence to facilitate behaviour change and assist more individuals to reduce their risk of reoffending and complete their

↑ Efforts to give young people the skills to move into work, training or education

sentences. Independent evaluations show our programme specifically for women caught up in the criminal justice system has had positive impacts on individuals. They have gained new skills, improved their confidence and have started working or studying. They are more stable and less likely to reoffend. These positive changes are then transferred to their families and communities.

Former Next Steps participant

Laura (not her real name) said: "Before Venture Trust I was on a one-way ticket to prison. I'm now a fully qualified plumber. My life's changed for the better. I'm healthier, happier, thriving. I've got a career now, I can see a future."

Laura is not alone, with many other women having gone on to find work or enrol into college or training courses. For others, avoiding prison has meant keeping their

families together. To achieve greater gains, we need to be bold – to tackle systemic issues in our society with a long term goal of fewer of our children and young people growing up in poverty, or experiencing disadvantage and inequality.

For people already in the criminal justice system there has to be a recognition that it takes time for rehabilitation. They need to stabilise their life circumstances and rebuild

relationships, and it starts with a prerequisite of an individual wanting to change.

A short term approach to community justice offers little reassurance that interventions will be available to those in need. Investing for the long term in services which work is fundamental to build confidence for victims of crime, sentencers and the public, and will result in making communities safer.

For more information visit our website www.venturetrust.org.uk
Amelia Morgan, Venture Trust chief executive.

venturetrust



can help to keep them out of the criminal justice system, improve their confidence and give them a future

Ovarian transplants can give birth to ethical questions over meaning of fertility

Clair Mermoud looks at the interests of the mother – and the child

Artificial reproductive technology provides access to maternity for those unable to procreate. But, unfortunately, these techniques generally address the consequences and not the causes of infertility.

They provide an answer to the desire to become a mother while, sometimes, overlooking the desire of the person to first become a woman. The desire to match the biological and social image of a woman remains unsatisfied. In short, they are generally unable to ensure access to femininity. So why not try treating infertility instead of failed pregnancies?

This change seems to have been initiated by Dr Sherman Silber in the USA. In 2004, he performed the first

ovarian tissue transplant between two identical twin women, one of whom was infertile. It was a success on both sides: the donor remained fertile and, a few months later, the recipient regained a hormonal cycle and correct ovarian function. She was able to fully experience her femininity while attempting a more natural pregnancy. The surgery was, thus, a useful way of completely treating female infertility suggesting both the end of controversial remedies and the empowerment of women.

The subsequent successful ovarian transplantation between two non-twin sisters, performed in Belgium in 2007, seemed to continue to offer 'femininity' and not only pregnancy to the infertile women. Even if the gestational mother and her offspring

do not share similar DNA, a psychological and physical lasting bond would be established between them.

However, this also brings important ethical problems. Firstly, it must be remembered that British legislation, as in other European policies, remains concerned about biological kinship and still looks for a traditional family model. But establishing a permanent triangular relationship between two women and an unborn child by a graft may not correspond to this scheme.

It is possible to ask whether it would be right to restrict this relationship into a bilateral one (between only the gestational mother and the child), through the use of ovaries from deceased women? After all, the freezing of human tissue is

now a well established procedure. Removed post-mortem and frozen from a consenting donor during her lifetime, they could be transplanted later at the request of an infertile woman.

Such a process could reduce the waiting lists in procreation centres and bring commercialisation of human eggs to an end. However, could these concrete benefits erase controversies about giving biological tissues which engender life? Could they justify a graft done only for a social purpose? In response, it seems that such a transplant, performed on a living or deceased donor, may obscure the stakeholder interests.

Healthcare staff would have to relinquish the ethical principles of choosing the least intrusive treat-

ment for a woman while trying to significantly improve her quality of life.

But if egg donation is generally accepted, an implanted organ is not straightforward. Studies indicate the difficulty of acceptance for the recipient, blending guilt and loss of identity. The replacement of a part of one's body with a piece from someone else, may also bring morbid attitudes.

In addition, pregnancy often distorts the emotional balance of women. Would it be reasonable to burden the same person with all these risks? Those wishing to have a child would probably say yes, though the acceptance of the ovaries and the process of maternity would not take place simultaneously.

They could be unconcerned by the

legal criteria for access to artificial reproductive technology centres seeking to be liberated from further clinical interventions. Able to be pregnant whenever they want, they may develop a sense of increased freedom, assuming complete autonomy.

Chinese studies since 2010 demonstrate that ovarian tissue transplants from a younger to an older mouse prolong the life of the recipient. But even if this transplant could be the ultimate stage of emancipation, it only concerns women who can afford the financial burden of surgery.

Finally, ovarian transplantation may not respect the best interests of the child. After facing the dilemma of identifying a biological mother, he or she will probably be exposed to a feel-

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