

The Archbishop of Canterbury's speech in the House of Lords on Adult Social Care

Thursday 30th March 2023

My Lords, I am very grateful to the noble Baroness, Lady Andrews, for securing this important debate, for her Select Committee's outstanding report on adult social care and for including the recent report of the Archbishops' Commission on Reimagining Care in the debate title. I am also very grateful to my noble friend the right reverend Prelate the Bishop of Carlisle, who co-chaired the Commission. He will be addressing some of its specific recommendations later. I would like to speak about the motivation for its commissioning by the most reverend Prelate the Archbishop of York and myself.

First, in common with those of almost every political, religious or social belief, we think the current care system is broken. It cannot be tweaked; it needs reimagining. We have had the same reason for the Church reports on housing and, I regret to say, the same indifference to them from the Government, despite the enthusiasm of the industry in both cases.

Secondly, each of the reports we commissioned is based in Christian values which have guided this country at its best for centuries but overlap almost exactly with those of other faith groups and those of humanists. We were discussing this, over an Iftar meal on Monday evening, with Muslim leaders from across the country. Anything like housing, care, households, families, ethnicity or race has to have a value base which is realistic, mitigates possible harms and exalts the value of human dignity. The values must also maintain a healthy realism on the tendency of individuals and institutions, including government and the Church, to look for short-term fixes in their own interests, not long-term solutions for the common good. The list of reports and White Papers, so eloquently put by the noble Baroness, Lady Shephard, which really should have ended with "and a partridge in a pear tree", illustrates this point finely.

Thirdly, each report makes demands of government but also of every other aspect of society. In terms of care, it may be companies and businesses, charities, families and households, and we always point to the needs for the Church of England to improve and up its game. Every part of society is needed to be involved in care.

This Commission was started in April 2021 and produced its final report in January of this year. We need an understanding that care and support is not an end in itself but the means by which every person can begin to fulfil their potential as a human being as it varies through life. The Commission's central recommendation is for the development of a National Care Covenant. This would clarify the mutual responsibilities of us all—individuals, families and communities, alongside local and national government—in relation to care and support.

Funding matters. If it is our starting point, we will fail. Once we know what kind of care system we are aiming for, we can begin to see how it could progressively be paid for. Much as I admire His Majesty's Treasury, if we start with it, we will be pragmatic but are unlikely to be imaginative.

The revolutionary value that should be at the heart of our social care system is interdependence. In the report, it replaces the myth of autonomy for each person. No one is autonomous; we all rely on others at every point of life and death. We must recognise that reality, with its beauty and dignity. Interdependence builds community; autonomy creates atomisation. Atomisation is painfully described in a book with that name as the title in the English translation but which in French is called *Les Particules Élémentaires*, by Michel Houellebecq. Autonomy takes us to Huxley's *Brave New World*; interdependence overcomes differentials of class and power and offers

the prospect of robust compassion. Autonomy ends up with dependence on the state, because we all need support. It is a myth, and the truth is found in the prayerbook phrase “whose service is perfect freedom”.

Interdependence takes us away from a narrow argument about who should provide care and instead says that responsibility lies with all of us to different degrees: with families and communities; with government, with regard to funding and implementation; and with NGOs, the voluntary sector and community actors such as churches, with regard to participation.

So I ask the Government and the Minister: will they begin, as we move forward, to reimagine the care system and to look at setting out clearly through a National Care Covenant the mutual responsibilities we all have?