## LEGISLATIVE ASSEMBLY LEGAL AND SOCIAL ISSUES COMMITTEE

## Inquiry into Responses to Historical Forced Adoptions in Victoria

Melbourne—Wednesday, 24 February 2021

## **MEMBERS**

Ms Natalie Suleyman—Chair Ms Michaela Settle
Mr James Newbury—Deputy ChairMr David Southwick
Ms Christine Couzens Mr Meng Heang Tak
Ms Emma Kealy

Name withheld.

**The CHAIR**: Good morning. Thank you for being here. I acknowledge the traditional owners of the land on which we are meeting. I pay my respects to their elders past and present and the Aboriginal elders of other communities who may be here today.

I declare open the public hearings for the Legal and Social Issues Committee's Inquiry into Responses to Historical Forced Adoptions in Victoria. At this point all mobile phones should be turned to silent. I welcome [name withheld], who is here to provide evidence today. I also would like to introduce the committee members. To my right is James Newbury, MP, the Member for Brighton, and to my left is Christine Couzens, MP, the Member for Geelong, and also Meng Heang Tak, MP, the Member for Clarinda.

All evidence taken by this committee is protected by parliamentary privilege. Therefore you are protected against any action for what you say here today, but if you go outside and repeat the same things, including on social media, these comments may not be protected by this privilege. All evidence given today is being recorded by Hansard. You will be provided with a proof version of transcript for you to check as soon as it is available. Any verified transcripts, PowerPoint presentations or handouts will be placed on the Committee's website as soon as they are available, unless they are deemed confidential and this has been requested.

Also please be aware that Holly Donoghue is here today from Carfi, an external provider of psychological support. She is available to talk to you if you would like. Whether it is during the hearing, outside or during the break, just be aware that Carfi is here to assist and support you.

The Committee is interested in hearing about your experience of forced adoption and in particular the services you have accessed and what outcomes you would like from this inquiry. I now invite you to proceed with a brief opening statement to the Committee, which will be followed by questions from members. Thank you.

**NAME WITHHELD**: Thank you. Cool. I would also like to start by acknowledging the traditional owners of the lands on which we meet and to pay my respects to elders past and present. I would also like to pay my respects to the children and young people, the emerging leaders of the future, and acknowledge that our First Nations people have raised their children and young people safe and strong for over 60 000 years.

Thank you for offering me the opportunity to speak with you all today. There is a part of me that feels like I should not be here—sorry—

Mr NEWBURY: That is okay. It is all right.

**The CHAIR**: That is okay.

**NAME WITHHELD**: that this is not my story. I can sit here next to my mum; it is fine.

**The CHAIR**: That is fine. Take your time.

**NAME WITHHELD**: But then every time I see and speak with my mum, I am reminded of the impact of forced adoption experiences on her and how that has and continues to reverberate onto those she loves, including me, and it is from that perspective that I only can and will address you today.

My decision to make the submission to this inquiry was motivated by the 15 years accompanying my mother as she found the courage to find her voice. I sat with her as she wrote to Anglicare to finally begin the search for her daughter. I held her anxiety and suicidality as grief and pain overwhelmed her. I counselled her as she trawled through numerous doctors, naturopaths, acupuncturists, psychologists and psychiatrists as she searched for hope and healing. I held her hand across the road at Parliament House. I stood by as you apologised for past, flawed and harmful government policies, and I travelled with her to Canberra as Julia Gillard spoke of systemic betrayal and remorse. I transcribed as she finally put her story down for this inquiry, and as you remember I sat with her here as she spoke her truth to you and asked for help. This accompaniment is all I could offer as I watched my mum crumble to a mere shadow of herself as she attempted to finally nurture and care for the 19-year-old whose child was taken away from her. But this accompaniment was only really in physical presence and time rather than emotionally.

My submission offered insights into how the forced removal of my mother's child, my sister, and the following years of shame and secrecy flowed on to her other children. The lack of attunement in my early life, the reduced capacity of my mother to see, hold and meet my emotional needs and the reliance of my mother on me

to meet her needs meant that I learned to disconnect. Her fears and anxieties throughout my childhood were palpable, and there was no room for my own, so I pushed them down. I dealt with them in isolation, and I got really good at detaching and ignoring my own needs—until now, really. Over time I have developed more compassion and understanding of these adaptive strategies that helped me survive this time. However, they have had lasting impacts on my work and my relationships with both myself and others. I have also seen this impact on my sisters, and I have seen it passed down into the next generation with my nieces and nephews. My hope is that this one example demonstrates how a policy decision made over 50 years ago, in the belief of good intention in the society existed, echoes across three generations today.

Inter- or trans-generational trauma and epigenetics are relatively new concepts that describe that cycle of trauma where the impact is passed through one generation to the next, sometimes altering gene expression, direct experiences or through parenting practices, mental health issues or beliefs about themselves, relationships and the world. My mother believed that those close to her would abandon or reject her and was immobilised by this belief. This was then embedded in me and is something I have to challenge every day.

It is not surprising that I ended up working in the field of trauma and alongside our state care system and have been there for the past 15 years, where I see intergenerational trauma being prolific. I am old enough now unfortunately to be working with the children of the young people that I supported when I started. In this system I also see many decisions and policies made—like those in the 50s, 60s and 70s—with the best of intentions continue, and if those who were affected by those decisions had more power and a voice, we would probably already be planning our next state and our next federal apologies to them. But like these young women back in those days—my mum—they exist on the margins. They continue to be shamed and stigmatised. And the young people in our system now try and do their best, but they are often in isolation. And when they cannot cope or their parent, our state, does not offer them a safe place to heal, they are often rebadged from victim to perpetrator. At this time their parent, the state, then sanctions them with another one of our systems and the cycle repeats.

Do not misunderstand me. I am sure you all know there have been multiple inquiries into our state care system over many years: the *Bringing Them Home* report, '*Crossover Kids*', *Forgotten Australians*, the child safety commissioner—multiple reports. However, like this one, the responses and recommendations made have often been substandard in dealing with it. Therefore whilst I are here today to speak to you about the impact of forced adoption on me and my family and the responses to the initial inquiry, I guess I come with a bit of scepticism, as I have seen numerous recommendations from other reports across our system never be put in place.

And whilst this is a new step, I guess, that we are inquiring about, the responses from the first inquiry, I guess I am curious to see how we continue to implement things within our system to make sure we are accountable for all our other reports and recommendations and how we respect the time and the stories that people initially share by not only listening to them but then acting. We know the first step to healing is acknowledgement, and the apology has made space for that, but in witnessing my mum's experience, that was only the start. And to truly heal, they only have meaning when actions are taken. And as with much trauma, the pain lies often less in the event but rather in the ongoing response from our institutions: the secrecy, the disbelief. We are seeing that very present right now. And the lack of action from the initial inquiry I guess exacerbates the original harm from our institutions—from being told to forget, to never remember, and to move on, as my mother was.

Jennifer Freyd is a researcher in the US and she talks about institutional betrayal, describing the failure of organisations and those in positions of power to prevent or respond supportively to their wrongdoings within the institution when there is a reasonable expectation of protection. This occurred at the time of these policies and has continued every day when these women's and children's and fathers' stories were silenced, shamed, and when recommendations are not followed through.

Lastly, I think we also—I did not this put in my submission—need to acknowledge the role of gender in this policy, and a significant part of this was about women's bodies and judgement and how it was made about who is and is not good enough to be a mother. For my experience, I think our state, to be honest, is the last person who should talk about good parenting. And whilst these things are not overt these days, the policing and judgement of girls and women and their bodies, their actions, continues to reverberate throughout our society and therefore in our organisations and in our government. This then continues to influence our policies and lawmakers and therefore harms other women and girls to this day.

So I guess, as those people, how do we challenge these ideas in all our encounters, because I just see it continue to perpetuate in all areas of our policy, and to make sure we are not again apologising in 20 years time for similar practices? I know hindsight is a wonderful thing and we do not get everything right and we are just a reflection of our society at the time, but we should be doing better. To quote I guess something that I constantly refer to with my work, Maya Angelou:

Do the best you can until you know better. Then when you know better, do better.

And we know better at the moment, so why aren't we doing better? Thank you.

**The CHAIR**: Thank you so much for being here and your courage in sharing your story with us. I will pass on to any questions. Christine.

Ms COUZENS: Thank you so much for your time today. We really appreciate it. Sharing your experience with us really adds to the work that we are doing, so we do really appreciate it. You talk about, you know, we should be doing better, and I wholeheartedly agree. If you cannot answer this, that is fine, but I was thinking: what are the recommendations that you would see as being most significant coming out of this inquiry?

**NAME WITHHELD**: Well, I think that there are some that have already been there but just have not been accessible to people. I think in regard to this particular inquiry, I want clarity and an understanding about the breadth and depth of the impact of these experiences. I guess I want those who are affected to have access to compensation for their injuries and access to funding to have the relevant supports that they need. Our mental health system is a very difficult one to navigate as a professional, let alone as a person. I know there are reforms happening at the moment, so I guess I would want an understanding of the needs of this group of people in particular to be recognised in those reforms and for that to be represented in what services are offered and for there to be there a breadth of things on offer for people.

I guess in doing better I want to make sure that history is not forgotten and it is not just put on a shelf somewhere for us to then look into again in another 20 years in a different way, so how do we keep these stories alive? I went to the exhibition in Geelong with my mum and my sister, and that for me added another layer of understanding—even though I had experienced everything alongside Mum for a long time—of the impact of the society at the time and how it was almost a perfect storm that created the conditions that allowed this to be felt like it was the right thing to do for many people. I want ways to keep that story alive, whether that is that touring more or just how we keep telling those stories so that we do not have the ongoing secrecy and silence and the shame that comes with this.

And how do we embed somehow—I am sure there are already things that exist; I do not work in the bureaucracy—checks and balances that make sure that we are really thinking about policies that I have seen enacted in a rash, knee-jerk way that does not consider everything we know about how the way we go about things continues to perpetuate harms to those most vulnerable. We expect them to then be able to find their voice to stand up for themselves, often to the systems that have traumatised them. How do we create a system I guess that can flexibly change? So yes, there is specific stuff that I guess I want to see out of this in regard to access to services, keeping the stories alive and—

Ms COUZENS: Specific training too?

**NAME WITHHELD**: For the mental health system?

Ms COUZENS: Yes.

**NAME WITHHELD**: Yes, I think, or just an awareness that this exists. Like, I do not think that people are aware that this exists.

**Ms COUZENS**: Yes, we have heard some evidence that some counsellors have no idea of the issues confronting these women.

**NAME WITHHELD**: Yes, and a breadth of responses. Our mental health system, particularly—well, you cannot get into our community-based mental health because you have got to be really unwell to get in. But it is often talk-based therapies and, personally, working in the trauma field, that touches the sides in regard to people being able to deal with things. For my mum it has all been in her body. She has had numerous health impacts

caused, I think, by just years of repression of her emotions but has just gone to psychiatrists and got medication and engaged in like talk therapy, which is limited in its efficacy. So yes, training for our services I guess that just makes it aware—it is grief, it is loss, it is trauma.

Ms COUZENS: It is that recognition though that is—

**NAME WITHHELD**: It means that they do not have to tell their story 20 times around what actually happened to them. So specific stuff, but then for me there is just broader stuff in how do we stop this—us continuing to cycle through doing stuff, apologising, doing stuff, apologising, when it is really clear. I mean, it is hard work, but it is clear what needs to be done I guess in how we try and avoid these harms.

Ms COUZENS: Thank you.

**Mr NEWBURY**: Just a small point—thank you so much for being so open and eloquent, it was really kind of you to speak that way, and we really appreciate it so much.

NAME WITHHELD: Thank you.

**Mr NEWBURY**: If I could just pick up just one little point. I think you were saying that you wanted to see the full breadth of the issue reported, if I can just clarify, and also public expression as well or a clear perhaps visual ongoing presence of recognition of the issue so that the community can see and so that there is an awareness—so that it is not in a report that is put on a shelf and we then have to go and pick up the report again. Is that what you were talking about?

**NAME WITHHELD**: Yes, like I know there has been a statue put up out there, but I mean there is also a memorial outside the Tan—I only realised when I went to Survival/Invasion Day. I never knew it was there, so I guess that is limited. It is helpful for people that have gone through the experience, but no-one who does not know anything. So I guess the breadth and the depth that I talk about is the intergenerational stuff. For me it is, yes, it affected me, but how it just reverberates through generations—these things I think we need to consider. And also if you have got the awareness that this could happen, I think, as I have said, it also sends a lot of messages to young women just in general about them and their bodies and the state being able to sort of make decisions around that. In regard to a public recognition, I guess I do not have a clear answer as to how you keep stories alive and how you—

**Mr NEWBURY**: But that is a really good point, if you do not mind me saying. How do you keep the story alive? I think that is something that we as a committee have certainly and I have certainly taken from you. How do we keep the story alive and not perhaps have a statue which is there but is not necessarily an ongoing conversation? I think that is a really important point.

**NAME WITHHELD**: Well, for people who do not know—because that is great for everyone that knows it is there and what it is about. I think the exhibition offered a lot more depth to me than I had already around that time, because my mum does not have much memory of the time. It offered a lot of context around what society was like and all the stuff around sex education at the time—just all the things and the lack of welfare for single women and how that contributed. I do not know what that would be to have the rest—I mean, it is the same as our state care system. Most of the people I know in my social networks know nothing about what a small number of our children but a significant number of our children experience every day.

Mr NEWBURY: Thank you.

Mr TAK: Chair?

The CHAIR: Thank you, Heang.

**Mr TAK**: Just to continue on James's question, I know it is tough, but what was it like at the time when your mother informed you or told you that you had a sister that was taken away? Did you sort of receive any support at the time?

**NAME WITHHELD**: At that time I was 24 I think. I actually made a joke about it at a family meeting—I was like, 'Oh, we've got an illegitimate child', and then it was. I have been in and out of therapy for probably 20 years—I had already sort of had some therapy, but I had always stopped because I could not afford it, pretty

much. Even the gap—I could not afford the regularity. At the time our focus was on Mum, I guess. It is only over time that I have really understood how her experiences affected me and my childhood and my own now functioning, I guess. So yes, I have sort of sought different therapies and done my own work and through my work have been exposed to a lot of stuff that has been helpful. But that has required me to seek that out and access it and be able to afford it, which I still probably cannot to the extent I would like to. But at that time the focus was on, as it always has been, reassuring Mum that we were not going to disappear on her and that she was okay. Then there was probably an extended five years of her processing that, because she had not spoken to us about it ever at all or anyone—there were limited people in our life that knew. So she then ended up in hospital for mental health stuff, and so I was supporting her and then trying to find my sister.

**Mr TAK**: Yes, and I guess it was maybe difficult for you at the time when you were at school and all of that—camping and all of that. She was—

**NAME WITHHELD**: Yes, I remember going away. I went overseas when I was 19, so the same age she was pregnant. I was not there to witness it. Like even now—I went to Indonesia last year, and I am 39. There is just palpable anxiety you going anywhere. But yes, at that point, when I was 19, I remember my sisters talking about how challenging that time for them was while she was at home. She was terrified that something could happen, yes. So it is just everyday interactions. Yes, it is palpable in her.

Mr TAK: I appreciate that. Thank you. Thank you, Chair.

The CHAIR: Thank you. Again, can I thank you very much—

NAME WITHHELD: My pleasure.

The CHAIR: for sharing your experience and making a very valuable contribution through your submission. No doubt I echo the sentiments of my fellow committee members. Again, we acknowledge that it is challenging revisiting the past and it can be painful and confronting, but I do want you, as you leave today, to know that this committee will provide and will put forward strong recommendations to the government on this issue. I assure you that we will keep you informed of the updates in relation to the progress of the Committee. But I do want to just—I know it is extremely challenging, the experiences and sharing your story again with us today—make a commitment on behalf of our committee that we certainly do take on board your submission.

NAME WITHHELD: Thank you.

**The CHAIR**: There will be, as I said, strong recommendations in the report to the Victorian government. At this point we will table the report by 1 July this year and, as I said, we will absolutely continue to keep you updated on the progress of our recommendations. Thank you so much for being here and sharing again.

NAME WITHHELD: Thank you for your time.

Witness withdrew.