# **Chapter 3**

# The experience of forced adoption

A mother whose child has been stolen does not only remember in her mind, she remembers with every fibre of her being.<sup>1</sup>

### Introduction

3.1 These chapters seek to recount the experiences of submitters to the inquiry who were subjected to forced adoption first hand, either as a mother, a father, an adopted person or a family member. Most submissions to the inquiry have been received from mothers whose babies were removed from them against their wishes. While common themes have emerged amongst the accounts, the committee recognises that each individual's experience was different:

We have to keep in mind that there is a great diversity of experiences of birth mothers and that their personal fates vary depending on the year in which they relinquished their child and in the state in which they relinquished their child.<sup>2</sup>

- 3.2 Many accounts have been given in the thousands of pages of submissions to the inquiry, and hundreds of pages of transcripts from the committee's hearings. The evidence and submissions that have been provided for public release are available on the committee's website. The committee acknowledges the many other accounts that have been given confidentially or received by the committee as correspondence.
- 3.3 The committee also acknowledges the many people who were affected by forced adoption but could not contribute to the inquiry. For some, reliving the traumatic events of the past by writing a submission was too difficult. Tragically, others have taken their own lives, sometimes as a result of mental illness caused by the trauma of their experience of forced adoption. The committee offers its condolences to every person who has lost a friend or family member to mental illness as a result of this trauma.

There are a lot of people that are not here today because they have killed themselves. I have two suicides in my own family from all of this.<sup>3</sup>

3.4 These two chapters are about forced adoption and therefore do not seek to relay accounts of other forms of adoption, for which the committee notes there are a range of both negative and positive experiences. The committee did provide a number of stakeholders with the opportunity to provide alternative views about adoption, but with few exceptions, these opportunities were not taken up.

<sup>1</sup> Ms Charlotte Smith, Private capacity, *Committee Hansard*, 20 April 2011, p. 118.

<sup>2</sup> Dr Trevor Jordan, Jigsaw Queensland, *Committee Hansard*, 27 April 2011, p. 53.

<sup>3</sup> Ms Leonie Horin, *Committee Hansard*, 20 April 2011, p. 110.

3.5 The committee acknowledges that for many mothers and adopted people, the telling of their accounts in submissions and/or in hearings has been painful and difficult:

To be telling your story of such a horrific event and trauma takes a huge amount of emotional effort. People have to go back and relive all their experience to put it down on paper so that someone can read it and say, 'Oh, that was pretty nasty.' We have done this many times over.<sup>4</sup>

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Despite my joy at having this amazing opportunity to express myself, I have found the task of collecting thoughts and of writing very difficult, disturbing, distressing and depressing. I apologise that this declaration probably jumps around and may be disjointed and difficult to make sense of, but it's the best I could do.<sup>5</sup>

- 3.6 Despite the difficulty of reliving very traumatic events, many submitters emphasised the need for an acknowledgement that the experiences they had were real. The culture of secrecy that surrounded adoption throughout the period in which the clean break theory was prominent meant women carried their experience as a secret from even their closest friends and families.
- 3.7 Historian Janet McCalman recorded the experience of a nurse who moved from a busy city labour ward to a hospital in a quiet country town:

It was quiet and there was time to talk and I found that women over seventy, who might have been coming in for gynaecological problems, would say, 'You're a midwife?' 'Yes.' 'Well I lost my baby years ago' and it was the first time that they'd plucked up the courage to talk about it, because you had the time to sit there. And those women have suffered all their lives—they've never forgotten it. It's a real myth to say that it's all over and done with.

It's never over and it's never done with and it ruins their lives. It ruins their family lives – their ability to rear their families. They admit it themselves when you get them sitting down – that they could have been better mothers. They were always looking for the children that went – the child that was given up. <sup>6</sup>

3.8 Ms Brenda Coughlan has stated to the committee on a number of occasions the importance of the truth becoming known:

<sup>4</sup> Mrs Lily Arthur, Origins SPSA Inc, *Committee Hansard*, 29 April 2011, p. 29.

<sup>5</sup> Mrs Bernadette Wallman, Submission 175, p. 1.

<sup>6</sup> Cited in Janet McCalman, Sex and Suffering: Women's Health and a Women's Hospital, The Royal Women's Hospital, Melbourne 1856–1996, Melbourne University Press, Melbourne, 1998, p. 278.

The unique opportunity for the truth to be told can be provided by the many mothers that have remained standing to fight for justice.<sup>7</sup>

3.9 Other submitters considered that public recognition of past events is important:

We need to be respected in this country's history as mothers who had their babies taken forcibly from them for no other reason than to satisfy the ideals of others. We need to be respected in this country's history as mothers who were unjustly abused, betrayed and punished by all governments, hospital staff, welfare workers, religious hierarchies and society because of their inhumane, obscene prejudice towards us.<sup>8</sup>

3.10 While reliving past trauma has been difficult for submitters, one positive result of the inquiry is that some submitters have experienced a sense of catharsis as a result of speaking about these events, in some cases for the first time. Mrs Barbara Maison sent the committee a supplementary submission which expressed reflections on her experiences during the inquiry process:

Attending the Inquiry hearings, writing submissions, hearing of others' lives has been truly cathartic and therapeutic and as I have been blessed with a rewarding relationship with my son, I do not feel so completely alone any longer having hardened and despite my deep grief superficially manifesting in other ways, I feel calm and rational and can now get on with my life, albeit over 50 years since 'that' most horrific period in my life.<sup>9</sup>

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I want to thank you for holding this inquiry, because for 40-odd years I lived with the shame of having a child out of wedlock. I was silenced by my family and by my community. You have made me become a better person, and because you are here I have been able to speak out in public about this for the first time, and you have respected me, when I have never had any respect or felt that I had any respect from my own community. Thank you. <sup>10</sup>

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In all these years, I have never had a Doctor or Psychologist who recognized the effects of forced adoption...they seemed to want to find a different reason for my despair...it was never dealt with adequately and it is only since I joined the Facebook page 'Australian Inquiry into Forced Adoption' that I have found some relief from my pain...finding others that understand has been my unfulfilled need since 1969...

<sup>7</sup> Ms Brenda Coughlan, Submission 19, p. 84.

<sup>8</sup> June Smith, *Committee Hansard*, 20 April 2011, pp 33–34.

<sup>9</sup> Ms Barbara Maison, Submission 14, attachment 4, p. 1.

<sup>10</sup> Ms Robin Turner, *Committee Hansard*, 16 December 2011, p. 14.

An analogy I posted on that site as a response to the relief I felt in finding out that there is an Inquiry...it's like being buried alive...I've been clawing the lid of the coffin trying to get out, and someone has just lifted the lid off for me...and I'm gulping fresh air...<sup>11</sup>

3.11 This chapter recounts the experience of forced adoption. It first addresses mothers' experiences of pregnancy, at home, in the community and at maternity homes. It continues by recounting mothers' experiences of childbirth at hospitals and the consent taking process (or lack of). The following chapter addresses the experiences of adopted people as children, and then the ongoing challenges for mothers, adopted people and other family members that have lasted long after the event.

## Mothers' experiences of pregnancy in maternity homes

3.12 Most mothers who made submissions to the inquiry were unmarried at the time of their pregnancy, and were sent to maternity homes for some or all of this time. In many cases, the decision was made by their parents:

But because his four grandparents, rather than braving the shame and whispers, preferred to save face and give him away; despatch him to a life with strangers. So I was sent to an unmarried mothers' home to wait for our son's birth. 12

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My mother became hysterical, when she realized I was pregnant, she was bereft about the neighbours the relatives, and the church members, finding out, her daughter was pregnant out-of wedlock...I had to hide in the house, she had contempt for me...It was decided that I go to a home for unmarried mothers, 'for a few weeks' so I would not been seen by others who would make judgement. <sup>13</sup>

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[My father] took me to Windang police station and told them what was going on, I think he was hoping I would tell them who the father was. In those days carnal knowledge was a crime. My father got angrier and angrier he punched me in the face in front of the police who did nothing, about an hour later a lady came to the police station and took me home and told me to pack a bag.<sup>14</sup>

3.13 Mrs Beverley Redlich was not informed by her parents that she would be leaving; she believes she was administered sleeping pills by her mother and recounts waking up in the car on the way to a maternity home:

<sup>11</sup> Name withheld, Submission 256, p. 9.

<sup>12</sup> Ms Barbara Maison, Submission 14, pp 3–4.

<sup>13</sup> Ms Marilyn Murphy, Submission 150, p. 2.

<sup>14</sup> Mrs Colleen Ewen, Submission 40, p. 1.

In 1965 I was sent to 'Carramar' Church of England Home for Unwed Mothers...I did not go there on my own freewill. I was woken that morning apparently I must have been drugged by my mother with a sleeping pill or similar, as I did not come around til I was shaken awake by a Preacher...As we were parked in the driveway facing a two storey older style building I asked him, 'Where are we?' and he said, 'This is a home for girls who are pregnant like you to stay til they have their babies'. I was terrified as he led me to the door to be met by a stern looking woman who led me inside. Fear has caused me to forget the finer details of what exactly happened next but I vaguely remember being taken upstairs to a room where I would stay til my baby was born... <sup>15</sup>

3.14 From witnesses' accounts, it appears that it was expected that women would stay in maternity homes, with little contact with their families or friends, for the duration of their pregnancies. Ms Christen Coralive, who considered staying in a maternity home, explained that employees attempted to prevent her from leaving after she was interviewed there:

In 1974, when I was 20, I was in a relationship. I found out that my partner was abusive, so I went to the social worker at the Royal Women's Hospital in Carlton and asked for a safe place to stay for a week or two until my baby was delivered. She directed me across the road to St Joseph's Receiving Home in Carlton. I was interviewed by a nun and I told her that I just wanted a safe place to stay for a week. I didn't mention anything about relinquishing my child. She startled when I mentioned that I had a vehicle. Luckily, it was parked right out the front. She told me to stay where I was and that she would go and get some help, despite the fact that I'd said I didn't really need help with a light overnight bag. Off she went, and I stood in that office momentarily, but my instinct kicked in. Lucky it did, because I bolted. I had two big beefy orderlies chasing after me. I got to my car just in time to lock the doors. They tried very hard to prevent me from leaving. 16

3.15 Some submitters noted that they were not allowed to use their real names at maternity homes. This appears to have been particularly so at homes operated by religious organisations:

On my arrival at St Joseph's, I was told I needed a false name for my stay there. My daughter was subsequently registered with this name as her mother's. <sup>17</sup>

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<sup>15</sup> Mrs Beverley Redlich, Submission 112, p. 1.

<sup>16</sup> Ms Christen Coralive, *Committee Hansard*, 26 October 2011, p.9.

<sup>17</sup> Ms Judith McPherson (read by Ms Jennie Burrows), *Committee Hansard*, 28 September 2011, p. 53.

At the home I was told to take another name, that of a Saint, as I could not use my real name, in case one day I should meet a fellow inmate, socially or in the street, who might recognise me. 18

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To start off we had to have an alias name. It was considered for privacy reasons. We were treated like criminals. 19

3.16 For many submitters, the initial loss of their real name was a precursor to further loss of empowerment owing to conditions at maternity homes.

### Conditions at maternity homes

3.17 The committee heard that many mothers had their possessions removed, were prevented from having any outside contact with people who may have supported them, were made to work without pay and were subjected to constant pressure to give their babies up for adoption.

I went to the Salvation Army in Sydney and was placed into a home for old women where I and several other unmarried pregnant girls did most of the work there under the orders of the matron, some Salvation Army women, and a cook.

I worked in the kitchen and it was hot, hard work. One of my tasks was to scrub the floor until one day the cook told me to use a mop as I was having difficulty getting down to do it. I had almost finished when Matron came in and said 'What is she doing with a mop? I want to see her on her hands and knees before our precious lord!' Matron came in as I was scrubbing it and said 'That's better; down on her hands and knees where she belongs.' This is just one example of how we were treated there. <sup>20</sup>

3.18 Some submitters suggested that maternity homes appropriated women's benefits, while women were also expected to work to support the operations of the hostel:

I have a vague memory that there seemed to be a seamless process of signing girls up for government benefits to pay for the accommodation with the Salvation Army. However we also had to 'voluntarily' work in the kitchen and the hospital laundry, daily, right up until we went into labour to cover whatever costs there were. This kept the private wing of the hospital running as well as the part set up for adoptions. The work in the laundry was physically demanding, lifting wet sheets, hanging them out, taking off and folding them and washing and drying and ironing laundry for the hospital. It felt like a kind of penance. In recent years, I have occasionally passed what then was the Medindi Maternity Hospital and it generates a

<sup>18</sup> Anne Burrows, Submission 138, p. 1.

<sup>19</sup> Ms E. Mittermayer, Submission 221, p. 1.

Name Withheld, Submission 114, p. 1.

deep sadness in me and an odd feeling that it was a Dickensian tale about somebody else. <sup>21</sup>

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When you got upstairs your clothes were taken from you and your money was taken from you. You were totally isolated. You were allowed no phone calls, no contact with anybody outside. <sup>22</sup>

3.19 Many witnesses described being forced to perform manual labour to an extent that would certainly not be expected of pregnant women today. As well as working for no pay, Ms Kate Howarth reported that food and accommodation standards were poor:

For the next four months I was put to work in the hospital kitchen and laundry, for six and a half days a week, working an eight hour split shift. There was no payment for the work I did; it was said to cover my 'keep' while I was confined and awaiting the birth of my child. The accommodation provided by the hospital was overcrowded and squalid.

The food supplied was inadequate for the needs of a pregnant girl and resulted in malnutrition that resulted in considerable hair loss and dental problems due to a lack of calcium in the diet.<sup>23</sup>

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When I was at Elim [a maternity home in Hobart] I worked and never saw any money. They reckoned there was a wage. I do not think anyone saw it. I cleaned floors, I was working in the laundry and I was also working in the labour ward, cleaning up after the mothers had their babies. I saw some terrible things happen in there. Every time I hear something about adoptions, it comes back to me. It tears me apart. At the last one, I could not tell them everything because I was afraid. If only people knew what really happened in there. These people are right: it was a terrible place. It was a house of horrors. 24

3.20 Some maternity homes included facilities to allow women to give birth onsite. The committee heard that in these homes, pregnant women were engaged in ancillary tasks to assist in the operation of the maternity ward:

We were given a tour of the labour ward, and our tour guide told us we had been chosen by God to provide babies for childless couples. After being told we were worthless for so long, I think it was small comfort. We were set to work in the laundries and other areas. I had to sit in the autoclave room rolling up cotton balls into swabs from a long roll of cotton. Some girls got the job of erasing the names from the paper bags put over the feeding bottles for the babies in the nursery so they would be used again.

24 Ms Evelyn Mundy, *Committee Hansard*, 16 December 2011, p. 43.

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<sup>21</sup> Ms Margaret Bishop, Submission 358, p. 1.

<sup>22</sup> Ms Robin Turner, Apology Alliance, *Committee Hansard*, 28 September 2011, p. 56.

<sup>23</sup> *Submission 235*, p. 1.

The girls recognised the names of some of the babies as being from their friends who had already delivered.<sup>25</sup>

3.21 Many submitters explained that the experience of isolation and the demands of unpaid work were accompanied by extreme pressure in favour of adoption.

### Adoption as the only choice

3.22 Many mothers and other witnesses indicated to the committee that the information provided on options other than adoption was poor or nonexistent, while adoption was constantly pushed as the 'right thing to do'. The committee heard several times of the way in which unmarried women were encouraged not to think of the baby as their own. This was deeply distressing for some submitters:

Living in the home for 4½ months was a very impersonal, detached experience for me. No-one on the staff made the effort to befriend me or offer me any support or counselling and this feeling of isolation from everything and everybody pervaded the whole institution. I felt totally alone. At no time was I invited to discuss my pregnancy, to talk about my future or my child's future. The emphasis was always on adoption being what was 'best for the child' – 'if you love your baby then you will give it up for adoption'. There was never any acknowledgment that to relinquish my child would be a major loss for me and for him. I was not treated as an expectant mother but rather encouraged to think of my baby as not being mine but belonging to some perfect deserving married couple.<sup>26</sup>

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I'd lie in bed every night with my arms wrapped around my baby inside of me knowing that I would never hold him after birth. I'd feel his feet and hands through my own stomach as he moved around, knowing that I wasn't ever going to feel them after he was born. I'd talk to him and tell him that I would find him again one day and that I and his father loved him and always would. I'd pray to God every night for him to send [someone] to get me out of there and show me a way to keep my baby, but no one did. I'd think of running away, but where would I run to, who would I run to. It was clear to me that no one in my family was going to help me.<sup>27</sup>

3.23 Despite a lack of any information about alternatives to adoption, some submitters had already decided that they would not give up their babies for adoption. As Ms Joy Goode explained:

Throughout my months at St. Mary's there was no information forthcoming on what was to come. Not from the Matron, her assistant or from the Doctor who visited. We were never asked about our plans for the future—it became apparent early that their foregone conclusion was that we were to adopt our

Name withheld, Submission 95, p. 1.

Ms Ann Allpike, Submission 157, p. 1.

Name withheld, *Submission 250*, p. 2.

babies out. My thoughts were that I was the one carrying the child—he was my child—no one could dream of taking him away from me—I already loved him—we had already bonded—I talked to him and I sung songs to him and I 'patted' him—I already loved him! I told him of our future plans. If only I had known what was ahead.<sup>28</sup>

3.24 While adoption was not discussed at maternity homes such as that at which Ms Goode stayed, other submitters recounted severe emotional and physical pressure to have their children adopted. Ms Howarth was given a form in relation to consent to adoption on admission to a maternity home:

In 1965 I was 15, unmarried and pregnant. I was taken to St Margaret's Hospital in Sydney. On the day of my admission I was given a document to sign which I realised was to relinquish my son for adoption. At no time before I was given this document to sign was I told alternatives to adoption or any of the financial and material assistance which I now know was available to me and which was my entitlement at law to be told about before any document was produced...

The treatment that I was subjected to before, during and after the birth of my son was tantamount to torture while the hospital administrator tried to get my consent for adoption. This included threats, intimidation and sleep deprivation. On 26 December 1965 I was discharged from the hospital because I refused to sign the consent. I was 15 years old, eight months pregnant, homeless and with less than £20 to my name.<sup>29</sup>

3.25 Submitters who did not complain about their physical treatment at maternity homes nonetheless felt emotionally pressured into adoption:

I was about five and a half months pregnant when I went to Carramar...

I don't have any complaints about the day to day treatment we received at the home; however we were subjected to intense propaganda, aimed at having us relinquish our babies. The most common line being: if we *really* loved our babies we would give them away, to a proper two parent family.<sup>30</sup>

3.26 Mrs Lizzy Brew explained to the committee that it was decided that her child would be adopted on the second day she spent in such a home, without her advice, and without her being consulted by a social worker:

I went into a maternity home on 2 April 1975. Someone marked my child for adoption on 3 April 1975, the very next day. I did not see a social worker for four months. My records will substantiate that.

We were solicited, basically. I did not ask to have my child placed for adoption. We were solicited for our babies. They went out after us, and that was forbidden by law. They were not allowed to do that. So to mark

<sup>28</sup> Ms Joy Goode, Submission 241, p. 2.

<sup>29</sup> Ms Kate Howarth, Committee Hansard, 29 April 2011, p. 58.

Name withheld, *Submission 248*, p.8.

someone's file secretly like that was illegal. Who marked my child for adoption? I still do not know, but someone looked at me and said, 'That will be good. We will have that baby for the Smiths.'<sup>31</sup>

3.27 As well as the constant pressure to have their children adopted, some submitters reported that they were physically and/or emotionally abused at maternity homes.

### Abuse by staff

3.28 Submitters have reported very poor treatment at such maternity homes by the doctors, nursing staff and members of religious orders:

I had many medical tests during my pregnancy and couldn't help but feel that I was there for the training of student doctors and nurses. I was pushed and prodded and found my stomach covered in bruises and from one examination was left bleeding from my vagina. I tried to resist upon one examination, but was forcibly pushed back onto the table, being told, 'this is your punishment for what you have done! You have to endure this so that the doctors can practice and be experienced for a real life situation!' One nurse even told me, 'You don't care about your baby, if you had, you wouldn't have fallen pregnant and ended up here annoying all of us. You will do as you are told!'<sup>32</sup>

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I used to hear girls crying and screaming at night, then would stop after a few minutes or so, I realised then what was happening...one young girl, I remember her name...she had a black eye...<sup>33</sup>

3.29 In maternity homes operated by religious organisations, submitters recounted being berated for becoming pregnant. The committee heard that expectant mothers were made to feel ashamed of their pregnancy:

In the [...] office I was told by the [...] what an evil girl I was, that I could never be a proper mother to my baby and the Sisters of St Joseph would help me give my baby to a real mother. I was harangued for some considerable time and felt my throat burn in my efforts not to cry. Suddenly the [...] banged her clenched fists down on her desk, making me jump, screaming at me why won't you cry?<sup>34</sup>

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Life in Holy Cross was harsh, punitive and impersonal. A pall of shame and disapproval covered everyone. It was common to hear girls called 'stupid',

<sup>31</sup> Mrs Lizzy Brew, Origins SPSA Inc, Committee Hansard, 29 April 2011, p. 31.

<sup>32</sup> Ms Judith Burkin, Submission 116, p. 2.

<sup>33</sup> Ms Helen Walker-Mcready, Submission 246, pp 1–2.

<sup>34</sup> Anne Burrows, *Submission 138*, p. 2.

'foolish', 'wicked' and 'sinful'. What struck me in the beginning of my time there was that all of the girls seemed cowed and abnormally quiet.<sup>35</sup>

3.30 Poor treatment extended in some cases to both physical and emotional abuse including rape:

I had a child in 1964. I was at Waitara unmarried mothers home and I had my child at the Mater Hospital at North Sydney...I did not want to put my child up for adoption. I was at Waitara for three months. I was treated very badly, even though I had cousins who were Mercy nuns in the same order there. I was treated very badly by the doctor who was supposed to be looking after us at Waitara. As a matter of fact, I was raped six weeks before Peter was born by the doctor who was supposed to be looking after me.

I was informed by the doctor himself that I was a nice, good Catholic girl and that I would have maybe 11 more kids and I would be back at Waitara the following year to give them another one. I have since found out that the sister who was at Waitara, [...], used to put all our names in an exercise book and she used to have a bet to see which one of us would be back the following year. My name was in her little exercise book when she died and it said. 'Therese will be back to have twins or maybe triplets.' <sup>36</sup>

3.31 The majority of submitters to this inquiry recounted spending their pregnancies in maternity homes. However, those who remained at home also reported unfavourable treatment from their own families and constant pressure to place their children for adoption.

## Mothers' experiences of pregnancy at home and in the community

3.32 The attitude of the communities in which mothers lived affected even those who were not sent to maternity homes. The committee received evidence that social conditions in the 1950s, 60s and 70s were hostile to unmarried mothers:

We had a situation where women who became pregnant outside of a marital relationship fundamentally had three options. One was a shotgun wedding, one was an illegal abortion and one was adoption. There were no benefits or supports to enable women to keep their children with them. When one looks at some of the other literature...the state of orphanages and children's homes through the 1940s, 1950s and 1960s was pretty shocking.<sup>37</sup>

3.33 Many submitters explained the stigma attached to single parenthood and its expression in abuse of unmarried pregnant women:

At the time (1977) there was enormous social stigma associated with birth out of wedlock and there was in fact a strong social under-current of

36 Ms Therese Pearson, Origins Newcastle, *Committee Hansard*, 28 September 2011, p. 57.

<sup>35</sup> Mrs Margaret McGrath, Submission 190, p. 4.

<sup>37</sup> Ms Marie Coleman PSM, *Committee Hansard*, 28 September 2011, p. 1.

pregnant single girls not being [considered] fit to raise children. During this period I was verbally abused in the street and shunned.<sup>38</sup>

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The way in which I was spoken to during my pregnancy and the abuse that they inflicted by putting me down and making me feel wrong—someone said a slut or whatever—the whole implication of being unmarried and pregnant was a terrible legacy from a society that was damned sure of getting my kid; they did not care how.<sup>39</sup>

3.34 The committee heard from several submitters who described the additional pressure felt by unmarried pregnant women outside major cities:

I became pregnant in a country town and the father was not prepared to help me. I knew my parents, especially my mother, would never cope with the shame of having an illegitimate grandchild so I decided to go to Sydney and have the child there.

Her last words to me as I was leaving were 'If you don't have that child adopted, you can never come home again.'40

3.35 In an attempt to avoid the 'stigma' of pregnancy outside marriage, many mothers were sent to relatives' houses or maternity homes interstate during their pregnancies. This added to the challenges that parents and adopted people faced, and continue to face, when seeking information or contact with each other.

Also, mothers were often sent to other states to have their babies in order to protect them and their families from public shame, so many adoption experiences span more than one state. <sup>41</sup>

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There was a diaspora of pregnant women being shipped all over the countryside. To get them out of the town and move them. 42

3.36 Ms Angela Brown described the experience of staying in a maternity home, and continuing to experience discrimination and embarrassment. Many submitters told of the embarrassment of being forced to give police information to enable them to charge their partners with 'carnal knowledge':

If we went into the shops for personal items we were only allowed to go in twos, so as not to upset the home owners in the area who had complained about us 'walking the streets in our state', we were a large blot on their

<sup>38</sup> Mrs Louise Greenup, Submission 101, p. 2.

<sup>39</sup> Ms Spring Blossom, *Committee Hansard*, 20 April 2011, pp 121–122.

Name withheld, Submission 114, p. 1.

<sup>41</sup> Ms Evelyn Robinson, *Committee Hansard*, 26 October 2011, p. 13.

<sup>42</sup> Mr Roy Legro, Committee Hansard, 20 April 2011, p. 188.

pleasant society and the church did not want any trouble. Shop keepers commented that we were from the local 'baby factory'.

They had the police come and talk to us and have my boyfriend charged. I had to make a statement and described a 'typical sexual encounter'. 43

3.37 The committee heard that family members were particularly disapproving and provided little or no support, fearing a loss of their reputation:

Early in 1970 I found that I was pregnant. As an unmarried woman who had just turned 21, this was a most distressing time for me. I knew of other women who were unmarried and pregnant; they suffered discrimination, public humiliation, their children were referred to as bastards they were branded as illegitimate. I knew that my child and I faced an uncertain future...

My father said to me that if I kept my child, I would not be welcome at home or in the family. I was forbidden to have further contact with P.

My parents feared that I would bring disgrace, shame and ridicule and this would damage the family reputation. They worried that my siblings would be taunted about having an illegitimate (bastard) child in the family. It all had to be kept a secret. I was to be banished from home and immediate family members for the duration of the pregnancy and faced being shunned and excluded from the family if I went against the wishes of my parents.

Such were the times, vulnerable pregnant and unmarried woman were at the mercy of social criticism and ridicule. They were socially isolated and treated harshly. At a time when the mother most needed love, compassion and emotional support, she and her child were cast aside by society in general, and manipulated by the adoption system. 44

3.38 Some young mothers' families took extreme steps to hide their daughter's pregnancy from society. One submitter recounted that her mother advised her to wear a corset during her pregnancy and was hidden in a wardrobe or in bed when guests visited:

As the pregnancy progressed my mother advised me to wear a boned corset. As I grew bigger, the corset threads were tightened with pressure down the opening in the back. This was to disguise the growing baby bump. Sometimes I felt I could barely breathe with the baby pressing on my lungs and ribs...

I remained at home when not at work for the remainder of the five months. Visitors would call in to see my parents. Dinner parties were held at home. I would be asked to hide in my mother's wardrobe while visitors were entertained. I was not to be seen. On my birthday a Christmas party was held at home for friends and relatives to enjoy. The baby was due any day. I remained in my bed throughout the whole evening. Story told to guests, I

<sup>43</sup> Ms Angela Brown, Submission 402, p. 1.

<sup>44</sup> Name withheld, Submission 142, p. 1.

was unwell and too sick to join in. My bladder was so painful wanting to urinate after a few hours; I almost passed out with the pain. The toilet could not be visited should someone see my bulging, pregnant stomach. I waited until everyone had gone home.<sup>45</sup>

3.39 Many submitters noted that such social isolation and stigma was experienced to a much greater degree by unmarried mothers rather than fathers:

In 1963 I found myself pregnant to a long time boyfriend, apparently I committed a crime the way I was ostracised by my mother, she would not converse with me give any advice on the subject. When Dad wasn't around I got called a few choice names when I was needed to do certain things at home. A few weeks later I was dismissed from my workplace as the shearers were due and then a few weeks later on shearers were due at home and I was soon bundled off elsewhere before I was sent to a home for unmarried mothers, not in my home state just in case I was recognized and ruin the family name, so away to Victoria for the last 4 months. It was bad enough being pregnant and shunned by my own mother and boyfriend that I was to be married to but then to be packed off to a different state into a home with about forty to fifty strangers. It's amazing that it was the girl that had done the wrong, never was the male treated the way we were, the girls were the sluts, street girls etc. The social stigma, attitudes and family shame back then were unbelievable and to think that one's own family banished their own flesh and blood for being human I will never understand and will never forgive.46

3.40 Other families addressed the stigma of unmarried pregnancy in other ways, for example, by pretending that their daughter's child was their own child, or their own adopted child:

My mother was a silent witness to her daughter's upbringing by her parents (and this raises too many issues)...

I don't wish to disparage my grandparents I truly love them and the love they had for us but they were misguided in their ideas and it cost so many. 47

3.41 The committee heard that attitudes of families to unmarried pregnancy also extended to the wider community, including employers and health professionals.

### Access to work and financial support

3.42 As well as from families, witnesses also recounted poor and unsupportive treatment by employers. Ms Evelyn Robinson, author of several books on the experiences of mothers and adopted people, explained to the committee that women frequently lost their jobs when their pregnancy became known:

47 Name withheld, *Submission 195*, p. 2.

Name withheld, Submission 255, p. 1.

<sup>46</sup> Kaye, *Submission 167*, p. 1.

Many of them were sacked from their jobs because they were pregnant, and they would not be re-employed as an unmarried mother...In the mid to late sixties, very few people would employ an unmarried mother. Many people would not provide accommodation to a single mother with a child. So financial support was crucial to many people.<sup>48</sup>

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In the meantime the owner of the hairdressing salon where I had been indentured as an apprentice hairdresser, offered to pay all costs if I would agree to an abortion. I blankly refused, choosing motherhood over my hairdressing career. 49

3.43 In addition, many submitters reported not being informed of any financial assistance available to them. Those who were in a position to seek and find further information found other obstacles placed in their paths (conditions for obtaining government welfare support are discussed further in Chapter 5). Ms Christen Coralive recounted the humiliation she endured at a welfare office:

I was already under duress, frightened and alone. At that time, I was not advised by the social worker that there was financial assistance available to me. This information was kept from me, and therefore there was no other option for me at that time.

To follow-up on the money issue, I approached the Council of Single Mothers and Their Children, which had just got started, I think, and I was told that there was money available from them. But when I approached Centrelink, or whatever they called themselves in those days, I was told that there was no money for six months. So then I had to approach the state welfare department for money, and that was one of the most humiliating experiences that I have ever had. I remember that there were very specific questions as to the sexual nature of my relationship with my baby's father, including how many times we had had sexual relations, where and when. I refused to fill in those questions. I was mortified and left the office penniless. Luckily, I had worked through my pregnancy, so I did have some savings. We lived in poverty. <sup>50</sup>

3.44 Other submitters have recounted encountering grossly unethical behaviour when visiting trusted professionals such as psychiatrists and doctors:

After this disastrous visit the Social Worker sent me to a psychiatrist. I don't remember discussing my pregnancy or my plight with him. I told him that I was eight months pregnant and alone in Sydney and confused about what I should do. I was astonished by his response, which was, 'What are your sexual fantasies?'

Ms Christen Coralive, *Committee Hansard*, 26 October 2011, pp 9, 11.

<sup>48</sup> Ms Evelyn Robinson, *Committee Hansard*, 26 October 2011, p. 16.

<sup>49</sup> Submission 109, p. 2.

It was probably in the first week after the birth that a tall distinguished looking doctor wearing a very expensive kind of suit was ushered into my room by a midwife (she left the room) and stood opposite me whilst I was sitting on the edge of the bed. After I told my story very briefly, and I asked him 'what was wrong with me, where had I gone so wrong' the psychiatrist made the following remarks, 'You must have enjoyed the fucking that created your baby, all those sperm exploding against the walls of your vagina!' He then concluded his visit by saying that I was 'emotionally immature'.

Interview over. I was left with the feeling that he intended to make me feel powerless afraid and anxious; he had indeed succeeded if that was his objective. There was no advice or compassion. He had violated my rights to feel understood to seek information, to be reassured by a health professional postnatally and as I felt so shocked and stunned that a doctor could speak with a patient in that manner, I have never disclosed this experience to anyone in past 43 years up until recently, as it was too painful, confronting and unbelievable.<sup>51</sup>

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On every occasion that I went to see him [her doctor], he told me to take off all my clothes no matter if it was for an internal examination or simply to take my blood pressure. I didn't understand why it was necessary to undress for this but didn't question any of it, thinking that perhaps it was what every pregnant woman had to do. I remember being very embarrassed by it and really didn't know how to broach the subject with my mother or anyone else.

On two occasions when taking my blood pressure, he sat beside the examination table and positioned my arm so that the back of my hand rested in his crotch. On the second occasion he did this, I raised my arm but he casually pressed it downwards until it was again resting in his groin. I blush even now at the memory of it and am angry that he took advantage of my inexperience and angry at myself for not having said something to him about it or told anyone.<sup>52</sup>

3.45 In summary, women who made submissions to the inquiry recounted a pregnancy marred by systematic disempowerment. The committee heard that such disempowerment was reinforced by families, employers, society, religious communities, health professionals and at maternity homes.

Defeated, vulnerable, lost and alone, I really felt I had no rights. I felt this because it was what I was told and they made sure that there was no way I could find out any differently. A nun told me that I was a minor and the decision was not mine. She said it was for my father to decide. I believed all the lies I was told.<sup>53</sup>

Name withheld, Supplementary Submission 202, p. 1.

<sup>52</sup> Mrs Margaret McGrath, Submission 190, pp 6–7.

Ms Judith Hendriksen, Private capacity, *Committee Hansard*, 1 April 2011, p. 9.

## Mothers' experiences of birth and hospitals

3.46 After a difficult experience of pregnancy either with their families or at a maternity home, many submitters recounted still worse experiences at hospitals. At early visits to hospitals, women had already experienced discrimination based on their marital status. As Ms Darelle Duncan explained:

I admitted to being unmarried...

The hospital social worker was a formidable woman and she did not feign to hide her disdain for me. She said I had to go to the Department of Child Welfare to arrange the adoption of my child. She provided no alternatives. Further, she insisted I was not to use my medical benefits allowance for an intermediate ward as I had to go to the public ward where 'girls like me went'. When I asked about pre-natal classes she told me they were not for me, they were for 'married couples'. 54

3.47 The assumption that the children of unmarried mothers would be adopted was reinforced by mothers' experiences of birth.

### Baby for adoption

3.48 The committee heard evidence that the files of unmarried mothers were marked 'baby for adoption' or 'BFA'. While this may have occurred in cases where mothers had explicitly stated that they did want their child adopted, the accounts below would indicate that such an acronym was written on the files of most unmarried women:

The hospital files of single pregnant girls files were often marked 'BFA' assuming that the child of an unmarried mother would be adopted long before consent was taken and even if the mother had advised that she was keeping her child.<sup>55</sup>

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In my research study I interviewed women from all states and they all had very similar stories: once you were in the hospital it was like a conveyor belt—it was immediately assumed if you were unwed that your baby would be taken for adoption. <sup>56</sup>

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My file is marked UB negative, which is the same thing as BFA. It stands for 'unmarried baby negative'. 57

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Ms Darelle Duncan, Submission 192, p. 2.

<sup>55</sup> Ms Barbara Maison, Submission 14, p. 1.

Ms Christine Cole, Apology Alliance, *Committee Hansard*, 1 April 2011, p. 41.

<sup>57</sup> Ms Robin Turner (assisted by Ms Christine Cole), Apology Alliance, *Committee Hansard*, 29 April 2011, pp 43–44.

My medical records have 'BFA' stamped on them...even though I had said from the start I wanted to keep my baby. So it's clear to me they had the adoption of my child as their intention all along.<sup>58</sup>

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The 3rd report...[s]tates I have had a very positive pregnancy and am very determined to go through with the adoption.

Across the top of my medical records is written Carramar.....BFA<sup>59</sup>

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I had no intention of giving him up for adoption, I had purchased his crib, bedding and basic baby needs, but ended up suffering from toxaemia and was put into hospital early and kept sedated – from the moment I arrived I was referred to as 'BFA' which I now know means 'Baby for Adoption'. 60

3.49 The marking of an unmarried mothers' file in such a way likely influenced her later treatment while giving birth as well as during post-natal care.

### Experiences giving birth

3.50 The committee received submissions indicating that women who were unmarried were treated differently at maternity hospitals from women who were married:

During my two days of labour I was isolated and left in pain for long periods of time. Nurses glared at me with cold contempt when I asked for help, and laughed together in front of me making derogatory comments about my 'unwed status.' 61

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I do not remember how the nurse knew I was unmarried, maybe I told her, I couldn't see it being a problem as I had parental support and knew very little about the practice of adoption. However, from that moment on her attitude changed and she treated me as if I was less than human. <sup>62</sup>

3.51 Many submissions emphasised the attitude taken by nursing staff was one of disdain and judgement:

I was treated inhumanely. A nurse even told me the pain I was experiencing was punishment for getting pregnant before marriage. I was ignored and left alone with the contractions until the birthing began. I had no idea what to

Ms Linda Eve, Submission 159, p. 4.

Ms Jan Stewart, Submission 316, p. 1.

<sup>60</sup> Mrs Julie Noble, Submission 362, p. 1.

Ms Rosemary Harbison, Submission 92, p. 1.

<sup>62</sup> Ms Margaret Nonas, Submission 1, p. 3.

expect. They shouted at me, and then pushed a gas mask onto my face. They made comments about me, but didn't talk to me at all. 63

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There was no one, not one person for so many hours as I screamed until I could scream no more—finally a nurse appeared as I called for God to help she said words that will stay with me forever, 'He won't help you—this is what you get for getting pregnant'. I am now 64 years old and still cannot say those words without crying. I felt so hopeless and thought no one can help me now if God can't. 64

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At approximately 6.30am I was in a great deal of pain and asked the same nurse how much longer I had to go, she had just examined me so would have been aware of my progress. Her answer was that I had all day to go yet and just to shut up and get on with it. I gave birth less than 2 hours later with the blankets piled over my face and a needle jabbed into my shoulder immediately upon giving birth. This needle contained Stilboestrol to dry up my breast milk. <sup>65</sup>

3.52 The committee heard that this lack of appropriate care extended to the actual time of labour:

I do remember that when the time came, to give birth, I was locked inside a small room where linen was kept. I was told to lay on a bench made of wood, where they folded the linen and bandages. There was nothing over the bare wood. Many times a Nun would come into the closet and give me a needle in the bottom, without speaking to me except to move over. When the pains became unbearable they took me to a room and proper bed, where I was given strong oxygen through a mask. My legs were raised, in what I now know were stirrups, and I gave birth. I was torn badly in the birthing. The baby was put next to my head behind a curtain and cried non-stop. When I asked 'was that my baby crying'? I was told 'yes', nothing more. I listened to my baby cry for a long time before the Doctor arrived and angrily told the Nuns to take my baby away.

3.53 Many submitters described being tied to a bed whilst delivering their babies. Others explained that a pillow or sheet was placed over their heads, preventing them from seeing their babies at birth:

The screams of the other girls giving birth tied to a bed with bruises and bleeding arms next door to where six of us lay awake and listen in great fear of what torture was ahead.<sup>67</sup>

<sup>63</sup> Ms Linda Eve, Submission 159, p. 1.

<sup>64</sup> Ms Joy Goode, Submission 241, pp 1–2.

<sup>65</sup> Ms Margaret Nonas, Submission 1, p. 3.

<sup>66</sup> Ms Sandra Parker, Submission 322, p. 1.

Name Withheld, Submission 365, p. 1.

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I first knew something was wrong when a pillow was placed over my face during the birth, so that I couldn't see the child during the birth. <sup>68</sup>

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Certainly by 1963 the practice of hiding the baby from the mother giving birth was well-established. The sheet went up on cue. The drugging was mandatory for unmarried women, as was the stilboestrol administration, the binding of the breasts, and in my case, the shackling to the labour ward bed.<sup>69</sup>

### Lactation suppressants and breast binding

3.54 The accounts of many mothers include being given various drugs including sedatives, and drugs to inhibit milk production. The committee heard evidence that mothers whose babies had been identified for adoption were administered with lactation suppressants and/or had their breasts bound to suppress milk production.

About this time my milk 'came in', which I had not been expecting and a nurse arrived to bind my breasts (very) firmly with a big calico cloth held tightly with a big safety pin. This 'binder' was changed and rebound daily.<sup>70</sup>

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I awoke three days later to find my breasts so tightly bound that I had trouble breathing. This procedure was done to suppress my milk production and I feared that my son had already been taken. My hysteria and distress was observed by another woman in the public ward and she called for a nurse. Consequently, my son was finally brought to me. He had lost a noticeable amount of body weight compared to the child presented to me in the labour ward—so much so that I hardly recognised him. He was screaming and clearly in distress. <sup>71</sup>

3.55 Many submitters identified the drug *diethylstilboestrol* (DES) as being most commonly administered for this purpose:

I am angry that I cannot get a list of my medications, because I have a second born daughter who I believe is suffering from the long effects of Stilboestrol. I know I was given medication in the hospital to dry up my milk and I was fed medication when I left the hospital. I have no memory other than one or two tiny incidents of those four days. I believed I had been taken home the next day but I was there for four days.

<sup>68</sup> Mrs Madeleine Schwer, Submission 642, p. 1.

<sup>69</sup> Ms Jan Kashin, Submission 93, p. 8.

<sup>70</sup> Ms Allison Bosley, Submission 63, p. 4.

<sup>71</sup> Ms Kate Howarth, *Committee Hansard*, 29 April 2011, p. 58.

<sup>72</sup> Ms Suzanne MacDonald, Committee Hansard, 1 April 2011, p. 43.

- 3.56 Some submitters consider that DES was administered specifically to unmarried mothers. However, the Royal Australian and New Zealand College of Obstetricians and Gynaecologists' website notes that DES was used in Australia predominantly between 1946 and 1971, 'to prevent miscarriage and avoid pregnancy complications'. Information on the website indicates that DES was prescribed to pregnant women; there is no indication it was administered on the basis of marital status. DES was withdrawn in 1971 following the discovery that exposure *in utero* was linked to the development of vaginal tumours. In addition, people who took DES themselves have experienced higher rates of breast cancer. The RANZCOG and National Health and Medical Research Council (NHMRC) have published health information for both groups.
- 3.57 Other submitters noted a range of other medications were administered for purposes other than suppressing lactation:

As the night wore on, I was given several drugs, I have my medical records; among the drugs were barbiturates and an anti-psychotic.<sup>77</sup>

3.58 The committee received a submission from a former trainee nurse and midwife which suggested that drugs were administered to women after birth as a matter of care. The submitter refuted the suggestion that unmarried women were deliberately 'drugged', and defended the use of lactation suppressants:

Another witness complains of being given medication to dry up her milk. Did she want to end up with engorged breasts with possible abscesses on her nipples? If she was not feeding her baby, how else was she to stop lactating? She could have taken the natural route over many days but it is manifestly obvious that the nursing staff meant to help her, not hinder her...

She would have been given a drug to assist in expelling the placenta but in all, her 'drugged' state could simply be a reaction to the traumatic events pre and post delivery. Birth experiences are individualistic. One size does not fit all. There was no sinister conspiracy to cause her any harm of that I am sure. If she was given a sedative after birth, she probably needed it.<sup>78</sup>

3.59 The committee accepts that there may have been instances of malpractice in relation to the administering of drugs to unmarried women. Nevertheless, the

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Royal Australian and New Zealand College of Obstetricians and Gynaecologists, *Diethylstilbeostrol\_DES\_Exposure in Utero (C-Gen 8)* College Statement, Current: March 2010 (hereafter 'RANZCOG DES statement 2010'). <a href="http://www.ranzcog.edu.au/womens-health/statements-a-guidelines/college-statements/491-diethylstilboestrol-des-exposure-in-utero-c-gen-8-.html">http://www.ranzcog.edu.au/womens-health/statements-a-guidelines/college-statements/491-diethylstilboestrol-des-exposure-in-utero-c-gen-8-.html</a> (accessed 14 February 2012).

<sup>74</sup> RANZCOG DES statement 2010.

<sup>75</sup> RANZCOG DES statement 2010.

<sup>76</sup> See RANZCOG DES statement 2010.

<sup>77</sup> Ms Margaret Nonas, Submission 1, p. 3.

<sup>78</sup> Name withheld, *Submission 413*, p. 2.

committee also understands that a variety of medications were prescribed to women after childbirth, mostly administered by medical staff to both married and unmarried mothers.

3.60 However, the issue of medication is related to that of consent to adoption. While sedatives may well have been prescribed to both unmarried and married women, it was by and large the unmarried women who were subsequently asked to sign a legal document consenting to their baby's adoption. While lactation suppressants may have assisted in the physical recovery of a mother who was not breastfeeding, many mothers have explained to the committee that such medications (or breast binding) occurred before any consent to adoption was requested. The issue of consent is discussed in more detail in the following chapter.

## Different medical treatment

3.61 In addition to the administration of drugs, some submitters also suggested that poor medical treatment was afforded to unmarried mothers. Ms Maree Laird explained:

Well, of course the only cause of bleeding was found to be due to their negligence, a combine dressing [a type of dressing for wounds] found in the vagina—it was left there during or immediately after the birth. <sup>79</sup>

3.62 The committee heard from Ms Robin Turner that the birth of her baby was delayed for the convenience of hospital staff, who later treated her in a threatening manner:

As I was the only woman in the labour ward, they sought permission from Professor [...] to push my baby back up through the birth canal to delay the birth so they could go to the ball. They kept me on IV pethidine until he was born, eventually, on the Thursday night before Mothers Day, at 13 minutes past eight. I ended up with septicaemia...

They told me, 'If you intend to keep your child, you will have to come up with the money to pay for his surgery. If you do not sign the papers and you do not have the money, he will be left in a cot in the corner to die.'80

3.63 Ms Carmel Ipock explained that she believes that an Rh<sub>o</sub>(D) Immune Globulin injection would have prevented her baby's death. In addition, the news of her baby's passing was delivered to Ms Ipock an insensitive manner:

I returned home to stay with my mum and it was never talked about again. As it happened, a few weeks later a letter came from Newcastle hospital. Thinking it was just some routine paperwork, I opened it only to find that it was to tell me that my son had passed away on 20 October. The letter said:

<sup>79</sup> *Submission 20*, pp 8–9.

Ms Robin Turner (assisted by Ms Christine Cole), Apology Alliance, *Committee Hansard*, 29 April 2011, pp 42–44.

Cause of death I. (a) Cardiac failure (b) Congenital heart lesion. Duration of last illness. II. Respiratory distress Syndrome (days).

When I look back on it now I realise just how cruel and insensitive it was. There was no warning or counselling—just a letter. I have other paperwork. I believe that the reason that child died was that I am in the Rh negative blood group and I was not given the anti-D needle, which apparently I was supposed to have been given after the birth of my first child. I was never given that, so I believe that is why that child died. 81

3.64 Another witness recounted an instance of a baby passing away and the mother continuing to receive advice that the baby had been adopted.

[T]he trauma experienced by unwed natural mothers which is incomparable and unequal to any other trauma as well as the trauma mothers later suffered when learning of their angel's premature death before adoption and their burial without permission in unmarked graves or under a false name. My latter comment is made in memory of Christopher. 82

3.65 The committee also heard from a mother who recounted that unmarried mothers were subject to a sexually transmitted diseases test and held in hospital until the test results returned:

A venereal disease test would be taken from all single mothers and sent to the Brisbane laboratories. It would be available in a period of five to seven days in the city, but it would take a fortnight for the results to reach the regional hospitals, so the mothers would be forcibly kept in hospital for a fortnight, when in fact they wished to leave with their babies. If the test was positive, they would not take the baby for adoption but, if it returned negative, the consent taker would visit to take the consent...

They must have drugged me up so heavily. I did not understand. Why didn't they just discharge me and let me go? When I got this letter I realised the reason they were keeping there was so that the VD test could come back, and it took two weeks to come from the laboratories in Brisbane. That letter confirmed what I did not even imagine. I wondered for 40 years and did not know. I have only had this for the last couple of years. 83

3.66 One of the most marked ways in which unmarried women were treated differently from married women was the restriction on unmarried mothers from seeing or touching their babies.

Ms Linda Bryant, Origins Queensland Inc., Committee Hansard, 27 April 2011, pp 40, 46.

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Ms Carmel Ipock, ARMS Western Australia, Committee Hansard, 1 April 2011, p. 48.

Ms Brenda Coughlan, *Committee Hansard*, 20 April 2011, p. 85.

## Restrictions from access to babies

3.67 The committee heard from many mothers who did not know and were not informed that their babies had been marked for adoption, and only found out when their babies were removed immediately after birth.

When I had my child she was removed. All I saw was the top of her head—I knew she had black hair. I begged, I pleaded and I did everything—'Please can I see her.' 'No, you can't. She's marked for adoption.' Those were the words. I did not know what that meant at the time, but of course I do now. 84

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My son was born shortly after and whilst being stitched up the baby was placed across the room with the two midwives moving from side to side to taunt me from seeing my baby. I asked to have my baby and was told 'that was not possible' as I was classified as BFA 'baby for adoption'. I told them I was keeping my son [and was] told 'we will see'...

I went to the nursery to get my baby and was told I was not to have admittance to the nursery. After lunch I returned to the nursery and proceeded to walk straight to my baby, I was physically held back, the nursery door was locked and a social worker called. I was told not to make any trouble, you have no right to be here and to return to my bed, I made several unsuccessful attempts to get into the nursery to be with my baby. 85

3.68 The practice of removing babies at birth from unmarried mothers was deeply distressing to many submitters. The committee heard many accounts of babies being taken despite their entreaties that they did not want their babies to be adopted. Mothers who were unmarried explained that they were restricted from seeing or touching babies in spite of multiple requests and attempts to gain access.

The really major disaster of history is the separation of a mother and an infant at birth. This experience of abandonment is the most devastating event of life. It leaves babies emotionally and psychologically crippled. 86

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I was devastated when she was wrenched from my arms. No one spoke to me as my baby vanished from my sight. I had not yet been forced to sign an adoption form. <sup>87</sup>

3.69 The committee has received submissions from former midwives commenting on the issue of restricting mothers' access to their babies. One former midwife explained that many nurses felt compassionately towards young unmarried women, and cared for them more than their own families did.

Ms Linda Bryant, Origins Queensland Inc., Committee Hansard, 27 April 2011, p. 46.

Ms Linda Ngata, Submission 17, p. 1.

Ms Suzanne MacDonald, Committee Hansard, 1 April 2011, p. 36.

Ms Rosemary Harbison, *Submission 92*, p. 2.

The reason that young unmarried girls (who were intending to have their child adopted) were not encouraged to see or care for their babies in hospital was out of kindness. It was considered to be an extra trauma for them, had they bonded with the baby, to have it taken from you a few days later.<sup>88</sup>

3.70 However, another former midwife described a sense of 'shame and remorse' after seeing a television program about mothers whose children had been adopted in the 1960s and 1970s. Ms Annie Florence's submission noted that while at the time she and her colleagues had thought they were doing the right thing for the mothers and children, her opinion changed after hearing the distressing stories of affected women on the broadcast program:

Nurses were shown espousing the virtues of adoption—the hospital Matron was shown giving details of the criteria of the 'perfect adoptive parents'. I was absolutely stunned and appalled as I realised that I was one of those nurses (not in the actual film) but I had been a nurse working at the Royal Women's Hospital in Melbourne at exactly the time depicted in the program. I related and relived every incident that was depicted on the old film footage. Yes, we had taken babies from their mothers at birth, without them holding or even seeing their child. The mothers were then admitted into wards without their babies and ostracised in many different ways, finally being discharged about one week later, never having seen or held their baby or the 'new' parents who had adopted their baby.

The babies stayed in the nurseries in the hospital waiting to be adopted, sometimes for months, their only contact being with the nurses such as myself who cared for them on a daily basis. Needless to say we become very fond of these babies, however it wasn't the same as being cared for by their mother. 89

3.71 Mothers explained that they were prevented from seeing their babies by being locked out of nurseries and in some cases physically held back from seeing the babies they had given birth to. Ms Judith Hendriksen expressed the clarity of her memories surrounding her repeated attempts to gain access to her baby:

My second request to see my baby is the most vivid memory I have from my time there after giving birth. We were in the bathroom where the toilets and showers were. It's not your baby,' the nun told me. It's not my baby? Well, this was interesting. While I was standing there milk was leaking from my breasts...[t]hen she proceeded barbarically to tightly wrap the binding around my breasts.

My third and last attempt asking to see my baby was in the morning before my father came to take me home. A nun told me yet again, 'It's not your baby. You have your whole life in front of you. Just get on with your life and forget it.' Three times on three different days I asked to see my little

<sup>88</sup> Mrs Audrey Allitt, Submission 412, p. 2.

Ms Annie Florence, Submission 36, p. 1.

daughter before I left St Anne's. Three times I was denied, for it had been calculated my precious baby, that I carried there in my womb, was for the joy of others. <sup>90</sup>

3.72 This pain was felt keenly by some mothers who, after having had their babies taken from them against their will, shared wards with married mothers who were allowed to hold and feed their babies:

My baby was taken from my bedside and placed all alone in a nursery. I was forbidden to see him or go in the nursery. I was then left for several days sitting on a bed in a ward full of married mothers who were allowed to have their tiny babies next to their beds. They were able to hold their babies, cuddle them and feed them whilst I sat and watched and cried. <sup>91</sup>

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Over the next several days I continuously begged to see my baby. All my requests were denied with the staff saying 'It's best that you don't see the baby.' They added an extra cruelty by placing me in a ward with married women caring for their babies. This was a torture that I could not escape. <sup>92</sup>

3.73 Submitters recounted that not having had the opportunity to see their babies, many mothers were then requested to sign a consent to adoption.

### **Consent**

- 3.74 This inquiry is about forced adoption. As such, most of this section on women's experiences of consent to adoption relates to some element of force. The committee heard accounts from women who gave consent without being advised of their options, who gave consent under duress, who revoked consent and were not given their baby, and in some cases, who reported not giving consent at all.
- 3.75 Some submitters recounted giving consent to adoption because the resistance from their families and wider society was too great to resist:

I was 18 years old but I think my emotional maturity level was about 14 years old. I did what all the other girls did in my situation. I will feel forever sad and sorry that I didn't have the gumption or strength of character to be able to stand up for myself and my daughter. This is how you felt. You were so bad, so troublesome, so undeserving. What would a frightened, downtrodden and shamed young girl have to offer her child, where would she start? I could not fight my family or the society's values at that time. I was also emotionally distressed that my relationship had also broken up in such awful circumstances. 93

<sup>90</sup> Ms Judith Hendriksen, *Committee Hansard*, 1 April 2011, p. 9.

<sup>91</sup> June Smith, Committee Hansard, 20 April 2011, p. 34.

<sup>92</sup> Ms Robyn Cohen, Submission 91, p. 3.

<sup>93</sup> Name withheld, Submission 404, p. 2.

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It was 1977 I was only 15 years old, a child myself when I let them take my son away. I was not sure, not capable and certainly not in command of the situation, I had experienced the pain of birth both physically and mentally in a naïve and cruel way, two months before the due date. I had no pre natal class, no idea or understanding of what to expect or what was to happen when I went into labour. My memory of this experience is rather minimal, surrendering to a situation I was never to have control of.<sup>94</sup>

3.76 The committee also heard from mothers who gave consent to adoption because they believed there was no other option.

### Informed consent

3.77 Many submissions to this inquiry noted that consent to adoption was given in the context of a complete lack of alternative information. The committee heard from a number of mothers who were not advised of their entitlements, such as their entitlement to revoke consent, or their entitlement to access welfare payments.

I have spoken to hundreds over the years and I have never met one natural mother who lost a child through adoption who was given any alternative other than adoption or who mentioned the financial support. I literally have had contact with hundreds myself. Some I have never met but have had contact with.<sup>95</sup>

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The majority were not told, a fact that was known to the almoners and social workers of the times, was that there was a Special Benefit to apply for, that was available to assist a mother to bring up her child. 96

3.78 Other submitters recount not being told the contents or effect of the form that they were signing. Ms Susan Treweek explained that at the time of her child's birth, she was unable to read, and was not told the form in front of her was a consent to adoption:

The midwife came to me while I was being stitched up and handed me papers. They knew that I could not read. They handed me the papers and said I must sign the registration of birth. <sup>97</sup>

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The following week I had a visit at my place of work from the child welfare officer...and he told me that my child had tonsillitis and asked me to sign consent papers so she could have an operation when it became necessary, I

Name withheld, Submission 340, p. 1.

<sup>95</sup> Ms Judith Hendriksen, *Committee Hansard*, 1 April 2011, p. 9.

<sup>96</sup> Ms Barbara Maison, Submission 14, p. 1.

<sup>97</sup> Ms Susan Treweek, *Committee Hansard*, 27 April 2011, p. 45.

was soon to find out that the papers I had signed were to make my child a ward of the state I had been tricked by the child welfare officer, and once again he at no time gave me any idea that I had options available to help me. <sup>98</sup>

3.79 Another submitter recounted that the consent form was placed under another form so as to hide its contents from her:

On the fifth day, I needed to sign a piece of paper giving permission for a blood test for my daughter. The paper was folded and underneath two signatures were required. The underneath piece of paper was a relinquishment form. <sup>99</sup>

3.80 The previous section noted that drugs were administered to women following the birth of their baby. Many submitters explained to the committee that at the time their consent form was signed, they remained under the effect of analgesic or sleep inducing medication:

And until I accessed my hospital records for my period of confinement at the hospital, I was not aware that the adoption marketeers obtained my consent for adoption within 3 days of my confinement rather than the statutory 5 days prescribed in the legislation. I also learnt that my signature was obtained shortly after I had been given some potent analgesia which makes a complete mockery of any concept of informed consent. <sup>100</sup>

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Because you are in such a distressed state—you have been drugged up and you do not know what is going on—you are virtually brainwashed or a prisoner that has been tortured, and you signed. 101

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With four powerful people surrounding me and in my very distressed, drugged, emotional state, I agreed to give my child his 'better life'. At no time was I told that there was financial assistance to keep my child, or told that there was a time period in which I could still get my baby back. <sup>102</sup>

3.81 In some cases of the parents of mothers may have been deliberately misinformed.

In 1983...I then spoke to my mother about it for the first time since 1968 and I was shocked at what she told me. She said she had a call from a woman from the department and she had told her that as much as I wanted to keep my baby, it was not possible, because I was not 16 it was illegal for

<sup>98</sup> Mrs Glenys Campbell, Submission 249, p. 2.

<sup>99</sup> Ms Christen Coralive, *Committee Hansard*, 26 October 2011, p. 9.

<sup>100</sup> Mrs Hannah Spanswick, Submission 2, p. 2.

<sup>101</sup> Ms Linda Bryant, Origins Queensland Inc., Committee Hansard, 27 April 2011, p. 46.

<sup>102</sup> Ms Margaret Nonas, Submission 1, p. 3.

me to keep my baby and that she had to come down to the hospital on the Wednesday to sign, because I was only 15, they required her signature as well. She could not understand why she didn't sign anything and why they let her sit in the waiting room for hours. <sup>103</sup>

3.82 While some submitters were not informed about options other than adoption, others were more overtly pressured into signing consent forms.

#### Consent under duress

3.83 Many submitters recounted the extreme pressure they were placed under in hospital to give consent to adoption.

The social worker had never forgiven me for 'tricking' her, as she called it, in the hospital, and she kept saying that it was only a matter of time before I went to court. I told her that I had changed my mind, and that I was going to keep my baby. She slapped me across the face and said that I had made life very hard for her because she had a lovely couple lined up for my daughter. She went on to tell me that she would get my baby in the end, but that I should be ashamed because I had stopped her from being adopted by the best 'parents' since my baby was no longer a newborn and, therefore, not as attractive to prospective adoptive parents...

Her physical abuse of me was carried out in front of the policewoman who did absolutely nothing about her actions. <sup>104</sup>

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The social worker from the Catholic Adoption Agency came to visit me 3½ days after my son was born to sign the papers. I understand the legal requirement was 5 days. I was miserable with the 'baby blues' and alone and the social worker reiterated to me the wonderful couple waiting for him and followed this with my shortcomings. I was made to feel I was in no way good enough to care for my own child and he would have a much better life without me. I had made a mistake and this is how I should make up for it. No other representatives were present to support me – just the social worker and I. The biggest regret of my life is that she bullied and brain washed me into signing that paper. 29 years later and I still cannot fully take in how it happened.

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My third son was born in May 1970 at Crown Street in Sydney...

Everybody just seemed to want to get their claws into you: Oh, she's an easy target.' This was written on my papers when I received them 28 years later, by a social worker who had known me for about three months of my life:

<sup>103</sup> Mrs Janette Lord, Submission 29, pp 2–3.

<sup>104</sup> Ms Janice Konstantinidis, Submission 90, p. 11.

Name withheld, Submission 313, p. 2.

This is her third confinement and there have been no lasting relationships with any of the Birth Fathers, she is a girl of average to low average intelligence. She seems a sad and directionless girl, lacking ability to make close associations. <sup>106</sup>

3.84 The committee heard that people whose role it was to take consent did so in a coercive manner and without a discussion of any other options:

She did not warn me of 'dire future regret' if adoption is being considered. She withheld information about alternative options or available government assistance. Her menacing and aggressive manner escalated until she achieved her goal of forcing me to sign the form. The adoption consent was not voluntary or informed. 107

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I was led into this room and, to be honest, I cannot remember. I know I signed the consent because that is my signature, but I do not remember much. I just remember that I was crying a lot. I was absolutely distraught. This man was very angry at me. ... He said, 'I'm sick of coming up here, girlie. You sign this consent now.' 108

3.85 Ms Janice Konstantinidis told of being harassed by social workers on a daily basis while she was still in intensive care due to complications following the birth of her daughter.

During my stay in hospital, I had daily visits from social workers who bullied me about my refusal to sign the adoption papers that they brought with them each time. These visits tired and upset me. I had no idea about my rights. In fact, I probably did not know what the word meant. I knew nothing of the laws that regarded me as a minor, or my rights as it related to adoption. When all was said and done, I was in no state to sign any documents, even if I wanted to. I was stressed beyond comprehension. I was given Valium to help to control my anxiety so that the doctors could get my blood pressure under control. 109

3.86 A common theme that emerged in many submitters' accounts was the assertion of consent takers that adoption was in the best interests of the child:

Many mothers were advised that the way to demonstrate that caring was to allow an adoption to take place. 110

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The emphasis was always on adoption being what was 'best for the child'—'if you love your baby then you will give it up for adoption'. 111

<sup>106</sup> Ms Carmel Ipock, ARMS Western Australia, Committee Hansard, 1 April 2011, p. 48.

<sup>107</sup> Ms Rosemary Harbison, Submission 92, p. 1.

<sup>108</sup> Ms Linda Bryant, Origins Queensland Inc., Committee Hansard, 27 April 2011, p. 46.

<sup>109</sup> Ms Janice Konstantinidis, Submission 90, p. 9.

<sup>110</sup> Ms Evelyn Robinson, *Committee Hansard*, 26 October 2011, p. 13.

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I was told that if I loved my child the best option was to give him up for adoption because, number one, I was unmarried, I could not provide for him and give him the life that he needed. I thought that if I kept him then I did not love him. 112

3.87 The advice that adoption was in the best interests of the child was often accompanied by advice that a married couple deserved a child and would give the child a better future:

[A]ccording to her there were many nice, deserving *married* couples who, by some tragedy of nature were unable to have a child of their own. Luckily for me, one of these couples would deign to accept my baby, bring it up as their own and give it all the benefits of a 'proper' family life. My future child would be eternally grateful to me for providing him/her with this wonderful opportunity and would have a far better life than I could ever hope to provide...she painted a rosy picture of the adoption procedure by which my child would be matched as closely as possible with one of these hypothetical couples. Then, through my unselfish and loving act, they would all be miraculously transformed into the perfect family unit. 113

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On the fourth morning I said to my doctor that I wanted to keep my baby, he left the room and returned with the matron, the head sister and another woman, who carried paperwork. I was told I was selfish to want to keep my child, if I loved him I would want him to have two parents and a better life than I could give him. <sup>114</sup>

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During the period of my maternity in 1963 I was indoctrinated with the advice that if I loved my baby I would give it to a married couple. 115

3.88 Another threat reported by submitters was that if mothers did not consent to their baby's adoption, the child would become a state ward:

My baby was pulled from my arms screaming and taken away. I was told I was a useless mother who could not even feed her child. A few hours later the hospital administrator returned and again applied the threats and intimidation to get consent to adopt out my son and I refused. When all attempts to get my signature for adoption failed, the hospital administrator told me that since I was a homeless girl my baby would be taken by child

- 111 Ms Ann Allpike, Submission 157, p. 1.
- 112 Mrs Lisa McDonald, Adoption Research and Counselling Service, *Committee Hansard*, 1 April 2011, pp 29–30.
- 113 Ms Jacalin Sherman, Submission 74, p. 1.
- 114 Ms Margaret Nonas, Submission 1, p. 3.
- 115 Mrs Elizabeth Edwards, Submission 124, p. 2.

welfare and placed into an institution if I did not agree to have him adopted. 116

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She abused her position of authority to intimidate me, stating that I was 'unfit' and had no right to raise 'the child.' She threatened that if I did not sign, 'the child' would become a Ward of the State.<sup>117</sup>

3.89 Some mothers remember being restricted from seeing their babies and informed that they could do so after they signed adoption papers. This promise was then met to varying degrees:

On the fifth day I was called into a back office to sign papers. When I refused to sign I was told that if I signed I would be able to see my son and hold him. After I signed that offer was taken off the table. I was then told that I was too young, there was no help and that I would be a bad mother and my baby would never forgive me. 118

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The papers were signed illegally within four or five days of the birth. I was refused access, the usual story. In fact, they got me to sign by saying I could see the baby as long as I signed the papers. So I was allowed to see her. I was shut in a cupboard where there was no chair. It is a strange feeling to stand in a dark place holding a baby. You just stand there and think, 'What am I doing?' It is weird. 119

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I was bullied and refused the right to even see my little girl until I had signed the adoption papers. Even after the trauma of having to sign my baby over to strangers, I was only permitted to see her from a distance of about six feet. 120

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During this time in hospital I was prevented from seeing my son until I had signed the adoption consent. Then I was allowed to see him through glass for a brief moment. 121

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The government-paid social workers refused us any access to our babies until adoption consent forms had been signed. I refused to sign. 122

- 116 Ms Kate Howarth, Committee Hansard, 29 April 2011, p. 58.
- 117 Ms Rosemary Harbison, Submission 92, p. 1.
- 118 Ms Linda Ngata, Submission 17, p. 1.
- 119 Ms Lynne Devine, ARMS Western Australia, *Committee Hansard*, 1 April 2011, pp 45–46.
- 120 Ms Margaret Whalan, Submission 16, p. 2.
- 121 Ms Darelle Duncan, Submission 192, p. 2.
- 122 Ms Patricia Large, Adoption Loss Adult Support, Committee Hansard, 27 April 2011, p. 27.

3.90 Pressure to consent to adoption extended even to situations in which the parents of the mother supported her keeping her baby:

After much discussion with my parents, they agreed to support my decision not to put my child up for adoption. Nothing more was said about the subject. On the Thursday, 3rd of October, 1968 my son was born, as I was keeping him, he was placed in my arms. I bottle fed him, kissed and cuddled him and spoke to him about our lives together and was counting the days when we could go home. On the Monday a woman from Department of Children Services came in to see another girl in the ward, she noticed me, went outside and came back a little while later and spoke to me about adoption, I told her, 'my son is not up for adoption' she said, 'well, we will see about that, and that she was going to ring my mother', I told her, 'my mother supports my decision', she then left.

On Wednesday, 9<sup>th</sup> October she returned and took me into a room and badgered me for hours...she went on and on and got very angry with me as I would not sign. <sup>123</sup>

3.91 Mrs Lisa McDonald explained that she had the full support of her parents, but that both she and her parents were pressured into agreeing to her son's adoption:

[W]hat had happened was that my parents had come to the hospital and had tried to go up to the nurses and into the ward where the babies were kept to see if they could get their grandson and bring him to me. What I did not know was that my parents were escorted out of the hospital by security staff and told that, if they came back, they would be arrested. I asked my mum why she never told me any of this, and she said she simply did not want to hurt me.

I will make this clear: my parents did not want me to give my son up for adoption. The social workers told my parents they had no right to the child whatsoever. Back then, because of my family's working class background, you did not really argue with any government authority. If you did not have the money for a lawyer you simply did not know your legal rights. So my parents were also manipulated by the system, which preyed upon that part of my not having a very good open communication with my parents. When my mum said that they would keep him and raise him and would give him back to me when I was ready, they were told that they were being selfish because that would rob me of my teenage years. I was told that if I took up my parents' offer then I was being selfish because they had already raised their child. 124

3.92 Some women, due to a combination of circumstances, such as personal connections with hospital staff, successfully maintained custody of their children.

<sup>123</sup> Mrs Janette Lord, Submission 29, pp 2–3.

<sup>124</sup> Mrs Lisa McDonald, Adoption Research and Counselling Service, *Committee Hansard*, 1 April 2011, pp 29–30.

Nevertheless, Ms Coralive explained that that the pressure for her to consent to adoption continued all the way to the exit of the hospital:

A week later I attended the Royal Women's Hospital, with a \$2 plastic gold ring on, mumbling about how my partner was interstate and would be back soon. That didn't fool them. They tried all their tactics. As soon as my daughter was born she was separated from me. I was drugged. I came to the next morning in a ward. The other mothers were brought their children. When my baby didn't appear I started making lots of very loud noises. A bit of coincidence kicked in, then. One of the sisters had grown up in the same small community as me and she ensured that my daughter was brought to me. For five days I was subjected to an enormous amount of pressure. I left the hospital the next day. They carried my daughter all the way to the exit. At the last minute the sister handed me my daughter and said, 'Happy April Fools' Day!' It was 1 April. My daughter is a very successful woman today and the mother of my two granddaughters.<sup>125</sup>

3.93 In the course of her doctoral research, Ms Christine Cole interviewed two mothers who were able to keep their children due to family support:

I found that in the case of two who participated. They both had the support of their parents, but immediately after the birth they were injected with stilboestrol and it was only because the grandparents came in and absolutely went bananas in the hospital and threatened legal action that they were able to get their grandchildren out of the hospital with their daughters. <sup>126</sup>

3.94 Dr Trevor Jordan, of Jigsaw Queensland, supported this idea that parental support was a factor in mothers' ability to leave the maternity hospital with their babies:

Those that did not come within that influence were those who already had strong family or financial support or circumstances were such that they were not under duress to relinquish their child. 127

3.95 However, as indicated from some of the above accounts, the committee was also made aware of many cases in which mothers experienced their children being removed from them despite parental support. As Ms Brenda Coughlin explained:

I pay tribute to my Dad who died in my arms months after the birth of my daughter. My dad never recovered from the grief, pain and suffering he and I endured following the loss of his first granddaughter. <sup>128</sup>

<sup>125</sup> Ms Christen Coralive, *Committee Hansard*, 26 October 2011, pp 9, 11.

<sup>126</sup> Ms Christine Cole, Apology Alliance, *Committee Hansard*, 1 April 2011, p. 41.

<sup>127</sup> Dr Trevor Jordan, Jigsaw Queensland Inc., Committee Hansard, 27 April 2011, p. 57.

<sup>128</sup> Ms Brenda Coughlin, Submission 19, p. 3.

3.96 Ms Coughlin's submission also noted that many mothers who unwillingly consented to their child's adoption in the 1950s–60s were unaware of their right to revoke consent. 129

# Revocation of consent

3.97 Prior to the development of model adoption legislation in the 1960s, in every jurisdiction apart from Victoria, consent could be revoked at any point before the adoption order was made. Victoria introduced a 30 day revocation period for consent in 1958, and the other states and territories did so between 1965 and 1968. However, the committee heard from many submitters that mothers were not made aware of their ability to revoke consent.

I did not know at that time that I was the legal guardian of our child. I could have revoked that consent had I known there was an option! But we were never told and never knew for nearly 40 years. The lies of omission that came from those who were there to help those in need!<sup>131</sup>

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I would never have given up my child. I said I had changed my mind the following day after signing, but as soon as the matron said, 'You've signed,' she just took the baby away and never said a word to me. Also, from 1962 on, we were granted £7 2s 6d, an unmarried mothers benefit here in Western Australia. I have never found a mother who was ever told about it. 132

3.98 Ms Christine Cole explained that married mothers were given information about how consent could be revoked, whereas she had received completely different treatment:

In 1969, three months after I had my baby taken—drugged to the eyeballs, with pillows on my face, held down by three nurses—this same woman had had an affair; she was by this time married. She had an affair while the husband was in Vietnam. She was given a pamphlet on how to revoke the consent, while she was still pregnant, in case she decided to relinquish, because the husband did not want to accept somebody else's child... <sup>133</sup>

3.99 Many submitters reported that their 'legal rights' were not explained to them at the time consent to adoption was requested of them:

131 Ms Barbara Maison, Submission14, pp 3-4.

<sup>129</sup> Ms Brenda Coughlin, Submission 19, pp 96–97.

<sup>130</sup> See Chapters 7–8.

<sup>132</sup> Ms Shirley (Esme) Moulds, ARMS Western Australia, *Committee Hansard*, 1 April 2011, p. 52.

<sup>133</sup> Ms Christine Cole, Apology Alliance, *Committee Hansard*, 29 April 2011, pp 39–40.

Consent to my adoption was given without information of my legal rights. I gave birth to my child [in] September 1974 at Royal Prince Alfred Hospital Sydney. 134

In NSW in 1974, mothers had a legal entitlement to revoke consent within 30 days.

3.100 Even when mothers were aware of their right to revoke consent, some received misinformation about their child's whereabouts:

After being in hospital for a week I assumed I had 30 days to change your mind so I went to Family Service [...] Hobart and they told me my baby was already adopted out to a family. Recently I received the adoption papers that state he was not adopted out straight away and was in a foster home for a number of months. <sup>135</sup>

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His grandfather told him that a week after he had been born he went back to the orphanage to get him and was told that it was too late, he had already gone. I think that is a fairly common story, where relatives or the actual mother went back to get their children and were told they had gone—before the 30 days was even up. 136

3.101 The committee heard accounts of women who were informed of the 30 day revocation period, but told incorrect information about its application:

Finally she told me that I could not take my child home with me as I could not prove to the department that I could support him and that if I signed I would have 30 days to find a job, then I could take him home, I then signed...

I returned to the ward and asked for my baby but they gave me a sedative instead, I don't remember the next two days and I don't remember the bus trip home.

A few weeks later I found a job on a property as a nanny and they were quite happy for me to have my baby there and supplied me with a room with a sleep-out to act as a nursery. Now all was set, I had met all the requirements, and I was well within the 30 days. I rang the hospital and told them I was coming to get my son and if they could make the necessary arrangements for his return. I was informed that I had misunderstood that I only had 30 days if they had not found suitable adoptive parents and that I was too late. <sup>137</sup>

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<sup>134</sup> Ms Janette Mills, Submission 60, p. 1.

<sup>135</sup> Ms Janet Kaye, Submission 51, p. 1.

<sup>136</sup> Ms Aleisha Woodward, Committee Hansard, 27 April 2011, p. 66.

<sup>137</sup> Mrs Janette Lord, Submission 29, pp 2–3.

3.102 Many submitters described not being aware of their right to revoke consent to an adoption. However, others explained that they had never signed a consent form in the first instance.

### Illegal removal of children

3.103 Some submitters explained to the committee that no consent form existed in relation to their child's adoption:

When my son went, I was given a hospital release form. I signed that and waited all day to take my son home—it was a Friday—and they said, 'He's already gone for adoption; you'll have to go to the department.'

When I went to the department on the Monday, they would not admit that they had seen my son or known anything about my case. They had no paperwork, and they knew nothing.

I went to the police, and the policeman and said to me, 'Go back to the hospital, get some form of paperwork to say you've had a baby and come back.' I went to the hospital, and the hospital denied I had ever been a patient at their hospital...I spent that whole month after my son went desperately trying to prove that I had had a baby. <sup>138</sup>

3.104 In a related manner, other submitters recounted being given false information about where their baby was by social workers:

The social worker told me that [Ms Konstantinidis' baby] was no longer at the house in Lansdowne Crescent and that there was nothing that I could do about it. She told me that she was sorry, but that my father had gone over her head and had threatened them all with court action.

I screamed at her and ran all the way to Lansdowne Crescent to the house where I had last seen [...]. I went to the door of the house. The woman to whom I had handed [...] days earlier told me that the baby had been taken away by her adoptive parents. I said that I did not believe her because I could hear crying. I tried to get past her, but she stopped me and said that I must leave or she would call the police. I left. 139

3.105 The committee heard allegations that signatures on consent forms were forged. Ms Cassandra Cooke believes her signature was falsified, and has sought advice from handwriting experts:

When I had my child, in '62, the child was not legally adopted. The signature was a forgery. She was at Scarba [Welfare House] at the time; we put her there for a short period after I came out of hospital. I had three handwriting reports that proved that it is definitely a forgery.

<sup>138</sup> Ms Patricia Large, Adoption Loss Adult Support, Committee Hansard, 27 April 2011, p. 32.

<sup>139</sup> Ms Janice Konstantinidis, Submission 90, p. 14.

They changed the signature down the bottom from 1964 to 1962 and then realised that it was not signed. When they did put through the adoption two years later they changed it, and the handwriting expert picked that up. 140

### Rapid adoption

3.106 The committee was alerted to instances of 'rapid adoption'. This generally referred to the process whereby a married woman whose child had been stillborn was offered a child for adoption in its place. He committee heard evidence that a corollary of this practice was that some single mothers were informed that their baby had died, when in fact the child had been taken for a 'rapid adoption' process:

I was staying in waiting at Crown St Hospital I come into labour. They gave me needle and drug me up in the labour ward, the next minute I didn't know where I were, I woke up at a place which was for unmarried women at Lady Wakehurst...

[They] gave me some more drug and told me I have given birth to a still-born, I was so drugged up I couldn't remember having a baby. I stay at Lady Wakehurst a week and sister told me I had to sign this form to be discharged, which I sign...

Years later this boy who was a man age 29 years of age knock on my door, he ask me was my name Valerie Wenberg I said yes, well he told me I had a baby at Crown St Hospital that he was my son.<sup>141</sup>

3.107 The committee heard Ms Leonie Pope's account of the experience of her mother taking her for inoculations, only to be later informed she had died:

She was told, 'I'm sorry but your baby is now dead.' When she asked for my body to be returned to her she was told that I had already been disposed of. The truth of it was that I was actually in that hospital and I remained there for six months before I was later moved on to a children's home on the north side of Brisbane.

I was later fostered to a member of staff who was working in that hospital. She became my adopted mother and had actually nursed me while I was in the hospital. 142

3.108 Evidence given to the committee suggested that this practice extended to the swapping of babies, whereby the parents of a recently stillborn child—not having intended to adopt—were offered (or given) a substitute baby to replace their own dead infant:

The doctor told women that their babies had died at birth, he was swapping birth certificates and mother's names...'We'll just swap them'. This was a big

<sup>140</sup> Ms Cassandra Cooke (assisted by Ms Christine Cole), Apology Alliance Australia, *Committee Hansard*, 29 April 2011, p. 40.

<sup>141</sup> Ms Valerie Linlow, Submission 15, pp 1–2.

<sup>142</sup> Ms Leonie Pope, Stolen Generations Alliance Inc., Committee Hansard, 27 April 2011, p. 23.

practice that went on at Vaucluse Private. It went on constantly at Vaucluse Private. 143

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I found out much later that they had two adoptive parents lined up (a woman [who] had given birth to [a stillborn] son in the same hospital...) and Ngala also had adoptive parents lined up, so there was this tug of war over my daughter. Ngala thought my daughter should be taken back there and the nuns were insisting 'the child' was to stay there. 144

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There are other odd things where very clearly a private doctor in a private hospital was caring for a married woman. One instance sticks in my mind where she had had a number of still births. At the same time he was also caring for a mother who was in the babies home—not in the babies home, the mother was staying in the receiving home. So he arranged for the baby of the single mother to be given to the married woman who had had a number of still births. I imagine that was not an adoption. That was not anything; that was just a substitution. That is in the record. I just happened to find that one day when I was looking for something else. 145

3.109 Many submitters to the inquiry explained that they had no choice at all in relation to their child's adoption. This lack of choice was particularly apparent in the submissions from mothers who became pregnant in circumstances such as while a ward of the state.

#### Mothers in different circumstances

3.110 The committee heard from some mothers whose personal situations were quite different from others who contributed to the inquiry. These include mothers who were in foster or institutional care and mothers whose forced adoption experiences were more recent.

Mothers in foster or institutional care themselves

3.111 Some mothers who submitted to the inquiry were in foster care themselves, wards of the state or otherwise institutionalised at the time of their pregnancies. These mothers experienced particular pressure to have their children adopted:

At the age of 16 years old I fell pregnant and still being under the state care was put into the Salvation Army Boothville [Mothers' Hospital]...

I was allowed to see her and nurse her when I could because of this I was sure they knew I wanted to keep her, but it wasn't to be. Early January 1963 they told me to go into this small room where they brought my baby girl, I

<sup>143</sup> Mrs Pru Murphy, Committee Hansard, 20 April 2011, pp 124–125.

<sup>144</sup> Ms Marilyn Murphy, Submission 150, p. 4.

<sup>145</sup> Ms Jenny Glare, MacKillop Family Services, *Committee Hansard*, 20 April 2011, pp 81–82.

had named her [...] they said I had to say goodbye to her. I couldn't believe it. I begged and cried for them not to take her away from me, and I do not remember signing a paper to say I was giving her up. I cried for days but no one seemed to care. I had no one to defend or stand up for me, this was just so wrong and have never been able to trust people even to this day. 146

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I did 10 years out at the Goodna mental asylum...

They gave me ECT right up until I was 5½ months pregnant. They tried to force the Royal Brisbane Hospital to abort my son at five months. The letter that came back from the hospital said that they would not take part in this...

I was taken back to the institution where I was again placed in the maximum security ward with no access to a phone or the outside world. I kept asking to see my son and what had happened to him, if he was all right. I was constantly told he was fine...

When you are in a mental institution, an asylum, you have no rights at all. How can these people accept a mother's signature on an adoption form when the mothers do not even have the right to vote or to sign legal documents?

A number of months later when I kept asking, I was told that I would never see him again and that he had been adopted out; I could not be a mother because I had been institutionalised far too long and would not be let out. 147

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We also have worked with a number of women whose children have been earmarked for removal at birth—women who themselves have grown up in foster care, often in very disruptive foster care arrangements. They have been in many, many foster placements, have themselves become pregnant and had their child earmarked for removal at birth, perpetuating that terrible disruption of attachment. That mother never has a good life, and the children similarly face a number of challenges. 148

3.112 One adopted person described how her mother had been forced to give her up for adoption because she had physical disabilities:

I was born at the Salvation Army Home in West Hobart...My mother was deaf and dumb and was told at my birth that I had died. My mother's sister told me this, the reason was that she was taken advantage of at an approximate age of 25, her parents did not want to help look after me so shortly after I was born they sent my mother in to an Institution...where she resided for nearly fifty years, it was there that I found her during her latter years and my husband and I were able to do a lot for her, she had had no

147 Ms Susan Treweek, *Committee Hansard*, 27 April 2011, pp 45–46.

148 Ms Kathryn Rendell, National Council for Single Mothers and their Children, *Committee Hansard*, 26 October 2011, p. 21.

<sup>146</sup> Ms Fay Roberts, Submission 382, pp 1, 3.

visitors in all that time and was a capable person, she was allowed to visit the township of New Norfolk and also helped with housework. She should never have been put there but in those days that is what they did with people who...had slight disabilities.

One day on one of my visits to her, she pretended she had a baby in her arms and was rocking, then she pointed to me and pointed to the sky. I knew what she was asking me and I shook my head and pointed back to me, she burst into tears and was sobbing and hugged and hugged me. It was a very emotional moment, she must have wondered all those years what really happened. <sup>149</sup>

3.113 Unmarried mothers who also had a disability or mental illness were doubly disadvantaged—and may continue to experience that disadvantage. The committee is concerned about the forced adoption of children of these women, many of whom may not have had the opportunity to submit to this inquiry. The committee notes that safeguarding the reproductive choices of women such as these, including the choice to have and keep a child, remains a policy issue of continuing concern.

#### More recent accounts

3.114 The committee received a submission from a small number of mothers whose children were adopted in the 1980s:

No-one told me. They told me that there was nothing available, that I would have to get a job and that, if I did give it to my parents, I was putting financial pressure on my parents as well. I signed it and then my son was put up for adoption....

If I had been called up before a judge and that judge had said, 'Did you make this under any duress?' my answer would have been yes...

I was 15 [in 1981]. I was never told my rights. I never had any legal representation. 150

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In 1987 I lost my son through the royal women's hospital. ... I think that the way they get babies now—and they got my baby—is through more subtle and legally clever ways....

My son was taken out of the room to be cleaned. When he was returned I asked for my son to be passed to me so I could hold him. They did not comply. My son was sucking and I told the nurse that I wanted to breastfeed my son and I asked her to pass my son to me. She then argued with me and told me it was not a good idea....When I went to see my son, who was in another nursery, my access was obstructed by a nurse arguing

Name withheld, Submission 344, p. 1.

<sup>150</sup> Mrs Lisa McDonald, Adoption Research and Counselling Service, *Committee Hansard*, 1 April 2011, pp 33–34.

that she would give her two children up for adoption because they were not worth it and that they were a trap. <sup>151</sup>

3.115 The number of adoptions declined rapidly through the 1970s, but the practice was still more common in the 1980s than it is today. The committee was advised of a New South Wales Health Commission circular issued in 1982, which warned health employees that preventing a mother from seeing her child upon request could be a breach of the state's adoption laws. The fact that it was believed necessary to issue such a directive in 1982 suggests that hospital practices were still not always fully compliant with laws that were by this time seventeen years old.

#### Conclusion

3.116 This chapter has recounted the experiences of submitters to the inquiry during pregnancy and birth. It has described the way in which unmarried pregnant women were disempowered both in maternity homes and in the community. It has recounted their experiences at hospital giving birth and receiving different treatment from married mothers. It has also explained the pressure on unmarried mothers to have their children adopted, and the way in which consent to adoption was taken (or not taken). The next chapter will address what happened next: the experiences of adopted people, and the ongoing effects of forced adoption on the lives of adopted people and their natural mothers, fathers and other family members.

<sup>151</sup> Ms Kim Taylor, *Committee Hansard*, 29 April 2011, p. 67.

<sup>152</sup> Origins SPSA Inc., Supplementary submission 170 (k), p. 111.