

CHAPTER 6

LIFE LONG IMPACT OF OUT OF HOME CARE

"It is impossible to give to someone what you have never had yourself"

Today I had a fight with my stepson and tried to throttle and head butt him as this is the only way I know how to react. He calls me a loser because I never held a job for very long or couldn't get one. I've finally realised he is right because at the age of 48 I am a reformed alcoholic and drug addict, a violent person (physically and mentally) who can't hold a job, has no friends and has already had a trial separation from his second wife because she couldn't deal with the constant arguing and agro. I lived in my 18-year-old car for three months because I had no money because I don't know how to deal with it. And have an intense hate for this society and its religions and a constant thoughts of suicide. The only reason I am still alive is because Jesus has claimed me and he won't let me have revenge on this society. I hate more than anyone could understand and the most frustrating part is that I have such a great amount of love to give away but I can't deal with the world long enough to give it.

This is my legacy from the North Coast Children's Home [Lismore]. (Sub 201)

6.1 The long-term impacts of a childhood spent in institutional care are complex and varied. In some cases, children were already suffering from life in a dysfunctional family. However the outcomes for those who have left care have, in the main, often been significantly negative and destructive. The following provides an overview of outcomes as presented to the Committee from the experiences of those who provided evidence during the inquiry.

6.2 A fundamental, ongoing issue of being raised in care that was constantly raised in evidence related to the lack of trust and security, through lack of life and interpersonal skills that are acquired through a normal family upbringing, especially social and parenting skills. Reference was constantly made to the skills required to survive in an institutional setting being quite different and inappropriate for normal social interaction in the outside world. The issue was put simply:

How do you know how to be a parent if you have never been parented?
How do you know love, if you have never been loved? How do you know how a normal family functions if you have never been in one? These handicaps have been far more pervasive and devastating to my life than the experience of being sexually abused. (Sub 214)

6.3 It is imperative to recognise and acknowledge the magnitude of contemporary social problems which are the long term effects stemming from the past experiences of fear, intimidation, humiliation and abuse endured by the care leaver as a child.

6.4 Submissions refer frequently to a range of legacies including low self-esteem, lack of confidence, depression, fear and distrust, anger, shame, guilt, obsessiveness,

social anxieties, phobias, recurring nightmares, tension, migraines and speech difficulties. Many who suffered in institutions could not cope with life in the 'real' world and have had life-long alcohol and drug problems or ended in the mental health or prison systems. Many have difficulties forming and maintaining trust in relationships, or have remained loners and never married. Some care leavers with emotional problems have contemplated or taken the ultimate step of suicide. Others have survived.

No person can come out of these experiences unscathed and many of the former 'girls' from the home have had horrible lives. I saw more than one as Street Walkers and was told about attempts at suicide and destructive relationships. Others have learned to rely on alcohol and more recently other drugs. None have had 'normal' relationships where they realised their potential both emotionally and intellectually. (Sub 311)

The consequences are not only limited to me. My wife and two daughters have to put up with my problems as well and their lives are affected by my behaviour. I am currently on an anti depressant in order to help me cope with the trauma I suffer daily as a consequence of my treatment. I suffer from post traumatic stress disorder which manifests itself in a disorder known as dissociation. I suffer depression, anxiety, antisocial attitudes, and nightmares, fear of people, lack of confidence, lack of social skills and a lack of identity. I have undergone counselling for much of my adult life just so I could cope with living day to day. I cannot hold a job for long; I cannot form friendships and have been unable to complete the several educational courses I have started over the last thirty years. I am currently in such a state that I rarely leave the house for fear of my reaction to any stimuli. (Sub 20)

Quality of life

6.5 Those who have left care point to many aspects of their lives that are the dark legacy of their time in care. Many have carried with them the stigma of having been in a home.

When I left the home I felt the stigma of being raised as a state ward, I felt lost and isolated. I didn't admit to being a state ward for many years and would avoid questions relating to my family and make up a story to appear "normal". (Sub 33)

6.6 First and foremost was the stigma of being unwanted by their parents and being seen as second rate citizens for being in a home. This was often reinforced by carers who denigrated parents and humiliated and tormented children. Children in homes were made to feel degraded and of less worth than others.

6.7 Often the denigration continued into school life. Home children were segregated at school: they often wore ill-fitting, second hand clothes, and were seen as 'being different' to their peers. They went to school together, ate together and rarely if ever had friends who weren't in the home with them. The stigma of homes has often

had an enduring impact on the life of a care leaver particularly leading to feelings of low self-esteem and self-worth.

6.8 The outcome of serious abuse, assaults and deprivation suffered by many care leavers has had a complex, serious and negative impact on their lives. At the most extreme, care leavers have lived a half life tainted by alienation, isolation and degradation.

I feel it altered my aspect on life, I know it made me more anxious, submissive and nervous and I let people intimidate me. I feel as if my spirit had been broken, and it has taken many many years to get my life into some sort of order. (Sub 236)

My life has been extremely hard, due I believe, to the treatment meted out to me whilst I was in the care of the Salvation Army. I am still trying to come to terms with it, I am now on a disability pension, my health is deteriorating, I have had bypass surgery, suffer with anxiety, depression and obsessive-compulsive disorder. I have also had ongoing counselling throughout the years and am still having counselling to this day. I have had several broken marriages and relationships, find it extremely hard to trust other people and am a loner. I believe that I am a survivor despite what happened to me as a child. (Sub 231)

The experience at Parramatta Girls' Home has caused me a lifetime of depression, low self-esteem, lack of confidence, the inability to trust people, and fear of authority, particularly the police and social services. But worse than any of this, my fear of living in Australia forced me to live apart from my mother. I have not lived in Australia since 1971. I lost my desire to live in my own country, because it let me down so badly. (Sub 284)

I struggle with the magnitude at which these institutions' aftermath has rippled through our society, presenting various consequences. It is as if our past has no bearing on our future and therefore, doesn't exist. The memories are part of our surviving; with knowledge we try and understand how to walk forward. We have survived in a world of judgment with little margin for error. (Sub 314)

As an adult I have been in psychiatric hospitals with anxiety attacks for years off and on. I had a drinking problem and I had a drug problem. I didn't know love. I wasn't able to receive love on any level. I couldn't cry. I was frightened inside all the time as someone was going to hurt me. I never knew why, I thought I was mad. I am 54 now and it was only three weeks ago that I realised it is not me. It is the consequences of childhood. (Sub 394)

There is a sense for me that I have no 'legitimacy', and where beginning life in an institution, where you are fed, watered and bathed, is the overwhelming legacy of that experience, that is what is so hard to live with. That sort of 'bedrock' is just not enough to develop that crucial sense of self we all need to carry ourselves through life with any success. (Sub 418)

Relationship problems

6.9 The most profound impact of institutional care that has flowed into adult life is the difficulty in initiating and maintaining stable, loving relationships. Without a nurturing environment, with too few, or no, adults to give love and affection, many care leavers were unable to develop the skills needed to build mature adult relationships once they had left the institution behind.

One of the things that we miss out on – we might get our daily bread – is developing relationship skills that are so necessary for building the future. We miss out on developing defence mechanisms, being strong enough as an individual to be able to cope with the knocks and bumps that you receive when you are in a relationship.¹

6.10 Many care leavers described multiple relationships and failed marriages. For some, the first relationship formed after leaving the institution was grasped at as a means of finding love, affection and support. Unfortunately, often this only resulted in a failed marriage as the partnership was entered into for the wrong reasons.

When I was released from Parramatta I did what I had been accused of doing and immediately fell pregnant, drifted into a loveless violent marriage. (Sub 263)

6.11 Relationships were often characterised as a desperate search for love – 'I had never been really loved and that was the most important thing for me'. Many reported physically and emotionally abusive relationships and marriages which were tolerated 'because it was more important for me to have someone than no one'.

6.12 In so many instances a fundamental reason behind relationship problems and family difficulties is an inability to demonstrate or express emotion physically or verbally, a direct result of the lack of love, affection and nurturing as a developing child.

I don't know how to show my family, especially my own children how I feel about them. I can't put my arms around them and tell them I love them...and most of my married life I can't stand being touched. (Sub 107)

In my relationships I struggle with trust and choosing non-abusive partners, and I still have a feeling of low self-esteem, and have struggles with depression. (Sub 8)

I am unable to maintain a relationship with a man. I could never understand why with both my marriages to good kind caring men I fell into the worst depressions and had to leave for my sanity. (Sub 351)

I have never married I would liked to have but feel embarrassed as I still blame myself with what had happened to me. I still have to leave the light on in my house every night time. I have flash backs seven days a week three hundred and sixty five days a year of the people performing sexual

1 *Committee Hansard* 12.3.04, p.89.

activates on me and I still blame myself for allowing this to happen. Even so I was only a child. (Sub 106)

I thank the system for denying me the feeling of love, for the inability to either give or accept it and for the hurt this has caused to anyone close to me. (Sub 320)

6.13 Those who suffered sexual assault especially struggle with relationships – 'the incident left me with a real fear of men and problems having sex, even with my husband...This barrier is still with me to this day'.

Parenting skills

6.14 One of the most disturbing aspects of this inquiry is the impact on the ability of care leavers to successfully parent and raise families. The denial of role models and the experience of a loving, nurturing family life has resulted in many care leavers being ineffective parents. Inadequate parenting skills are compounded by a lack of trust and self-worth and living with the impact of childhood experiences and this has often led to family breakdowns and alienation from children.²

The thing that really saddens me is the impact that my depression and anxiety, post traumatic stress disorder, life long inadequacy, low self esteem, and trust and fear issues, have had on my children and husband. I have learned to accept the impact this has all had on my own life, but when it starts to affect the ones I hold close to my heart, I am left to feel extreme guilt for something that is totally out of my control and most of all is not my fault. It is extremely difficult for somebody like me to trust anybody other than myself to look after my children. Hence this puts us as a family unit in isolation adding extra stresses. (Sub 98)

6.15 A commonly raised issue was the inability to get close to children and show love and affection. Some care leavers described an almost opposite situation where their children have been smothered and spoilt as a reaction to ensuring that they have everything that the parent was deprived of as a child.

I find I have immense problems today with parenting. Not only am I utterly bereft of experience from which to guide my parenting, I find it difficult to give my children affection, nurturing and positive reinforcement of the people they are becoming. (Sub 28)

I married young had 2 children. The marriage didn't last, was it because of my background? Without doubt it would have contributed to it. *I knew so little of what family life should be like*, I know I was incapable of trust I longed for love but was unable to accept it or know how to give it. I worry what insecurities I have inflicted on my kids. *Have I damaged them with my inability to reveal myself even to them? That fear of rejection never leaves.* I feel they have suffered by never knowing maternal grandparents/aunts/uncles/cousins. (Sub 258)

2 See also *Submission 67*, p.7 (AIFS).

I was unable to spend the time with my family while my children were growing up. This meant I never got very close to them, because I never received any affection while growing up in institutions, I found it hard to return affection to my family. One day they may understand what I went through. (Sub 319)

Then at the age of 36, I met my wife...We married in 1982 and had two baby girls within two years. As I was unemployed for 5 years after we married, and although it was tough, I was able to spend a lot of time with my daughters. I was determined they weren't going to miss out like I did – I spoilt them rotten...Dorothy and the girls have been the making of me. For the first time I experienced happiness. Without them I think I would be dead now, either through alcoholism or a successful suicide. (Sub 181)

In raising my kids, I made sure they got a good education. I had felt frustrated all my life about not being educated properly and I was damned if my kids were going to suffer the same way. (Conf Sub 44)

6.16 The Committee was also privileged to get a perspective of life living with a care leaver from families which reinforced the point that the issues for care leavers flow through to their partners, families, children and grandchildren.

Perspective from wives and partners

6.17 Wives and partners provided the Committee with an insight into the lives of care leavers. Often they have had to cope with a partner who lacks trust, is profoundly angry, suffers from low self-esteem and is unable to cope with many day-to-day events.

A lot of people think that because my husband has been able to sustain our relationship and have a family, that he has been able to get on with his life. The truth is that it has been a very stormy and hard relationship to maintain, and the only reason I have stayed is because I love my husband and I have seen a side of him that is not visible to other people...[my husband] is a very complex person and through helping him to write his letter, I have come to understand why he is the way he is...No one sees the emotional roller coaster my husband goes through everyday, and it tears at my heart knowing what I now know. (Sub 372)

I feel I can comment on how it is to live with someone who was in institutional care during the formative years of his childhood...He is constantly anxious about almost everything is often depressed...He has a very negative approach to life and seems to lack self-esteem, is a great worrier, and a perfectionist. He can be controlling and tends to be suspicious...He is very 'house-proud' – he has to make the bed promptly every morning...He is fanatical and obsessive about cleanliness and tidiness...He also finds it very difficult to 'reach out' to people and seems unable to show compassion for others...He is reluctant to mix and socialise generally and enjoys being at home, pottering around the house and garden and watching television...it is very difficult to speak about personal matters...He seems cold and impersonal and it is almost impossible to get close to him or to discuss personal problems with him (Sub 231, enclosure)

Its hard being the partner some wont stay in the relationship they just cant because they just don't understand, where they are coming from...I have got him off the booze and drugs, but I can never fix his broken heart and the hurt inside and I don't think any one of us can for any one of these people. We can just be there they need love support someone to care for them. Someone who will trust in them as a person and don't ever judge them. (Sub 338)

Perspective from children

6.18 Evidence from children of care leavers was particularly moving and while many older children now understand why their parents acted as they did, some experienced many difficulties growing up with a parent who had been in care.

Growing up as a child is hard enough as it is but when you have a parent that has been exposed to so much evil, torture, both physical and mental abuse your life is that much harder. My mother was more than over protective to the point it became suffocating, I wasn't allowed to play after school, and on weekends it was rare that I could socialize with my friends, there were no sleepovers or the usual things kids would do, my weekends were spent cleaning, cooking and doing household chores... I used to say to her "this is not a military camp were kids mum"...there was hardly ever any affection, any time I would go to hug her or just put my arm around her she would push me away. I think that hurt me the most cause I could never understand why she was like that (at this stage I didn't know what had happened to her). It wasn't till my mid teens that my mum started to open up and tell us the horror stories at Lynwood hall.

I started to realize that everything that she was doing was just a reflection of her childhood. She didn't know any better, she was raised in an institution where there were rules, regulations punishment and solitary confinement. Even though she had told us about Lynwood things didn't really change because it was embedded in her so deep that she is unable to change...(Sub 261)

I met the 'girls' [mum] grew up with many years later...I needed to understand mum's story more, in order for me to forgive her for the abandonment I felt. The fellow orphans had followed similar paths of abusive relationships, menial labour, alcohol and other drug abuse and mental health problems...One woman told me she had been raped and only forty years later, the child who had been adopted out made contact with.

I hadn't been there, but through my mum's blood line I felt their story in my bones. When they talked about their children, I understood what their lives must have been like, and just how difficult it is to break free of the negative impacts of being the offspring of wards of the state. (Sub 195)

At sixteen I was forced to leave home, because my mother had become an alcoholic, which I believe was her way of coping with the psychological effects of her tortuous experience at the Home. Although I loved and admired her in so many ways, especially for being a survivor of a brutal childhood, I knew if I wanted to survive emotionally, stay at school, pursue a healthy 'normal' lifestyle I had to do it on my own. This was very

traumatic for me and my two younger sisters who were later 'kicked' out on their sixteenth birthday. It was over the housework not being done properly. The last straw was forgetting to empty the bin. This was typical of the rage and frustration which mum had inflicted upon her during her childhood by the unmerciful nuns. Fortunately, she was restrained when it came to thinking up the more sadistic punishments the nuns metered out. Mum didn't have very good parenting responses to teenage girls – because she herself hadn't been allowed to develop through constant abuse by the nuns that she was the 'bastard scum of the earth' and only fit for domestic labour, so we too were discouraged from rising above our station. (Sub 195)

But when you think about it dad was brought up in a home to and terrible things must of happen to him for the things that he did to us. (Sub 315)

Generational issues

6.19 The difficulties with establishing and maintaining relationships, the inability for many to provide secure and stable family environments for raising children, feelings of shame and fear of rejection about their childhood history can become cyclical. Each new generation, lacking a sense of security and parental role models, is unable to provide these vitally necessary foundations for the next generation.

I became a state ward at the age of about seven. I never saw any workers. I was never told; I was just made a state ward. I am the third generation in care; I reared the fourth.³

The other thing I want to say is that institutionalisation has a multigenerational effect. My mother was institutionalised with the Sisters of Mercy. My father was in one of those institutions where they worked on a farm, and he was horrendously abused. My daughter is the first in three generations to stay with her mum. It has been a constant struggle for me, and she will have effects and does have effects. She is 21, and I am beginning to see the effects of having a parent like me.⁴

[My children] all have had drug problems from time to time with one son being in constant incarceration...My children would not have so many hang ups & certainly my grandson would not be living with my husband & I because of failed relationships had I had a secure & protected environment with positive people around me. (Sub 341)

We all are dealing with our own mental health problems triggered by our experiences with a mother who was emotionally distant, abusive, alcoholic and full of rage against church and the state. One sister tried to commit suicide, and got into illegal drug abuse to escape the emotional pain and the stress of surviving on her own...My other sister shows signs of repeating the same patterns as mum in the mixed messages of her parenting, and her gambling addiction which has ruined her marriage and other relationships. (Sub 195)

3 *Committee Hansard* 11.11.03, p.63.

4 *Committee Hansard* 11.11.03, p.51.

It is the consequences of failing lives that should concern everyone, taxpayers, economists, academics, the justice system, health and medical professionals, law-enforcement, politicians, because of the inter-generational nature of outcomes for many who suffer this fate. It is a problem that has impacted on my own children, an outcome already complicated by separation, and relationship breakdown. It is an outcome that left one reduced to living in an old caravan for close to 20 years, and surviving on a disability pension. A social out-cast. (Sub 401)

They stole our childhood, they stole our lives. My children are scarred through me.⁵

On-going health issues

6.20 The health status of many care leavers is especially disturbing. Evidence was received of general physical, psychological and dental health problems through to severe mental health issues of depression and post traumatic stress disorder. The consequences of lifestyle for many since leaving care such as drug and alcohol addictions, homelessness, unemployment, unsafe sex practices and other destructive behaviours have also had a damaging impact on their health. For some, they carry the legacy of injuries suffered through the abuse they received as a child.

The health care needs of those of us who remain as survivors of this infamous institution are overwhelming. The majority of our people suffer from varying degrees of mental illness...Post-Traumatic Stress Disorder appears to be one thing we all have in common. Depression and anxiety related illnesses such as panic attacks and sleep disorders are common as are some phobic disorders. Poor anger management skills and violent outbursts are a feature of the social and emotional problems experienced by our people. The men especially have largely been unable to address the issues relating to their anger and this is often displayed in their relationships. Hence a high incidence of domestic violence...

The general health status of the Wilson survivors is also frightening. We have some cases of HIV, many are Hep C positive. Those issues coupled with long-term drug and/or alcohol abuse has in some cases created irreparable damage. (Sub 58)

6.21 Many care leavers reported that they are suffering physical health problems or disabilities as a result of being assaulted in the institutions or through lack of medical attention received in their childhood. Ongoing hearing problems and hearing loss were commented upon by many care leavers who attributed their condition to being 'boxed' around the ears or having their head bashed against sinks, walls or each other.

He grabbed a huge hunk of wood, and used that hunk of wood to strike me across my back several times until he dropped the wood. He then grabbed me by the back of my pants and the scruff of my shirt, held me above his head and threw me against the brick wall of the shower block...[My

5 *Committee Hansard* 4.2.03, p.57.

specialist] said [the back injury] must have happened when you were young because your disc has continued to grow and a section of that disc had been severed and it's a lot smaller, (that's how he knew it was an injury done at a very young age). The injury obviously related to the flogging (Salvation Army, Box Hill – Sup Sub 296)

My Health. I have only 13 teeth in my mouth, I would like to get me teeth fixed but I can't afford them on a pension. I have a hearing problem which I believe came about due to getting a huge whack on my right ear by Brother Miller, I dropped to the floor and blood was coming out of my ear. It's very hard to hear anyone who comes on my right side. I have had trouble going to the Doctor's to get any help for myself, as I am frightened of doctor's. (Sub 283)

I never received any medical treatment all the time I was at Neerkol... I still suffer today, 40 years later, extreme pain and limitations of movement in both of my shoulders as a result of 2 separate accidents that I suffered whilst in state care and for which I received no medical attention for either. (Sub 217)

Once, because I hid my sister and refused to tell them where she was, I received 44 cuts across my legs. The pain always got worse and I have suffered ever since. We were never taken to a doctor. To date I have had four operations on my left leg and suffer pain because of these injuries. I have to live with this. (Scarba House – Sub 95)

Post traumatic stress disorder and depression

6.22 Mental health issues, depression and post traumatic stress disorder are commonly experienced by care leavers. These issues can manifest themselves in a variety of behaviours and actions that affect their everyday life. The ultimate expression of this problem referred to in many submissions is post traumatic stress disorder. Many care leavers who have suffered PTSD have required psychiatric care.

All my life I have carried guilt and felt ashamed because of what has happened. Being told that I was ugly, black and unwanted has left me with one big hang-up. People sat on their backsides while children were being physically, sexually and emotionally abused. I still suffer with extreme anxiety and stress. The nightmares have eased now, but every now and then I have a flashback about the orphanage and a wave of nausea hits me – the feeling of wanting to vomit is really strong and usually I do. The Doctors tell me this is post-traumatic stress disorder. (Sub 172)

We lived in constant fear. To this day I still have that fear. I have had counselling over the years, I have also had many visits to a psychiatrist which has helped for the time being, but the fear and anxiety returns. I am on treatment for Post Traumatic Stress Disorder. (Sub 101)

My Mum...spent years in Psychiatric Institutions due to the atrocious physical and mental abuse that herself and sister endured for many years at the cruel hands of the "so called carers" at the Salvation Army childrens home at Camberwell. Mum told me of many cruel and inhumane things that happened to herself and her sister. (Sub 267)

Suicide

6.23 A large number of people described holding suicidal thoughts or actually attempting suicide – 'the thing that scared me the most was how unexpected it was. I just decided to do it'. The emotional situations exacerbated by feelings of social isolation and unresolved anger so tragically described in many submissions were epitomised by the following:

I had had a number of traumatic episodes where I had undergone severe bouts of depression, anxiety, loneliness, physical and mental health problems caused by feelings of not belonging and separation trauma. The stress of feeling the "aleness" impacted upon me and the compounded feeling of anger, low self esteem and despair led to try to commit suicide on two occasions. (Sub 142)

I grew up believing that it was best to forget and to just accept that I was a bad person who was no good for anything but destroying lives that these things had happened to me as a punishment from god. Over the years I had tried to kill myself numerous times, but something deep inside me kept calling out for justice, for what I did not really understand until now...I can now understand why I have always felt this way, I am not at fault, the nuns are, I am not evil or spawn of the devil either. (Sub 5)

6.24 In addition to personally held suicidal feelings, there was anecdotal evidence provided of an abnormally large percentage of suicides among care leavers. A great many reported knowing first hand or having been told of the suicide of friends or of those who had been in the same institution.

Substance abuse – drug and alcohol addictions

6.25 As can be seen by many of the comments in this chapter, resorting to drugs, both licit and illicit, and alcohol was a common practice to obliterate the past and present pain and suffering. These destructive behaviours were often undertaken in conjunction with other negative behaviours.

I do not know where my brothers went except that it was to another home for boys. My brothers will not discuss this issue at all. One has since died as a result of a drug overdose. Each of my four brothers struggled with drug addiction...none has had a successful marital relationship. (Sub 412)

When I escaped [at 16] I was a dead set drug addict and my time at Goodna and Karrala had made me so. I did not know how to function without drugs. I really did not know how to do too much of anything as I was convinced that I was stupid, ignorant and ugly and that no one would ever want me or love me and that I would die in the gutter. These people who were suppose to care for me had done their job well and finally convinced me that I was worthless. I ended up living on the streets and was on a path of self-destruction. (Conf Sub 3)

Compulsive and other behavioural issues

6.26 A range of compulsive behaviours were described in evidence. Behaviours included compulsive cleaning, bedmaking and general tidiness and obsessive hygiene, including showering and bathing and water use.

The children at the school my children went to used to line up of a Friday night outside the house. I designed the home in Queens Park in Bondi Junction so that I could empty it out – except for the bedrooms, which were carpeted – every Saturday. I would empty out the whole house into the back patio area and soap it all up inside. I had quarry tiles wall to wall and even around the wall so that the children could come in, soap it all up and slide through my house. Then we would hose it out. It is pitiful, really, but we laugh about that now.⁶

In later years, aged 30 or so, I found I could no longer cope emotionally and psychologically. I was placed in to intensive Psychiatric Treatment...I was treated for compulsive obsessive water fetish and other obsessive behaviours and disorders...and Clinical Depression and [am] a chronic migraine sufferer, all stemmed from anger, resentment, fear, guilt, and shame. (Sub 203)

6.27 Other witnesses described their obsessions with food.

There was never enough food. I used to always offer to do the dishes so that I could scrape the pots and eat the scraps. I still scrape the pots today and it drives my wife and daughters crazy!! (Sub 181)

I was and still am a slow eater and fussy as so many things remind me of those times. (Sub 151)

6.28 Behavioural issues were raised by people that directly relate to the treatment they received while in care as a child. These include insomnia, being light sleepers, suffering nightmares involving childhood incidents and waking in cold sweats, fear of the dark, needing to leave lights on at night, not closing or locking doors, being afraid to say 'no', being compliant with anything asked, overeating, anorexia, or other bizarre patterns of eating or drinking.

Ongoing problems with anger, grief, identity and self-esteem

6.29 Deep feelings of anger are strongly held by care leavers. An underlying sense of anger was evident in the contributions of many care leavers at the public hearings, especially in Brisbane. For many this sense of anger seems to strengthen with age, as feelings of abandonment, and of being absolutely and totally alone in their life are intensified with the passing of the years.

They taught me bitterness, hatred, an abiding repugnance for their brand of religion, distrust and suspicion of most adults, contempt for authority in all its forms and intolerance of others. I gained an inheritance of moral

6 *Committee Hansard* 3.2.04, p.15.

confusion, abiding anger, psychological scars and a determination to never again allow anyone to treat me as they had; no matter what. Hence I carried for many years a 'chip on my shoulder' of incredible proportions. It almost bore me down. (Sub 11)

While I have survived extreme deprivation I am left with deep emotional scars. I have a sense of abandonment, exploitation and not belonging. I have undergone a period of therapy to address many of the issues but feel it impossible to fully recover from my experiences. (Sub 166, p.6)

I left Hillside uneducated and illiterate. I had few social skills and felt I was a social misfit...The attitudes and lessons I learnt as a ward of the state handicapped me for life. I got into trouble with the law. I have been convicted of theft and assault. The memories of the torment and fear I experienced as a child resulted in drug abuse, depression and suicide attempts...Today I have to deal with the consequences of my upbringing as a ward of the state. I have a criminal record which cannot be undone. I have had a drug problem and have had to seek counselling and support to address this. I no longer drink or take drugs to suppress my early memories, which are all the more painful as a result. I have had to unlearn my violent and aggressive behaviour, through counselling, anger management courses and life skills training.⁷

6.30 Many people became and remain 'loners', commenting that they preferred to remain as anonymous as possible because of being so damaged during their childhood. This has had a powerful impact: from people becoming housebound who dread simply going outside to do routine activities such as shopping, to people choosing to live in small, isolated communities.

My marriage failed, I have no communication with three of my children, I live on my own and have become a real loner. I don't trust people and I don't let many people near me. I have a wall around myself. (Sub 336)

My Life has been terrible, I've been lonely all my life until I was 62 years old...I get very angry when something goes wrong in my life, I fly off the handle quickly and don't know how to handle my feelings of anger. I've never been in a relationship, cos I didn't know how to go about it. I have never married. I have trouble trusting people, I don't let people get close to me. (Sub 283)

Growing up without learning the basic life skills, love and kindness i feel breeds non functional, anti social, angry law breaking people. i feel the church should have screened these people much more carefully. i now am 47 years old and am a hermit. i find it hard to communicate and get very anxious at times or with other people. i constantly see counsellors and have learned some life skills and that i am just as important as anyone else. i still feel angry at the things i had to go through growing up in the home as a state ward. (Sub 229)

My experience in Pallister Girls Home left indelible markings on me to this very day. I am still a loner. I still feel unworthy to be anybody's friend because I still feel I am not good enough for people...To this very day, when anybody does anything kind towards me or for me, I burst into tears because I do not believe that I am a good person. (Conf Sub 143)

I also suffer from panic attacks and agoraphobia during the days. I don't go out unless I have to. I don't go to restaurants, theatres, large shopping complexes or any other places where there are large numbers or groups of people. (Sub 217)

Each Christmas, Easter and birthday, I am reminded that I am a State Ward. At Christmas, I lock myself away and cry because I have no-one to share it with, not even a family. I have been doing that as long as I can remember. (Conf Sub 58)

Yes, most of us like to be very isolated. It is something that I cannot really explain. I live in a little town which would be lucky to have 50 people, yet four of us came out of institutions.⁸

6.31 Powerful feelings of guilt and shame were regularly expressed emotions by care leavers.

It has taken me **50 years** to be able to say I am a former state ward. From age 15 I did everything in my power to hide my past. *I carried (still do) such guilt & shame I was told nearly every day of my life I was worthless unlovable, I believed it.* I suffered physical/sexual & emotional abuse. Because of this harsh early treatment I feel my life has been a huge struggle. (Sub 258)

Having a beginning such as mine also means I fear 'exposure', I guess from the sense of shame I carry...I sat in front of a woman [at a CLAN meeting] who seemed to carry the same mortal fear as me – and she put it so succinctly – "I just want to be invisible" is what she said. I owned that. It's so hard to live every day with that as an overriding principal in your life. (Sub 418)

6.32 While a feeling of guilt was regularly expressed, a particular issue was an ongoing sense of guilt over the lack of protection of younger siblings. An oldest child would see it as their responsibility to look after younger brothers and sisters after being separated from parents. Just how the deprivations and treatment experienced in many institutions could possibly be the fault or responsibility of a young child is totally unimaginable. Yet for some this issue has had a profound affect.

When Mum's sister would come to visit mum she would have "flash backs" to her time in the home thus worrying that she hadn't protected her sister enough. Each time she would have another breakdown. (Sub 267)

Eventually my mother remarried and my stepfather [paid to get us out]...After that episode my brother's attitude changed, I have no idea what

happened to him on his side of the home which we never really talked about to this day. I use to be able to look out for him but in that home [SA Bexley] I was powerless. (Sub 382)

6.33 A related emotion was a sense of blame directed towards parents for not wanting and deserting their children and also among younger siblings for events which were totally beyond their older sibling's control.

I was about five, he was about three and I wouldn't let his hand go. One day the staff came along and said your brother has to go to the dentist and you can't come. I let go of his hand and they took him. That was the last time I saw him until he was about fourteen. I tracked him down but he hated me. He blamed me because they took him away. This is the consequence of the child welfare system. This is how they treated you in these days. My brother now a mature aged man, still hates me because I let them take him away all those years ago in Bidura. I am not able to get through to him that I was a little girl and had no control over the situation. (Sub 394)

6.34 For many people the traumas of a childhood in care did not appreciably resurface and have their fullest impact until mid-life. Experiences had been suppressed, but memories were reawakened, often triggered by related events. Flashbacks and vivid recollections of events from childhood grow stronger with age.

Until 2000 I was ok, I could hide my memories and live quite normally. Then the darkness returned, and I am now quite sick with post traumatic stress and severe social anxiety. I live on the edge of suicide and remember all the fears and shame I have accumulated over the years.

It took me 23 years to start dealing with this, the past finally reared its ugly head and tormented me to the point that I was a danger not only to myself but to society. (Sub 161)

My sister turned to abusive partners; drugs and prostitution, the same fears and darkness enveloped her. She never had the chance to find some hope; She was dying from her childhood, just waiting for the end. (Sub 278)

6.35 At least one reassuring aspect of the inquiry was the positive stories that emerged of people who with a great deal of help, assistance and understanding are now able to better come to terms with their past and live fuller and more fruitful lives. Some are blessed with the experience of happy, fulfilling marriages due in large part to the fortune of finding loving, caring, patient and understanding partners and gaining strength and support from their children. This still involves a lot of work from all parties, often with the use of much counselling.

I often wonder if I hadn't married Warren, how would my life have turned out. He has encouraged me all my adult life. He has loved me through all the emotional turmoil, supported me financially and emotionally when I have wanted to find my family members. I have been truly blessed in my adult life. Warren has provided me with the love, stability and encouraged a sense of humour. (Sub 33)

6.36 Those who have triumphed see themselves as survivors. Unfortunately, not all care leavers can do so.

I could have ended up just another statistic, but I am alive, I am capable of love, friendship, a profession, I have survived. (Sub 239)

We are living proof. Some of us became survivors but it wasn't an easy road coming from hell and back (Sub 309)

These notes have only recalled a few of the abuses meted out on some unfortunate little Australian children, citizens of the future of our country. I am a survivor, but I know some are not. (Sub 409)

When I did go to school I was there in body but not in soul. My constant abuse was so severe and my trauma so great it was like I was not there at all. I spent a lot of time in my own safe little world where I did learn the most important lesson in life – survival. (Sub 94)

I have had a lot to overcome from my childhood, but have become a strong person. To survive, I had no other choice. (Sub 185)

I used to feel so alone, like I didn't belong. But I survived, but not without emotional scars (Sub 186)

Employment

6.37 Employment for many care leavers has been difficult due to lack of education and the personality traits that have been carried through life. Often care leavers are limited to seeking unskilled and low paying jobs.

Eventually I got work. And during the following 20 or so years I have held down a number of jobs ranging from storeman, console operator, and security and sales assistant. I am now working as a bus cleaner. (Sub 142)

6.38 There is often a fear of participating in the recruitment process as many remember the harsh words and attitudes of carers: 'You'll never amount to anything.'

There is also a hell of a lot of fear in the workplace that comes from childhood, when we were punished if we were not perfect. The stigma attached to being a former resident has a significant impact on securing employment. For example, you try to better yourself, so you go along and apply for a job. They give you a form to fill in. Bang! There it is. It jumps out at you and belts you between the ears. It asks: 'What is your educational standard?' You just walk away. You do not even bother applying. There never were any resources to aid job hunting. That has had a very big effect on all of our people, for which this state stands accused.⁹

6.39 Many care leavers reported a lifetime of financial hardship having low-paid and menial jobs, of an inability to hold down regular employment or being unable to secure work and being unemployable. In some instances, the institutions only thought

9 *Committee Hansard* 12.3.04, p.10 (HAN).

that care leavers were suitable for untrained jobs such as domestic staff or farm labourers and did not encourage children to reach their full potential.

To date I can't hold down a permanent job. I need a casual job because I have flashbacks. Some are so severe I have to go home...Some days it's one flashback of horror, others it's moment by moment of hundreds of feelings, emotions, thoughts...These days are the worst, especially because I'm working and I have to work because I can't afford to lose my job because I have to survive. (Sub 246, p.19)

Since leaving school I've had over 50 jobs, the longest lasting 2 years, this was my last position as manager of a Caravan Park. (Sub 291)

When a lot of the kids left the orphanages, especially the kids who were wards of the state, as I think they were called, they were shipped out to farms, so you never, ever saw them again. That happened to me. I ended up on a farm, living in a little tin shed and working as slave labour.¹⁰

6.40 For some, employment difficulties and financial hardship has led to struggles with social security who they consider do not understand their circumstances.

I have always had low paid jobs and have no such things as superannuation or a home. I am on a pension, a disability pension as a by-product of how I was treated as a child. Last year I had a battle with social security, they tried to take my pension off me. They told me I could go back to work. Go back to work with my anxiety attacks and everything that goes with it. Like my withdrawals and my suicidal tendencies. I have an ongoing struggle with social security. (Sub 394)

6.41 Many care leavers found reassurance by returning to an institutional life through joining the military services.

I stayed in the air force for 4 years. There were lots of good times. I took to the discipline and institutional life like a duck to water. (Sub 182)

I eventually became institutionalised as all my life I've had to be in some sort of institution, i.e. the R.A.A.F or the army. I was at a loss when on my own. (Conf Sub 6)

6.42 For many who held regular employment the effects of their childhood background was forever present.

I escaped into my nursing career. There I was a social cripple I avoided social events as much as possible. I had few if any life skills. My self esteem was low, I felt less than, inadequate, I could hardly look at people let alone communicate, I felt that people would find out how inept I was. I had a great fear of judgements and criticism. I had a fear of public places and couldn't for example go into a bank or a library. I felt comfortable with the sick however the sicker and more vulnerable they were the more comfortable I was. I have worked in oncology for many years, hidden away

on night duty. I was so vulnerable myself and felt a connection with their vulnerability. I would do anything for them and felt my worth only when they thanked me for whatever I did, not for being me. (Sub 192)

Homelessness and other housing problems

6.43 Housing is a major concern for many care leavers whose lives have been a continual financial struggle. Many have been forced to live in public housing, subsidised rental accommodation or living on the street.

After I left the Homes, I used to drink alcohol in order to forget the Homes I was in. I was trying to block out the pain I was in. During these years I lived in boarding houses, with just a small room, I lived on my own. Today I live in a flat with the Brotherhood of St Laurence at Fitzroy. I have been there 2 years and this is the first home I have had. I don't have to share the toilet or the kitchen with anyone. (Sub 283)

In today's climate, the cost of housing is enormous. What I call normal people out there – people that can have relationships, people that can build futures—in two-income families are finding it a struggle. But for someone like me and my family—and, I am sure, for many other people that have been through the system—the impact of what that system did totally cancels out that avenue for us. I am afraid that there are people—and I am sure there are a lot of other people my age and older who are coming into the later parts of their lives—who are still no closer to having that real home they have never had.¹¹

6.44 The National Inquiry into Homeless Children (the Burdekin Inquiry) found that the 'period of time spent in a child welfare or juvenile justice institution, or otherwise detached by the welfare system from the natural family, seems to increase significantly a child's chances of becoming homeless'. In addition the Inquiry heard that many of the young prostitutes working the streets were or had been state wards. The lack of alternative after-care support following deinstitutionalisation was according to evidence presented to the Inquiry 'directly and substantially contributing to youth homelessness'.¹² The evidence to this Committee 15 years after Burdekin told very similar stories to those reported by Burdekin.

6.45 VANISH also referred to some Victorian research which 'highlighted that a significant number of homeless youth (street people) had been "in care" and were living at risk on the streets of Melbourne. They were cushioning their pain by using drugs, risk taking behaviour and suffered depression and suicide'.¹³

11 *Committee Hansard* 11.11.03, p.69.

12 Human Rights and Equal Opportunity Commission, *Our Homeless Children*, Report of the National Inquiry into Homeless Children, February 1989 (Chairman: Mr Brian Burdekin), pp.109-117.

13 *Submission* 167, p.4 (VANISH) citing 'Streets and Beyond – An Alienated Youth', Alex McDonald (1980s).

Educational attainment

6.46 For many care leavers, the lack of education has been a profound regret and a source of much bitterness. As noted in chapter 4, the causes of poor educational attainment were many. However, for whatever the reason, many care leavers left the institutions with a serious lack of literacy and numeracy skills – which have remained with them throughout life. As noted above this has had a profound affect on many in their ability to obtain and maintain employment.

...in Neerkol the nuns bashed, thrashed and humiliated me. They repeatedly told me they 'couldn't bash brains' into me...then from 13½ I was sent out to work...Because of this I still can't read or write today, I have to have my partner do all my reading, writing or filling out of forms for me Even signing my name is difficult because of the bashings I received to my left hand by the nuns to try and force me to write with my right hand...This lack of education has caused me extreme difficulty over the years and has denied me the opportunity to gain most jobs (Sub 217)

Like many of us older wards of the state, we now find ourselves in a position where many have adult literacy problems, where many of us cannot spell or add up, and some cannot read. (Sub 8)

I was never taught to spell properly. I have always been embarrassed in the fact I am not a good reader and a terrible speller...[my wife] always writes the letters and fills out any forms for me. (Sub 198)

6.47 The Committee heard stories from care leavers who have moved through life by covering, disguising or working around their literacy problems.

I got my [driving] licence by memory and by trying to remember things.

Senator KNOWLES – Can you read road signs?

No, not all. Some I do...I go by memory. If somebody tells me a street, I never forget it and I know that is the street I have to go down.¹⁴

I have failed at education. I cannot spell. I get my wife to do it. If you give me a big word, I will find 50 words to get around it. I have explained that to you. I found that hard. That is why we have always tried self-employment, so that I do not get embarrassed. I have always kept it quiet.¹⁵

I am a very strong businessman. I have been very successful in business. I am illiterate. I cannot read or write. That is a handicap. I work around that. I have good people, over 40 people, who work for me. I bury what has happened.¹⁶

6.48 Remedial and other mature education services are utilised by some care leavers, though there remains a great need. However, for many care leavers accessing

14 *Committee Hansard* 3.2.04, p.52.

15 *Committee Hansard* 13.11.03, p.22.

16 *Committee Hansard* 3.2.04, p.104.

mature age education can be a daunting experience, especially for those who do not have a family network to provide support and assistance. Issues about education services are discussed in chapter 10. The positive benefits flowing from undertaking mature age education were described in a number of submissions.

I am now 43 years old and I have been a mature age student for seven years. The teachers do not regard me as being retarded. I am actively involved in class discussions, which is welcomed by the teachers. This has greatly helped me to adjust and recover from my experiences at Vaughan House and with help from a number of friends I have been able to adjust and live a normal life in society. (Sub 273)

Adult anti-social or criminal activity

6.49 In addition to submissions which provided anecdotal evidence of people being unable to adjust to living 'outside' and resorting to criminal activity, the Committee received a number of first-hand accounts.

In the 'outside world' I found myself completely at a loss. I was unable to behave socially and responsibly, because the rules were different but nobody had told me what they were. Before long I was in trouble with the law and, as predicted by the staff at Westbrook, found myself doing time in adult prisons...I feel that I am entitled to blame the so-called 'care givers' who, by their own actions, had shaped the innocent boy into the troubled young man who was dumped without preparation into a society that was very different to anything he had ever known. (Westbrook – Sub 141)

After that it was institutions right through my life, including three jail sentences before I had even reached 21...Even being in Pentridge at the age of seventeen was bad but no where near as bad as Bayswater. (Sub 148)

I have now tried to come to terms with my life but still have trouble doing so. I constantly end up having instances where I suffer from flashbacks...I just can't get any real treatment in prison. (Sub 105)

6.50 One woman described leaving Parramatta at 18 and within 6-8 weeks being in Long Bay Jail on a 2-year break, enter and steal sentence. Within weeks of release she had travelled to Victoria, re-offended, and been sentenced to 3 years in Fairlea Prison. She commented that:

From the ages 13-23 I had spent only 10 months on the outside. Basically I was still 13-15 years old mentally and emotionally. I had not grown up at all. So with no life skills, no money and no hope I left Fairlea and reentered society. (Sub 304, p.4)

Prostitution

I would rather be a prostitute than be locked up at Parramatta Girls Home.

6.51 It was indicated in evidence that many people who become drug-addicted and/or sex industry workers are survivors of child abuse and neglect. The Historical Abuse Network also stated 'a lot of our people have ended up in the sex industry

because they had no other choices. They had no people skills, no life skills, no education – nothing.¹⁷

With a limited education, my chances of securing employment were low. The employment agency advised me to go back to school, despite me explaining I needed to earn an income, in order to support myself financially. I was told to go back to school anyway, and treated with contempt, as though I had a choice in the matter. Unable to find work, I quickly became desperate. I soon resorted to child street prostitution to supplement my meagre supermarket income. (Conf Sub 24)

I became promiscuous and money was an issue. So men had to pay for my company. After all, that dirt never seemed to wash off! (Conf Sub 146)

...it was the effects of what was created after that too that kept building upon what had been put there with abuse that kept me entrenched in acting out and going from one addiction to another Drugs, Alcohol and substances and then turn myself to prostitution until my body could not stand the treatment I was holding onto and all the emotion I was carrying as a direct result of those days in my childhood. (Sub 386)

Their background is why, in large part, these care leavers value themselves so little as to consider such highly exploitative, and psychologically damaging, 'work' acceptable. Others, who are vulnerable, engage in sex work as a matter of economical survival i.e. educationally disadvantaged, homeless young people. Understanding of these issues is seen as beyond the grasp of 'ordinary Australians', who have led less marginalized lives.

6.52 One care leaver commented that community education is required to raise awareness, and combat community prejudice against sex workers, and those who are drug addicted, in order to assist survivors of these experiences out of the prostitution and drug addiction cycles. Access to education, housing, and employment, is essential for all former protective care clients, if they are ever to make a successful transition from being in care to the next stage of the lifespan. Those who have a history of drug addiction and prostitution are especially needy in this regard; in recognition of the uphill battle they face in terms of community prejudice, in their efforts toward re-integration into mainstream society on all levels.¹⁸

I pretty much glided through life for the next few years drinking heavily with no support. I went from job to job, house to house and at times living on the streets. At 17 I turned to heroin. I so had to numb the pain. I couldn't afford my habit and didn't have the courage to do crime so I turned to prostitution. Please keep in mind I'm 17 still a State Ward and still supposedly under the care of DOC'S...I am now 37 years old and have suffered Post Traumatic Stress Disorder, Borderline Personality Disorder, Adjustment Disorder, Panic Attacks and Depression. I have tried many times from the age of 15 to commit suicide and by the grace of God I am

17 *Committee Hansard* 12.3.04, p.10 (HAN).

18 *Confidential Submission* 24.

still here today. Because of my drug use I now have Hep C and suffer very bad Chronic Fatigue Syndrome. I will be on medication for a long time and will be in counselling for a long time too. I am unable to work and I have no schooling. I accept my role in all this but feel very strongly that not only did my parent's fail me but DOC'S did too. (Sub 332)

Cost to individuals, families and society

Legislation and government policies, themselves born of public sentiment, empowered those whose judgements about the best interests of the children and the worthiness of the parents and family setting, were more often a product of the social climate than any insightful analysis of the potential costs and benefits to be derived from removing children from their families and placing them in alternative care.¹⁹

6.53 The cost to many individuals, families and society of the impact of time spent in institutional care is profound. As described above, the harm done to children while in care has resulted in harmed adults. As adults, care leavers face relationship problems; drug and alcohol abuse; loss of educational and work opportunities; long-term physical and mental health problems; and antisocial and criminal behaviour. This is a significant cost to the individual and a massive long-term social and economic cost for society which may be compounded when badly harmed adults in turn create another generation of harmed children.

Quantifying costs

6.54 The enormous direct social and economic costs of children who have lived in care include: medical care for injuries; medical care for long term effects; mental health care; substance abuse treatment; costs through the criminal justice system; costs of intervention services such as counselling; and social services costs for case workers and shelters.

6.55 The direct and indirect social and economic costs of the impact on children who have lived in care have not been quantified. However, some evidence is available which demonstrates the enormity of the impact. For example, Mr John Murray of the Positive Justice Centre provided an indication of the extent of care leaver involvement in welfare related fields:

...this institutional abuse does not stop when we age out of the system. Once in contact with the juvenile justice system we have a 90 per cent chance of becoming adult criminals. We have a one in three chance of leaving care at 16 as women or girls pregnant or already with a child. We have a one in two chance of being homeless within that first year. Only one in 100 of us will get to university, but one in three of us will have attempted suicide. We are also highly likely to wind up addicted to drugs, engaged in

19 *Submission 347, extract from Who Will Look After the Children? JAS Australia's Public Intellectual Forum, UQP, No.59, p.21.*

prostitution, unemployed, mentally ill or incapable of sustaining loving relationships.²⁰

6.56 In 2003 the Kids First Foundation published a study into the cost of child abuse and neglect in Australia, focussing on the more common characterisations of physical, sexual and emotional abuse and neglect as this terminology is used by the literature and by child protection services. The study characterised the costs under the headings: human cost of those abused, long-term human and social costs, cost of public intervention and cost of community contributions. Long-term human and social costs included mental disability, increased medical service usage, chronic health problems, lost productivity, juvenile delinquency, adult criminality, homelessness, substance abuse and intergenerational transmission of abuse. Public sector intervention involved child protection services including abuse prevention programs, assessment and treatment of abused children, law enforcement and victim support.

6.57 The study estimated the annual cost of child abuse and neglect to the Australian community to be \$4.92 billion. The long-term human cost and the cost of public intervention accounted for around three quarters of the total cost, with the long-term human and social cost estimated at \$1.94 billion per annum.²¹

6.58 The South Australian Department of Human Services estimated the cost of child abuse and neglect in 1995-96 to be \$354 million in that small state with a population of just over 1.5 million. That figure is more than the \$318 million South Australia earned in the same period from wine exports, or the \$239 million from the export of wool and sheepskins.²²

6.59 Care leavers also access health services for counselling, drug and alcohol services, mental health services and in some cases medical services as a result of the effects of physical or sexual abuse. CBERSS outlined research on the use of health care services:

- An American study on health care utilisation in 2000 by women found that women who had experienced childhood sexual abuse incurred an average of \$150 more in primary care charges over a two-year period, and visited primary health care clinics 1.33 times more often than women who had not been sexually abused. Another American study found that women who had been sexually abused as children had significantly higher primary health care costs and more frequent emergency department visits than women without child sexual abuse histories. Both research projects concluded that their findings represented a gross underestimation of the real financial consequences associated with child sexual abuse.

20 *Committee Hansard* 4.2.04, p.30 (Positive Justice Centre).

21 Kids First Foundation, *The Cost of Child Abuse and Neglect in Australia*, 2003. See also *Submission* 305, p.1 (Abused Child Trust).

22 McGurk H, *The Economic Cost of Child Abuse and Neglect in South Australia*, Office of Families and Children and Australian Institute of Family Studies, Adelaide, 1998.

- These findings are consistent with earlier research, which concluded that women who had been sexually abused as children were 2.5 times more likely to seek medical attention and to be hospitalised.
- Research by Moeller and Bachman in 1993 indicated that childhood abuse had adverse consequences for physical health. The greater the incidence of abuse the woman experienced as a child, the greater the likelihood of adult hospitalisations for both illnesses and surgeries.²³

6.60 Other research indicates that women who were sexually abused as children are refusing to have pap smear tests²⁴ while it is estimated that half of the women undergoing drug treatment are victims of childhood sexual assault.²⁵

6.61 Other costs to society occur because of the high numbers of care leavers who enter the justice system. It was stated in evidence that one in five adult prisoners and one in three juvenile prisoners have been in care.²⁶ Sixty-five per cent of women in Victorian prisons were themselves housed in institutions as children. The cycle is perpetuated as many children of women prisoners are made wards of the state while their mothers are imprisoned – 70 per cent of women in Victorian prisons are mothers and largely the sole-carer.²⁷ A study of risk factors for the juvenile justice system found that '91 per cent of the juveniles who had been subject to a care and protection order, as well as a supervised justice order, had progressed to the adult corrections system with 67 per cent having served at least one term of imprisonment'.²⁸

6.62 Those who have been physically or sexually assaulted are also over represented in the prison population with 80 to 85 per cent of women in Australian prisons having been the victims of incest or other forms of abuse.²⁹ Another Australian study of 27 correctional centres in New South Wales found that 65 per cent of male and female prisoners were victims of child sexual and physical assault.³⁰

23 *Submission 49*, p.12 (CBERSS).

24 *Sun-Herald*, 'Victims of sex abuse refusing Pap tests', 16.11.03, p.35.

25 Gil-Rivas V, Fiorentine R & Anglin MD, 'Sexual abuse, physical abuse and post-traumatic stress disorder among women participating in outpatient drug abuse treatment', *Journal of Psychoactive Drugs*, 28(1), 1996, p.95.

26 *Committee Hansard* 4.3.04, p.31 (Positive Justice Centre). See also *Submission 68*, pp. 5-6 (Association of Childrens Welfare Agencies).

27 Colvin K, *The Women and Poverty Report 'More than half - less than equal'*, Victorian Council of Social Services, October 2001, p.15.

28 Lynch L, Buckman MJ & Krenske L, 'Youth Justice: Criminal Trajectories', *Australian Institute of Criminology: trends and issues*, No 265, Sept 2003, p.2.

29 Austeal P, 'Don't talk, don't trust, don't feel', *Alternative Law Journal*, 19(2), 1994, pp.185-89.

30 Butler TB et al, 'Childhood sexual abuse among Australian prisoners', *Venereology*, 14(3), 2001, pp.109-15.

6.63 Although there has been a large volume of research work undertaken on the cost of child abuse, there is a paucity of specific research which provides an overall estimate of the actual cost to society resulting from the negative outcomes of institutional care. The following provides an overview of some of the research on the cost of child abuse:

- It was estimated that the cost in future lost productivity of severely abused children was between US\$658 million and US\$1.3 billion annually, based on the assumption that the children's impairments caused by the abuse would limit their potential earnings by just 5 to 10 per cent (United States General Accounting Office, 1992).³¹
- A study by the Michigan Children's Trust Fund compared the costs of an early intervention program which started prenatally and worked intensively with parents for the first year of a child's life, with the costs incurred when a child is abused. The study showed that, offering early intervention to every family in the state was approximately one-twentieth of the costs associated with abuse.³²
- The United Kingdom National Commission of Inquiry into the Prevention of Child Abuse (1996) estimated that the cost of child protection services and additional mental health and correctional services associated with child abuse and neglect was over 1 billion pounds per year in England and Wales. (Briggs 1995).³³
- Layton cites an American study conducted in 2001 where a conservative estimate concluded US\$94 billion was spent annually in response to child abuse, of which approximately 75% was spent on treating all the long term, indirect effects, including special education, mental and physical health care, juvenile justice, lost productivity and adult criminality. (2003)³⁴

6.64 The indirect costs to society of the harm done to children in care are as large, if not larger, than the direct costs but also unquantified: What has been the cost to the economy of care leavers not fulfilling their potential? What is the cost to the economy of lost productivity? What is the cost of human suffering of the child or of the family? These costs represent a loss to the economy and to society generally. The NSW Commissioner for Children and Young People stated:

Clearly any costs for an individual victim and their family represents an 'opportunity lost' cost for the community. People who may have been more productive in their lives and in their contribution to the community may not

31 *Submission 35*, p.11.

32 *Submission 35*, p.11.

33 *Submission 35*, p.11.

34 *Submission 35*, p.11.

contribute as they would have, because their life's energy is devoted to wrestling with the legacy of their abuse.³⁵

Benefits of providing services

6.65 An aspect of cost saving is argued in the longer term by taking a preventative approach in the present. For example, if counselling and other support services are not provided early for people abused in orphanages and homes, it will cost governments significantly more in the longer term in the way of future treatment in psychiatric institutions, drug and alcohol rehabilitation centres, prisons and other institutions – for this is where many of these untreated people end up.



The days of low self-esteem, of painful memories and nightmares are decreasing. The happy times are beginning to outweigh the sad. The experiences I had in 'care' are forever imprinted in my mind, on my body and in my heart. But I want to finish by saying some things to those who abused me. **You did not win!!!** You never touched the real me. You didn't even know the real me. You never knew that I was a strong and beautiful human being. **You did not crush my spirit and one day you WILL have to face your maker and answer for what you did to me and to too many other precious and beautiful children.**³⁶

35 *Submission 35*, p.11 (NSW Commission for Children and Young People).

36 *Submission 412*, p.7.