



COMMONWEALTH OF AUSTRALIA

# Official Committee Hansard

## SENATE

COMMUNITY AFFAIRS REFERENCES COMMITTEE

**Reference: Children in institutional care**

WEDNESDAY, 12 NOVEMBER 2003

MELBOURNE

BY AUTHORITY OF THE SENATE



## **INTERNET**

The Proof and Official Hansard transcripts of Senate committee hearings, some House of Representatives committee hearings and some joint committee hearings are available on the Internet. Some House of Representatives committees and some joint committees make available only Official Hansard transcripts.

The Internet address is: **<http://www.aph.gov.au/hansard>**

To search the parliamentary database, go to:  
**<http://parlinfoweb.aph.gov.au>**

**SENATE**  
**COMMUNITY AFFAIRS REFERENCES COMMITTEE**

**Wednesday, 12 November 2003**

**Members:** Senator Hutchins (*Chair*), Senator Humphries (*Deputy Chair*), Senators Knowles, Lees, McLucas and Moore

**Substitute members:** Senator Murray for Senator Lees and Senator Tchen for Senator Knowles

**Participating members:** Senators Abetz, Bishop, Carr, Chapman, Coonan, Crossin, Denman, Eggleston, Chris Evans, Faulkner, Ferguson, Ferris, Forshaw, Greig, Harradine, Harris, Knowles, Lightfoot, Ludwig, Mackay, Mason, McGauran, Murphy, Nettle, Payne, Tierney, Watson and Webber

**Senators in attendance:** Senators Humphries, Hutchins, McLucas, Moore and Murray

**Terms of reference for the inquiry:**

To inquire into and report on:

- (a) in relation to any government or non-government institutions, and fostering practices, established or licensed under relevant legislation to provide care and/or education for children:
  - (i) whether any unsafe, improper or unlawful care or treatment of children occurred in these institutions or places,
  - (ii) whether any serious breach of any relevant statutory obligation occurred at any time when children were in care or under protection, and
  - (iii) an estimate of the scale of any unsafe, improper or unlawful care or treatment of children in such institutions or places;
- (b) the extent and impact of the long-term social and economic consequences of child abuse and neglect on individuals, families and Australian society as a whole, and the adequacy of existing remedies and support mechanisms;
- (c) the nature and cause of major changes to professional practices employed in the administration and delivery of care compared with past practice;
- (d) whether there is a need for a formal acknowledgement by Australian governments of the human anguish arising from any abuse and neglect suffered by children while in care;
- (e) in cases where unsafe, improper or unlawful care or treatment of children has occurred, what measures of reparation are required;
- (f) whether statutory or administrative limitations or barriers adversely affect those who wish to pursue claims against perpetrators of abuse previously involved in the care of children; and
- (g) the need for public, social and legal policy to be reviewed to ensure an effective and responsive framework to deal with child abuse matters in relation to:
  - (i) any systemic factors contributing to the occurrences of abuse and/or neglect,
  - (ii) any failure to detect or prevent these occurrences in government and non-government institutions and fostering practices, and reporting mechanisms
  - (iii) any necessary changes required in current policies, practices and reporting mechanisms.

In undertaking this reference, the committee is to direct its inquiries primarily to those affected children who were not covered by the 2001 report *Lost Innocents: Righting the Record*, inquiring into child migrants, and the 1997 report, *Bringing them Home*, inquiring into Aboriginal children.

In undertaking this reference, the committee is not to consider particular cases under the current adjudication of a court, tribunal or administrative body.

In undertaking this reference, the committee is to make witnesses and those who provide submissions aware of the scope of the inquiry, namely:

- (a) explain the respective responsibilities of the Commonwealth and the states and territories in relation to child protection matters; and

- (b) explain the scope of the committee's powers to make recommendations binding upon other jurisdictions in relation to the matters contained in these terms of reference.

## **WITNESSES**

<b>CHAMLEY, Dr Wayne Alfred, Treasurer, Broken Rites Collective, Australia.....</b>	<b>34</b>
<b>CLARE, Ms Coleen, Chief Executive Officer, Children’s Welfare Association of Victoria.....</b>	<b>70</b>
<b>CLEARY, Dr Ray, Chief Executive Officer, Anglicare Victoria .....</b>	<b>61</b>
<b>COLDREY, Dr Barry Michael, (Private capacity).....</b>	<b>1</b>
<b>CUMMINGS, Ms Jennifer Anne, Regional Director, Gippsland, Berry Street Victoria.....</b>	<b>75</b>
<b>GAFFNEY, Ms Kate, (Private capacity) .....</b>	<b>12</b>
<b>GIBSON, Mr Charles Davidson, Social Policy Adviser, UnitingCare Victoria and Tasmania .....</b>	<b>44</b>
<b>GLARE, Ms Jennifer Rosalie, Manager, Heritage and Information Service, MacKillop Family Services .....</b>	<b>25</b>
<b>GORJANICYN, Ms Katrina, Manager, Social Policy, Berry Street Victoria .....</b>	<b>75</b>
<b>GUTHRIE, Mr David, (Private capacity).....</b>	<b>89</b>
<b>HERMANN, Mr Anton, Chief Executive, Australian Council for Children and Youth Organisations .....</b>	<b>48</b>
<b>HONNER, Dr John Roderick, Director, Practice and Policy, MacKillop Family Services .....</b>	<b>25</b>
<b>KEALY, Ms Chris, Regional Manager, Centacare Catholic Family Services .....</b>	<b>54</b>
<b>LARKINS, Mr Kevin Patrick, Chief Executive Officer, Centacare Catholic Family Services .....</b>	<b>54</b>
<b>McINTOSH, Mr Neil Bladd, (Private capacity) .....</b>	<b>12</b>
<b>RAMAN, Mrs Sunitha, Policy Research Manager, Children’s Welfare Association of Victoria.....</b>	<b>70</b>
<b>ROLLASON, Mr Russell, Executive Officer, Anglicare Australia .....</b>	<b>61</b>
<b>YUNCKEN, Ms Mary Rose, Director, Counselling and Family Services, Centacare Catholic Family Services .....</b>	<b>54</b>

**Committee met at 9.11 a.m.****COLDREY, Dr Barry Michael, (Private capacity)**

**CHAIR**—I declare open this public hearing and welcome everyone who is present today. The Senate Community Affairs References Committee is inquiring into children in institutional care. This inquiry addresses a very important issue which touches the lives of many Australians. The committee has received hundreds of individual submissions, both in public and confidentially, as well as a range of submissions from academics, religious, government and non-government organisations, and child welfare agencies, many of whom are represented here today. The committee is grateful for these submissions and the insights they bring on the question of institutional care. I welcome Dr Barry Coldrey. Do you have any comments to make on the capacity in which you appear?

**Dr Coldrey**—I am a private independent researcher and writer in these areas of interest to the Senate inquiry.

**CHAIR**—Thank you. Information on parliamentary privilege and the protection of witnesses and evidence has been provided to you. Is that correct?

**Dr Coldrey**—Yes.

**CHAIR**—The committee prefers evidence to be heard in public, but evidence may also been taken in camera if such evidence is considered by you to be of a confidential nature. The committee has before it your submission and has also received a range of background material, for which we are most grateful. I now invite you to make an opening presentation, to be followed by questions from the committee.

**Dr Coldrey**—I thank the Senate inquiry members for accepting my written submission and inviting me to make an oral presentation. These official Senate committee inquiries are essential to place certain matters of public importance on the national agenda and on the public record to assist in framing child protection policies for the future. While I am a Catholic and a member of a Catholic religious congregation—the Christian Brothers—my comments reflect no official Catholic or Christian Brothers policy and I appear as an independent researcher on topics of interest to the Senate inquiry. Insofar as there is an official Catholic view here, or an official Christian Brothers view, it is probably the one to be delivered by MacKillop Family Services, because the executives of the Christian Brothers drew my attention to the fact that MacKillop Family Services would be speaking for them at least in a general sense—and if not MacKillop Family Services then Centacare, which is a Catholic agency in Victoria.

For those members of the committee whom I am not known to, I became involved in this whole business in 1989. I was, as it were, a church researcher into matters concerning the allegations over the Western Australian orphanages run by the Christian Brothers. As an internal sort of investigator, it was a fairly rocky road and my services were discontinued in late 1997. I favour a further royal commission or Senate inquiry into the sexual abuse problem in the Australian community. There is only limited time here today so I will simply mention a number of areas which I think the committee could probe. The committee can probe them with me—

insofar as I know anything about them—if you have time or interest, but you could probe other witnesses.

The first issue is the deaths of boys or girls in homes, in part as a result of brutality in some of the institutions. The background to that is a situation in Ireland, in which I am involved at a distance via the Internet. About a year ago—and I have provided the material to the secretary; it may be in Canberra, it may be here—there was a great media kerfuffle in Ireland over the deaths of children in certain homes, particularly the deaths of boys in homes run by the Christian Brothers. This rang a bell because in 1993 I warned the Superior General, who was Irish, that, for a variety of reasons that did not obtain in Australia in the same way, it was likely that certain boys were killed—in cases of manslaughter rather than murder—in the Irish orphanages. The case that is rated the worst was at St Joseph's, Letterfrack, on the far west coast of Connemara. I found documents that said 71 boys died in the institution, and that has been pushed up to 99 since. Most of them did in fact die of tuberculosis or in the influenza epidemic of 1919-20. However, it was worth investigating.

As I said, there has been a terrific media kerfuffle in Ireland over this business, so I just raise the matter with you. If you want to probe that I will give you more information as I have it, but I do not want to get lost in the separate issues, each of which can take a great deal of research. Senator Murray would know that we investigated the seven deaths in the Western Australian orphanages. At that time I was satisfied that each of them was an accident, but that has been disputed—there are claims that one boy or another was murdered. But at the time I was satisfied that each could be accounted for by farmyard type accidents.

The second issue I wish to raise—and I think the committee will be interested in this, particularly in view of the future, not just the past—is the penetration of the staff of children's homes by committed paedophiles. In the Catholic homes this would not be so easy, because the religious were appointed, essentially—but I suppose they could volunteer. It was my opinion, after years of research, that those who did the wrong thing in the Catholic homes drifted into bad habits rather than came with a premeditated intention of doing the wrong thing from day one. However, from inquiries during the 1990s in England, particularly Sir Ronald Waterhouse's inquiry into Welsh orphanages—the kind of work which another inquiry report described, in a beautiful phrase, as 'a crash course in human wickedness'—there was evidence of direct penetration of the homes by paedophiles. It was a simple matter of writing references for one another, good-mouthing one another, covering for one another and so on, and it was terribly easy to do.

Similarly, the inquiry into the Islington home in London, or the Islington borough child welfare set-up, found evidence of those committed to doing the wrong thing supporting one another's applications. I am not saying this happened; I am saying that there is evidence it happened in England, that it could have happened in Australia and that it would have been terribly easy to do—very easy to do—in the days of traditional care, when often they were desperate for staff to fill vacancies rather than just taking applications and sifting through them.

A variation on the above—I say that with a smile; you may see why my people tend to see me as a little bit prickly on these issues—is the churches' placement of known molesters as chaplains in the homes to get them out of the way, with the pious hope that the superintendent of the staff, or the brothers or the sisters, would keep an eye on them. This was explored in the



Forde inquiry in Queensland—which would be well known to you—and the case of Father Stanaway, who was definitely placed in a Brisbane home by the archdiocese to get him out of the way, was documented in full. There was no doubt.

I came across a case concerning the brothers' home at South Melbourne, St Vincent's, between 1948 and 1957. There was a chaplain there—and it is too hot a topic to ask any of the dear old brothers about—about whom there is a strong odour, and there were allegations about him in the media during 1990s. I know from brothers' internal sources that he was considered extremely unsatisfactory and they could not get rid of him because the diocese would not provide anyone else as chaplain. There is evidence too—and you might want to take this up with a Fairbridge representative—that in the 1940s at Fairbridge Pinjarra, in the west, there was a chaplain who seemingly molested boys, was involved in stealing money and committed suicide. The question is whether he was appointed by people knowing some of that in advance to get rid of him out of the mainstream. It shows an attitude to children and their welfare which was, to say the least, extremely casual at best.

I suggest, if I may, that you keep at the back of your minds the general question as to why there was so much abuse in some of or most of the traditional homes for children when most of the staff commenced by thinking of themselves as caring people. Many of the institutions proclaimed a Christian ethos. This particular area would take a vast amount of time to explore, and I try to explore it both in the submission to you and in this, which is just a commercially offered book—*The devoted, the desperate, the dull, the deviant: the staff problem in traditional residential care*. But what was it in these places? There is this incredible tension between the caring ethos on one side and the considerable abuse on the other. I am taking these abuses as largely given—that is, that there was an atmosphere of severity which merged with cases of way-over-the-top criminal bashing and assaults. There was an undercurrent in some homes—and nearly every home at times—of child molestation, which at some times peaked, as it were, particularly if the superintendent was himself involved or knowingly turned a blind eye.

In my own order, the deep tensions that occurred over this are the tension between the ethos of the caring order and the founder's wishes—the orphanages were close to the heart of the founder—and the fact that bad things happened with more regularity than can be put down to just the occasional case. Official Catholic spokespersons will tend to take the 'it was just the bad apple' theory, but this is not really good enough in my opinion. The reasons the more dedicated staff, according to their talents and the lights of the time, proved quite incapable of exposing or putting a stop to the abusive behaviour of some of their colleagues is explored in some detail.

For the future, there would not seem to be any chance of getting distinct improvement in this area unless in some ways whistleblowers can be protected, because there is a strong, deep hostility to whistleblowers in organisations, as you know. I will give you an example of this, and it is in there in more detail. I smiled at this, because this brother could have given me this observation any time in the last 14 years. I became involved in 1989, but only quite recently over morning tea—nearly all of my colleagues' deep insights were given over morning tea, afternoon tea or a beer late at night, and never in something that could be called a formal session—he said that when he was a young brother in a Western Australian boys' home, probably Castledare, in the 1950s he was concerned about the conduct of a brother in a neighbouring dormitory. He threw up his hands and said to me, 'What could you do?' It was the boss's problem. Of course, it was the kids' problem too, looked at from another angle. You can see the young man's point of

view: he was a quiet, caring, friendly sort of person, relatively new to the home; the person that he suspected—and he almost certainly was right—was doing the wrong thing was well entrenched and more senior. If any complaint was made, the person who was going to get hurt was the young person making the complaint. So he kept his mouth shut—probably wisely, from his own point of view.

I am suggesting to you that you give some thought to the problem in care even now. I will give you a vignette on that, and it concerns Western Australia. Last week I had lunch with a gentleman passing through who would be known to Senator Murray. This man just remarked with a smile that a few weeks ago he was given care of a 16-year-old for a few months, and there was no suggestion of police checks or background checks. The youth worker or the social worker said, 'Are you willing to take the lad?' He said, 'Yes, all right,' and that meant one less problem. You see what I mean. That was the end of that.

On the Catholic side—and it could occur with other support organisations where those organisations almost want to take over policy at the home—the involvement of the Knights of the Southern Cross, the Catholic equivalent of the Freemasons, has been a complicating factor and that is discussed in my book. In those critical years in the late forties and early fifties, which have been explored in previous inquiries, the knights in Perth held a gun to the head of the Christian Brothers executives. They demanded that Brother Paul Keaney, who has been mentioned as a grave sort of molester or at least grossly unsuitable to be in charge of a boys' home, was returned to the principalship of St Joseph's Farm and Trade School, Bindoon, in 1948, against the wishes of the executive of the Christian Brothers. The knights had threatened to withdraw all financial support to a home that was desperately in the red, unless the brothers returned Brother Keaney, their hero. He was their hero because he was having buildings put up that reflected great credit, it was seen, on the Catholic community: 'Our buildings are bigger than yours' and that sort of interdenominational competitiveness. You smile; you are right. But the fact remains that sometimes those things influence churches, I am sorry to say—'Our cathedral's a few metres taller than yours,' and that sort of thing. Brother Keaney was returned and the brothers were faced with the alternative of simply saying, 'We will close the home down.' A certain sort of determined person would have done that, but they did not and they have paid the price since.

There is certainly some tension in the Catholic community—admittedly, only a small minority are interested in and touched by the topic in the slightest way—over how to respond to the allegations of fairly widespread abuses in the Catholic institutions. The majority, in so far as one can judge, appear to be in denial or to believe genuinely that the allegations are either lies or much exaggerated. In the same orphanage at the same time, different children could have different reactions and so on. I try to discuss that in detail, much of which is in my written submission.

There are perfectly good reasons why that can occur. Some of these tensions in the Catholic community—and I was probably overdoing it by writing 'low-level civil war?' in my submission today—could spill over into this inquiry. Those on the 'in denial' side of the 'informed' or 'interested' Catholic community leaders use some of the phrases I will mention in a moment. Of course, their main weapon is the plain old-fashioned lie. I will admit that that is a bit strong—a bit jaundiced—but it is because I have been on the receiving end. The phrases they use include 'We must allow for the attitudes of the times'. That is fair enough up to a point, and I stress it at

times, but there is a difference where criminal assaults are concerned or with child molestation, murder or any behaviour that was roundly condemned 50 years ago, 100 years ago and so on and so forth.

I am not sure who is behind me, but I say with a smile that today you are going to hear some of the following remarks in a different tone of voice. They include: 'Please talk about the nice things that happened to you in the orphanage,' and, 'It may be that Brother or Sister was a little too severe at times,' or the classic that was told to me in 1993, by the executive in Melbourne, about a certain colleague now deceased: 'He has been a little bit foolish but, of course, there is nothing more than that, Barry'—the judge gave him 10½ years! Some of the other remarks include: 'You should put these things behind you and get on with your life' and 'Money won't solve the problems that you face'—that has an element of truth at times but it can be a bit self-serving at times too, particularly where the church organisation is strong and well endowed—and 'Surely you do not really mean that Brother or Father touched you immodestly?' Admittedly I have had mother generals and mother superiors on the line about that—not in their dozens, but there has been the occasional one—and they stress that they honestly did not believe, at the time, that a priest, a brother, a male religious or church worker could possibly do what was being done, so the child must have been lying. So it has been a sad awakening. The last mother superior that got in touch with me along those lines was from South Australia, where you are going tomorrow.

On the other side, and it appears to be a majority, are those Catholics who want a generally more robust approach to the issue—that is, one based on research, on a fair search for the truth and on apologies. Although, there have been many apologies. I was surprised yesterday to hear some people saying that they wanted an apology. Certainly there have been apologies around, and the apology culture has been ridiculed in some states when it is not followed up by more substantial reparations. They want an end to the furore, based on a settlement of the issues.

I am one of those who would have been strongly in support, for example, of the new Archbishop of Boston. I do not know if you are familiar with this case. The Catholic Archdiocese of Boston is the epicentre of the sexual abuse crisis in the United States, which finally began to peak on 6 January 2002 when the *Boston Globe* got an injunction to get 10,000 folios from the archdiocesan records, which showed massive cover-ups. The new Archbishop of Boston recently settled with 600 or so claimants for \$85 million, with a view to getting the business off his agenda once and for all. Mind you, that can be done. His predecessors lived in a palatial residence in Boston's equivalent of Vacluse or Toorak. By selling the palace and moving into more modest accommodation that is more appropriate for an Archbishop, and nearer his cathedral, the \$85 million can in fact be found. I support those sorts of rugged initiatives to deal aggressively and vigorously with the problem. People that are academically interested in this subject can talk on it forever. I have just raised a few issues. If I may, I now suggest that the ball is in your court.

**CHAIR**—Thank you very much. I will just ask a few questions. Do you think there is any particular reason that it was the Christian Brothers and not, say, the De La Salle Brothers or the Patrician Brothers? Would you like to comment on why it does not seem to be an issue with those orders but it does seem to be one with the Christian Brothers, not just here in Australia but throughout the world?

**Dr Coldrey**—In Australia and in Ireland, it does reflect—and I am anxious to answer you directly—simply the numbers involved. In Ireland, the Christian Brothers ran seven industrial schools, including the biggest, the most remote and the worst. This school, on the wild Connemara Coast, was guaranteed to be a problem by anyone who had any insight. In Australia, the Christian Brothers ran six of these institutions—four in the west and two in Victoria: St Joseph's, Geelong, and St Vincent's, South Melbourne. In Australia, I think I am right in saying that the Marist Brothers had Westmead in Sydney and the La Salle Brothers had the equivalent one in Queensland. In fact, Westmead has been mentioned repeatedly as a centre of abuse. The De La Salle Brothers' place outside Brisbane has not, really, more than the once-in-20-years sort of thing.

**CHAIR**—Do you think that has anything to do with the training of the brothers?

**Dr Coldrey**—Yes, but the catch is that the training of La Salle Brothers and the training of Marist Brothers was very similar. Sure, people were recruited far too young. There were wholesale gaps in training. There was no training, really, for child care as such. Being brought into religious orders far too young in an age when the discussion of sexual matters and the problems that could be confronted, say, in residential care or boarding schools were impossible to discuss with any degree of frankness or sensitivity, and not being well informed, let alone having any knowledge of the law relevant to child care, meant that people were sent into care work so poorly prepared. Then, as I say, confronted with their own drives, the opportunities presented and the pressures, they did the wrong thing. I do see it not so much as a distinctive problem for Christian Brothers as against the carers.

For example, in Canada you would be right in saying that the Mount Cashel orphanage in Newfoundland was probably the worst case in Canada. It was the object of a royal commission which had televised hearings on cable television which packed them in for 109 days. But less well known is the equivalent in Ontario. The La Salle Brothers managed two orphanages: at Alfred and in rural Ontario, although the name of that one has just gone out of my mind. That one in Ontario also had exactly the same problems and was also the object of the equivalent of Senate inquiries or royal commissions in Ontario, turning up exactly the same hotbed. In Newfoundland, I think 15 people went to jail. In Ontario, I think the number was rather lower but not significantly so. Am I answering you honestly, Senator?

**CHAIR**—Yes.

**Senator MOORE**—Thank you for your presentation, Dr Coldrey. I read with interest the things you have given me and also the regular quotes out of your other publication. One of things we heard yesterday from a number of people who had experienced time in different forms of care was their inability to reconcile places that were there for care—that were allegedly operating under Catholic sensibility and religious principles—with what happened. It was part of the ongoing pain that they were betrayed in the same place where you had all the pictures and the crucifixes—and how could you have this kind of behaviour? Leading on from what Senator Hutchins was saying, how is that reconciled? How can you reconcile that?

**Dr Coldrey**—You cannot reconcile it simply, can you? I am not really qualified to give a theological discussion of the problem of evil, that deep capacity of human beings to do terrible things, particularly in stress situations. I try to understand, from the minds of the pupils, the

obvious tension that they observed. This became apparent from 1989 onwards, when I began to do this work, to study this area. There would be appalling confusion in this, because on the one hand you have a tendency to religiosity in these places—that is, an overpowering formal religious tone—and, on the other hand, behaviour which affronted the religious principles on which the place was built. The isolation of the places had something to do with it—we are into the explanations now; I am agreeing with you—with the tendency of isolated places to develop their own cultures, which can be at gross variance with the mainstream culture. What I am admitting a little bit is that I have not given as much time to exploring this as I might have done, but I can only agree that, from the point of view of a child or teenager, this would be incredible and confusion would be produced. How it is reconciled by the counsellor, how it is reconciled later on, I would not know. I am not a counsellor. I feel I have not answered that one—

**Senator MOORE**—I do not think there is an answer; it just came out. The other issue, because I think we are talking so much on the same wavelength, is that in your paper you actually acknowledge that there were so many people working in the system who were doing the right thing and that perhaps their role is lost with the focus on the people who were not. I am sure you have read the MacKillop paper. It speaks at length about how empowering going to the buildings and putting up plaques has been for people who have been through that experience. I am interested in whether you have been at any of these activities and, once again, in the reconciliation. You talk about the kinds of stories that we have heard and will hear about what has gone on. At the same time, putting up a plaque at a building seems to be a response in terms of future reconciliation. I am at a loss as to how you can think about those things. I wonder whether, from your observations, having studied at length in this area and having read what the formal response is, you have some comment on whether you think that is an approach that could be effective.

**Dr Coldrey**—You have reminded me of something I should have stressed earlier. I would hope that the report somewhere stresses the good work done by many people.

**Senator MOORE**—Yours did, yes.

**Dr Coldrey**—Because they were not professionals in a modern sense, there is a tendency to say that they were all inadequate in a sense, but of course they were not all inadequate. Many gave generously, and around each orphanage there were huge numbers of people who supported the orphanage in various ways—taking the children for holidays, raising money, darning clothes and all sorts of things. I think that needs to be stressed. Going back to the responses which MacKillop stresses, one strategy which the church is using in some areas, which I would say is a very good one—although is it adequate enough?—is the idea of the social event built around it. That does provide a focus—the barbecue, the assembly, the plaque unveiled—and a mutually supportive atmosphere, and I think it does help. I know internally the success of these events is judged by the numbers who turn up, and they are often very successful in that sense.

I hang my hat on the church response that I believe is the very best—and that is of the C-BERSS organisation in Perth. Its work began in about 1996. It is funded by the Sisters of Mercy, the Sisters of Nazareth and mainly by the Christian Brothers, who have exceptional financial support in Western Australia. C-BERSS provides an ongoing range of services, and the two that come to mind instantly are counselling and access to education. The organisation is fairly independent, solidly professionalised—apparently, as far as I can judge—and ongoing with the

idea that it will see these people through for as long as it takes. The assembly and the putting up of the plaque can be a good part of C-BERSS. But it may be only a one-off.

Yesterday I talked with a gentleman who later will be giving evidence, and he will put it in his way and in his time. But one of his stresses is the provision of housing support for people in old age. I did raise this matter in the early nineties with our people in Western Australia. We still held a lot of land between the old Clontarf orphanage and the headquarters on the river, with which the Western Australian senator would be familiar. It would have been possible to lay aside a section or slab of land for a residential village complex to be available to former residents of the homes. Anyway, that did not go anywhere. There could have been provision there for these people, many of whom are getting to old age. I have been only a couple of times to these types of things and they are good, and usually people are on their best behaviour. But I do not think they are sufficient if they occur only once a year or once every so often.

**Senator HUMPHRIES**—You obviously have a deep knowledge of what occurred in this area of the Catholic sector in Australia, and particularly in Victoria. How do you feel the level of problem in the Catholic sector compares with that in other sectors run by religious denominations and, again, with that in the government run sector in Victoria?

**Dr Coldrey**—I will just mention that, for follow-up, it is discussed in this book and I think in the material I have given to you. During the early 1990s, I had a strong sense that there was a distinctive Catholic problem—and I still think there was. But, after hearing about Dr Joanna Penglase's organisation CLAN, in particular, and its reaching more into the state system and the various Protestant homes, it gets harder to separate out. Person after person is coming out: one was at this home run by the Presbyterians, another was at this home run by this organisation and others were at this state home. Having said all that, there may be some element of a distinctive Catholic problem. Those managing the state homes and those managing the Protestant homes were probably more in touch with mainstream community and its values and attitudes and, when a problem occurred, probably had a way of dealing with it more effectively—maybe.

The Catholic community at the relevant times still had an element of—the word 'ghetto' is a bit strong—being separate from the community. For example, there is no doubt that in the Western Australian homes that I have studied the carers thought of the children as junior members of the Catholic community, which was doing it hard—over the church schools and so on. But the state representatives thought of the children, naturally, as being young citizens of the secular state. Consequently, that sort of tension was there. In the Catholic community, in that sort of atmosphere, there was an even stronger tendency to cover up a problem, and anyone who wanted to deal with a problem in an open way was 'letting down' the community. I would say that attitude affected the Protestant and secular institutions somewhat less.

It is possible too that there have always been problems with the formal commitment to celibacy of the key players in the Catholic community, from the bishop and the priests down—and that is another whole area. But with the sexual revolution of the sixties it is fairly plain now that the practice of celibacy plummeted in various countries at different rates; it plummeted most in the United States, which you would know about. This was not picked up by the Catholic community in general, and of course it was a terribly hot potato and still is. I am not sure if I am making enough sense here.

The key carers in the Catholic homes were officially celibate, and I think that has to be allowed for as a source of the problem. The key players in Protestant and state homes in general were people who were married or were soon going to be. So there is the ‘officially celibate’ aspect, and even in America about half the priests are consistently celibate. Much of my energies at the moment are centred, via the Internet, on church reform issues and that sort of thing, but it brings me in here. These carers are often dealing with young children who are not their own. They have no parenting skills from dealing with their own children. Perhaps I am not making as much sense as I would have hoped to, but I think I have dealt with it a small way.

**Senator HUMPHRIES**—I will look at that with interest; thank you.

**CHAIR**—I will see you at the recess.

**Dr Coldrey**—Yes, please do.

**CHAIR**—You are an ex-Christian Brothers student, aren’t you?

**Senator HUMPHRIES**—Yes.

**Senator MURRAY**—Brother Coldrey, as you know, I am very well informed and networked not just in Australia but internationally on these issues. I am not going to test the propositions put by your research; quite frankly, I think your research has contributed a great deal to opening up an understanding of many of these areas. I want to look at a specific remark you have made, though, and wonder whether it would be an area in which the committee might be encouraged to recommend. On page 19 of submission No. 40, your main submission to the committee, there is a quote from the book of M. Raftery and E. O’Sullivan entitled *Suffer the Little Children: The Inside Story of Ireland’s Industrial Schools*, New Ireland Books, Dublin, 1999. The quote refers to your web page. It says:

According to his own web page on the internet, he says—

‘he’ being you—

that ‘My mission as an ‘agent secret’ for a section of the Roman Catholic church ended unromantically in February 1998 when I was handed my redundancy papers. Nor was the handshake golden.

In Australia, a number of jurisdictions, of which the Commonwealth is weakest, have whistleblower legislation; they are normally known as public disclosure acts. Commonly they are for the public sector rather than for the private sector. Do you think whistleblower legislation for the private sector, which would include the not-for-profit sector—churches, charities and non-government organisations—would be of assistance? Typically, whistleblower legislation not only prohibits the victimisation of whistleblowers and protects them but allows for a process of compensation if they are leaned on in such a manner. That quote seems to have an underlying flavour of your being leaned on. I do not so much want to go into that area as to ask you: do you or do you not think that whistleblower legislation for the private not-for-profit sector would be of assistance in these matters?

**Dr Coldrey**—May I make a reference first? I will answer directly; however, if I do not answer directly, please remind me. In that statement about me there was meant to be a wry humour. I am a member of a religious order, and in a religious order, for better or worse, it is extremely difficult to get rid of a finally professed member. That cuts both ways: a critic is very difficult to get rid of, even if people are so minded; and those who have done the wrong thing—in the sense you understand—are extremely difficult to get rid of. There is an old-fashioned canon law reference that you must prove perversity of the will bent on evil, but that can be difficult to do. Although there are a few guidelines to make it a bit easier, to prove perversity of the will bent on evil is quite a challenge. By the mid-nineties, my approach of finding the truth and responding was going right out of favour; consequently, there were tensions. I think I formally wound up my work on 3 February 1998, and I just give a wry comment on that: it has nothing really to do with pension opportunities and so on, because the maintenance is the same whatever.

In child protection, unless some possibility of investigation exists and the whistleblower is protected—including that the investigation may prove the whistleblower was wrong or mistaken—I cannot see that this issue can be grappled with. The pressures to conform are very great. There are the matters of jobs, promotions and offices—for four years, from about 1998, I was deliberately not provided with an office; it might be money for a trip to go to a conference or something like that. There are so many pressures that can be applied. For people with commitments, such as families and associated responsibilities, those pressures can be quite considerable. They could be minor in the sense that someone else gets the better office or the trip to Sydney to go to a conference. They are relatively minor, obviously. Unless there is strong whistleblower legislation, I would say that it would be extremely difficult to make much progress in this area.

There have been a couple of good cases in the Diocese of Wollongong. There was the young lay member of staff whistleblower who exposed the problems of the brother running Eddy's Place, which was a crash pad for street kids in Wollongong in the 1990s. There were consequences. The brother in question was convicted and awarded a non-custodial sentence; the crime was on the lowest, rather than the highest, end of the scale. But the young layman said that he found—and I felt he was telling the truth—his pay began to turn up late, he was being badmouthed all over the social work area of Catholic Wollongong, he felt unwanted and there would be no promotions. So he did the sensible thing by going somewhere else, and he has disappeared from the public scene.

Then there is the classic case of—the names will not shoot into my mind—the famous priest in Wollongong who pulled the plug on goings-on in the diocese and has since committed suicide, but not only because of that. Until the diocese woke up to the fact that what he was saying was oh, so true, all the pressure was on him, the whistleblower, rather than on those who, it was proven in due course, had done the wrong thing. One thing I would stress is that I see it nigh on impossible to make any progress, particularly within organisations, unless there is strong protection for the person who is prepared to blow the whistle.

There are classic cases overseas. For example, there is Alison Wilson—and she is not at all a religious person—whose intervention in the case of the Welsh orphanages triggered a sequence of events. Eventually she got compensation, but in the meantime she lost her job, was badmouthed and could not get another job in the same area and so on. I forget, but I think she may have lost her husband. It is usually the case with such tension and drama that the family



breaks up and husbands and wives are lost to each other. The consequences were horrendous, but she was so right—that is, there was a whole hydra of problems in the Welsh children's homes. These are all state places, by the way. At the relevant time, I was staying at an Anglican facility at Hawarden and some of the homes in question were just down the road: Bryn Estyn and Bryn Mawr in Wales. There was a whole hydra of problems. With this whistleblower, Alison Wilson, we were in a world that for once has nothing to do with churches; it was a state area. The whistleblower had a horrendous time until eventually, five years later, the royal commission exonerated her. She has received substantial financial compensation, but in the interim she had a horrific time.

There is a whole area of study of the problems of the whistleblower—including in government concerns. In practice, when these matters have blown up, the churches have acted rather like any big corporation under challenge. Certainly the Catholic Church organisations have tended to act like any big corporations would act or have so often acted—like Enron in the United States. There have been studies done of whistleblowers in the secular world, and they often get a rather rough spin. I hope I have answered your question fairly enough.

**CHAIR**—As there are no further questions, we thank you for your attendance and for your evidence.

[10.04 a.m.]

**GAFFNEY, Ms Kate, (Private capacity)**

**McINTOSH, Mr Neil Bladd, (Private capacity)**

**CHAIR**—Welcome. Do you have any comments to make on the capacity in which you appear?

**Ms Gaffney**—I am currently completing a PhD in criminology at the University of Melbourne, although I am appearing in a private capacity as a result of my research in the area of Victorian state child protection and juvenile justice.

**Mr McIntosh**—My appearance as a follow-up to my submission, which was a project towards a master's degree in education at Monash.

**CHAIR**—Thank you. Information on parliamentary privilege and the protection of witnesses and evidence has been provided to you. The committee prefers evidence to be heard in public, but evidence may also be taken in camera if such evidence is considered by you to be of a confidential nature. The committee has before it your submissions. I now invite you to make an opening presentation, to be followed by questions from the committee.

**Ms Gaffney**—Firstly, I would like to thank the committee for their time and for holding these hearings. I would also like to thank fellow witnesses who have given up their time both today and yesterday to make presentations; it is very valuable. As I have said, I am completing a PhD in criminology at the University of Melbourne. I hold a graduate diploma and a master's degree, the theses for both of which focused on juvenile justice and child protection in Victoria. In total I have been academically studying this field since 1996. I should declare from the beginning that I have some personal interest, aside from the fact that my great-grandmother was accommodated in the Ballarat Orphanage in the 1870s. My mother was superintendent of Winlaton Youth Training Centre from 1966 to 1972, which is probably the initial reason for my interest in juvenile justice. That was a state facility.

I will touch on a few issues today and try to keep it brief. One is the nature of public welfare in Victoria and one is the moral panic which occurred in the 1950s and 1960s in Australia in general and in Victoria which has resulted in a lot of attention being drawn to state wardship issues. I think you will find that a lot of your witnesses were made wards in the forties, fifties and sixties. A lot of recent litigants in Victoria were wards in the fifties, sixties et cetera. Another thing I want to look at is the relationship between juvenile justice and child protection, especially in the light of government and non-government relationships. I will mention briefly funding issues between government and non-government and then I will conclude by mentioning a few ongoing concerns which I have and which were brought to light by the inquiry. I will restrict what I am talking about to Victoria, because that is what I study.

In Victoria you have several categories of children in care. You have what I call public and private children in the care of public and private institutions. By 'private children' I mean

children who were admitted to institutions by their parents. You have heard from some of them. ‘Public children’ are what I call state wards and juvenile justice clients—children who are under the direct care or guardianship of the state. Private institutions are religious and general non-government institutions, and public institutions are institutions run directly by the state—staffed by the state, funded entirely by the state and owned by the state.

In Victoria there is a long tradition of non-government provision for state wards and juvenile justice clients. To take you right back, private child-saving efforts commenced in 1842. The first state legislation for child welfare, which was the Neglected and Criminal Children’s Act 1864, did not follow until 22 years after. So you have the first attempts at taking children off the streets in the colony and 22 years later you actually have the state legislating and saying, ‘We have a role in this and this is something that should be done.’

**CHAIR**—When was Victoria colonised?

**Ms Gaffney**—It was first settled in 1836 and it separated from New South Wales in 1851.

**CHAIR**—So in 1836 and 1842 they were starting to have a problem with children.

**Ms Gaffney**—There were very small numbers of children and very small institutions, which is also part of the problem. By ‘institutions’ I mean two or three women gathered around a church group, who said, ‘Let’s go and visit sick people.’ I think it started off by a doctor saying, ‘Here we have a sick mother; can you find someone to look after her children while she is sick?’ That is how they started their efforts. That is covered very much in the work of Donella Jaggs.

Before separation in 1851, colonial Victoria was, of course, bound by New South Wales legislation and practices. You will find that there were state orphanages in New South Wales, Norfolk Island and Hobart, but Victoria did not have government institutions as such. All our initial institutions were private, despite the fact that New South Wales had state institutions, state wardship and at the time took complete control of children. Victoria did not emulate that for funding reasons. One reason was that it was settled without permission from Sydney, so Sydney basically said to Melbourne: ‘Well, you can be completely self-sufficient. Too bad if you have problems with orphans. You can fund them yourself. Don’t expect us to pay for it.’ That is where things like the St James Dorcas Society came in which provided private care.

Religious organisations started institutions in Victoria around the 1870s. The Sisters of the Good Shepherd ran the Abbotsford and Oakleigh convents. I think they arrived in 1867, but don’t quote me on that. So we do not even start off in Victoria with a strong religious presence. Non-government institutions through the history of Victoria were empowered to accommodate state wards and were granted a per head payment for wards they kept. For example, the Abbotsford convent accepted voluntary children—that is, children who were sent there by their parents—but they also received state wards, basically because the government did not have its own institutions. In return, the state government would pay the institution a per head rate for state wards; it did not fund for non-state wards.

It is important to remember that not all institutions were approved institutions. As we entered the 20th century there were a lot of institutions, but not all of them were approved by the children’s welfare department to receive state wards. There were institutions which only received

voluntary clients. Therefore they did not receive government funding because they did not receive state wards. These institutions were not inspected and, for whatever reason, did not agree to the annual inspections you have heard a fair bit about. You will encounter people who were accommodated in institutions who were not state wards. They were placed in non-government institutions by their parents and they were not under the control of the state. The state did not inspect them or fund them. I think that category of people—the ones in non-government, non-approved institutions—are a bit at sea.

For most of this century the main state institution was the receiving depot for boys and girls in Parkville, which a few people mentioned yesterday. Children from infancy upwards were sent to the receiving depot in Parkville, where they were processed and then sent to institutions further out such as the Geelong Orphanage or the Ballarat Orphanage. However, when they were first admitted to a wardship they were sent to Turana or Parkville, the receiving depot, as it was called then. From there they were shunted off to other institutions, government or non-government.

I am sorry if my comments are all over the place. I would be happier to receive questions. However, on the issue of inspection reports, which has been raised, I found in my research that inspection reports of the approved institutions were actually very thorough. There are pages and pages of reports. But they are inspections of the institutions, not of the children in the institutions. The condition for approval and funding was that the institution had to be inspected, not the children in its care. The conclusion I draw from that is that there was a belief that if the institution was all right and was meeting the regulated requirements then it must be providing suitable care. Someone said yesterday that ‘the inspectors never asked us’ and—second-guessing the inspectors—I do not imagine that they would have thought that they should have asked. From the full inspection reports I have read, the inspectors went around and said, ‘This place is a firetrap’ or ‘There isn’t enough running space for the children’ or ‘The beds are too close together.’ However, when it came to the report that was put on an individual ward’s file, that were one or two lines such as, ‘Has good teeth; looks healthy. Well dressed and clean.’ Of course they were well dressed and clean because the inspector was coming. The reports on the institutions were quite extensive and the government did follow up approved institutions and would say, ‘Get that stairway fixed; it’s a deathtrap’ and it would come back and see if it was fixed. However, the attention was not directed at the children; it was on the buildings. It was sometimes on the personnel, but mostly on the physical institutional structure.

At all times in Victoria’s history, government institutions were the minority of institutions. The bulk of care was provided by the non-government sector. Importantly, from my research it appears that non-government institutions also accepted juvenile justice clients. So in addition to state wards they accepted juvenile justice clients, which is quite an extraordinary leap when you think about it. Children and young people who were committed for criminal activity were placed in institutions such as Abbotsford convent, Oakleigh convent, Bayswater Boys Home, which was run by the Salvation Army, and Morning Star Boys Home, which was run by the Catholic Church. In addition to that, by the 1950s the state had its own juvenile justice facilities at Turana and Winlaton for girls, and Langi Kal Kal and Malmsbury. I do not know whether detaining and caring for juvenile justice clients in non-government institutions is unique to Victoria but it marks Victorian welfare and it is quite significant.

**CHAIR**—Are you able to say when it started and when it was discontinued?

**Ms Gaffney**—It started with the Neglected and Criminal Children’s Act basically, or a little bit after—the 1870s—and it continued right up to the 1980s, I think, until the institutions closed. I could check that. I do not have that information with me on the spot, but I could check when they ceased receiving juvenile justice clients. Some later speakers might be able to clarify that, but I could take that on notice and I would be happy to provide you with the information.

**CHAIR**—If you would not mind, yes.

**Ms Gaffney**—Certainly, I would be very happy to provide you with that information. If I focus now on the 1950s, as I said many recent litigants in Victoria were wards in the 1950s and 1960s, and quite a few of your submissions are from people who were made wards in the 1950s and 1960s. This was because of a post-war moral panic in Australia—that we had a generation of children who were going to become juvenile delinquents and were therefore going to become criminal. Criminological strain theories at the time held that children would learn criminal behaviour through their criminal environments, so the best way to stop a child becoming criminal was to remove it from a criminal or deviant environment. If a child’s parents were criminal, the child was likely to learn criminal habits, so if you removed the child from the criminal environment, it would not become a criminal. So that was a fear.

That belief also was held earlier, but it is articulated by criminological and sociological theories at the time that you could actually stop a child becoming delinquent by taking it away from its parents or its slum suburb et cetera. The previous theories were that children just were genetically or inherently criminal—that criminality was inherited. It is strain theory in a way. The 1950s theories are quite positive in a way, because they are saying: ‘You don’t have to be criminal just because your dad is. We can stop you. You can learn good habits.’ So a lot of these institutions are just attempting to arrest juvenile delinquency at this time.

So, in essence, Victorian legislation did seek to socially engineer children to be less criminal than their parents by removing them from unsuitable parents. As a result of this, there were legislative changes which broadened the definitions of children who should come into state care, so it broadened the definition of children lapsing or likely to lapse. It did not broaden them that much, but things like cohabiting with criminals was grounds for being taken in and made a state ward, for example.

**CHAIR**—Were unmarried mothers regarded as unsuitable parents?

**Ms Gaffney**—I do not think that was legislated, but I think it would have been assumed by welfare authorities, especially if they were living in unstable domestic situations. I do not know if you have been given copies of the state wardship admission forms, but it is a double-paged, tick-the-box form which asks things like the marital status of parents, size of backyard, how much play space the child has—so you can see we are instantly disadvantaging inner city slum areas which do not have big backyards—how often the child attends school, how intelligent the child appears. These forms were often filled out by police officers. I am not casting any aspersions on police officers, but I am just saying that this is a police officer ticking a box saying how intelligent the child appears. Another question on the form was what grade the child was in at school. If you do not have those forms, I have a copy and I would be happy to provide you with a copy.

**CHAIR**—That would be appreciated.

**Ms Gaffney**—That form was used from the 1930s to the 1970s, and it did ask questions about the marital status of parents and whether they were working, et cetera. So it was not legislated, but it was on the form that went to the Children's Court and was approved. As a result of more children coming into institutional care, you had more and more institutions being approved, such as the Burwood Boys Home, which was Salvation Army, and I think you had a submission from at least one person who went through Burwood Boys Home. It was not approved until the 1950s. It was a non-approved institution and then it became approved in the 1950s, so you had more non-government institutions being approved in an effort to accommodate more and more children who were coming into state care as a result of broader legislative definitions of children who should be made state wards. So you had this overcrowding basically. More and more kids were coming into care, and then you needed to put them somewhere. So you had more and more non-government institutions becoming approved.

In the 1950s in Victoria, for the first time ever, you had the state actually taking a more active role in direct service provision, through the establishment of institutions. As I said previously, the receiving depot for boys and girls in Parkville was the main government institution and it took state wards and juvenile justice clients. In the 1950s, you had the state government opening institutions such as Sutton Grange and Hillside, which were for children, and Winlaton, which was opened in the 1950s as a juvenile justice facility for girls aged 14 to 18—girls sentenced with criminal offences. It was meant to take 45 girls, but I will talk about that in a minute. In the 1960s, you also had the government purchasing the Kildonan institution, which was in Burwood, and that was reopened as Allambie, which took boys and girls from infancy to age 10, I think. They also purchased Pirra at Lara, which took girls, I think, from the age of 10 to 14. So the government not only opened a few more institutions, such as Winlaton and Sutton Grange, but they actually purchased institutions from the non-government sector and ran them themselves. That was a reasonably short-lived role for the state, and they did not carry on that role because institutions are very expensive things to run. You also had the social changes—the change in social attitudes towards things like delinquency and adolescent sexual activity et cetera—so there was less of a call through the 1970s and 1980s for institutions. But, as I said, the 1950s and 1960s marked the high point in the Victorian government's direct involvement in running and managing institutions. It stands out in the history of welfare in Victoria, which was dominated by the non-government sector.

I want to briefly mention Winlaton. I note that the state government mentioned that institution in their submission, and I wrote my master's thesis on Winlaton. Winlaton was the only state-run juvenile justice institution for girls aged 14 to 18. The age of wardship was raised in 1960, to 21, so from 1960 onwards a child could be kept a state ward until the age of 21. It was designed for 45 girls, and it had sections. As far as I can see, throughout their history they did actually abide by the sections: they did not put mild-mannered girls in maximum security; they had a remand centre et cetera. But within a couple of years, Winlaton was so overcrowded due to the legislation—bearing in mind Winlaton opened up in 1956—that at times it accommodated over 120 girls, and it was an institution built for 45. And they were not all juvenile justice clients. In fact, very few were actually juvenile justice clients; they were state wards; they were children removed from abusive families or unsuitable parents or for whatever reason, but they were not all juvenile justice clients. I am told it got to the point where girls were sleeping on mattresses in the recreation room of the remand section because it was so overcrowded. I hope that gives you

an impression of the overcrowding in the 1960s because of this gap between legislative definitions and places to actually accommodate them.

Institutions such as Winlaton, and others like it, were not designed to take these numbers of youth. I suspect, very seriously, that young people in these institutions did suffer as a result of that overcrowding, aside from the fact that, in the case of Winlaton, girls who should not have been in a juvenile justice facility were being kept there with other kids who were criminal, some of whom could have been reasonably hardened. It is not necessarily doing the 14-year-old state ward any good to be in with an 18- or 19-year-old prostitute, housebreaker or whatever. I am not sure if you have encountered that or will encounter that in the stories you hear but, in the stories and the oral histories I have encountered, I have heard there was a fair degree of confusion amongst state wards as to why they were in an institution with juvenile justice kids—and that is one answer for Victoria.

Any state ward who was sent to Turana, Winlaton, Abbotsford, Oakleigh, Bayswater or Morning Star was, by definition, being accommodated in an institution which took juvenile justice clients as well. I personally believe it was an improper practice to have done this, because both categories of youth require different services. Juvenile justice clients do not need state wardship provisions, and vice versa. I suspect that this inquiry will tend to focus on state wards and not on juvenile justice clients, which is a bit of a shame because they also were institutionalised. They were young people who were institutionalised. They were often deemed criminal because of categories and definitions that we would not hold these days, but they were still subject to the same institutions as a lot of the state wards you will talk to. I am not sure if you have had juvenile justice clients come forward, but they were a category of young people who were institutionalised in exactly the same institutions as the state wards who you are talking to.

The 1970s were marked by the policies and practices of deinstitutionalisation and diversion. This directly led to a reduction in the number of young people coming before the courts to be admitted to state wardship, a reduction in the number of young people in institutions, the closure ultimately of a lot of institutions, and a move towards community based services, which for the most part are provided by the same non-government agencies. They changed from running institutions to providing services. I am not saying that that is a bad thing, but services are still primarily provided by non-government organisations.

I will talk briefly about the funding relationships. As I said, the non-government institutions were funded on a per head basis for state wards in institutional care. Aside from funding on a per head basis, the government also reimbursed institutions for the expenses accrued in the process of educating and accommodating state wards. Things like state wards' dental bills were reimbursed by the state government. If children were sent to outside schools the cost of school uniforms was reimbursed by the state government.

I have found relatively recently—so I cannot speak much about this—in my research that it was not uncommon for institutions to send the government receipts saying that they had bought shoes, socks and school ties for this many children to send them to the local secondary school. They would send the receipts in to head office to the government—say it was a request for \$120 or so for shoes in the 1960s. I have read cases where the government would write back and say, 'I am sorry, but that is too much. We have a new policy'—which of course the institutions were

not told about in advance—'that we will not fund you for any more than \$80, full stop.' So any receipt that would come in, no matter how much it was for, the government would say, 'We have a new blanket policy across all institutions that we will not pay any more than \$80 to an institution for school uniforms.' The institution had already paid out the money. They did not know that they were not going to be reimbursed fully.

I cannot second-guess what the motives of the government departments were then. I am not sure if it is misguided or if they were concerned that the institutions were creaming money from them or something, and I do not know how the institutions were then expected to make up that \$40, \$50 or \$60 that they had already outlaid for things like school uniforms in the full expectation that the government would pay them back. You can only guess what they scrimped on in order to make up that extra money. I am not saying that that is a standard feature of the relationship, but you have little things like that, where the non-government organisations have maybe done everything they can and the government plays games or tightens its belt without necessarily telling them.

It is my impression, in some respects, that non-government organisations or institutions were sometimes put over a barrel. They became dependent upon state funding. They became dependent upon receiving state wards because of the per head funding. When they complained they were receiving unsuitable wards—older wards or slightly more delinquent wards than they were set up to take, which was to the long-term disadvantage of all the other children—and said, 'Will you stop sending us these wards,' the government's response, on more than one occasion, was, 'We will stop sending you wards, and you will not get any money.' I have read file notes that said: 'This institution needs our money so we can threaten them with stopping sending them wards. They will accept any ward we want because they need our money.'

In some respects I think institutions got themselves over a barrel where they were dependent upon the government for funding. There are some institutions that are non-government which would have 100 children, 99 of whom are wards, and so they are very dependent on the government not pulling out those wards. At the same time, I suspect that the government is calling their bluff, because on the same file you will have a memo saying, 'Gee, such and such institution has closed down; we need somewhere to send the children.' But the non-governments do not know that. They do not know that the government is desperate for places to send these children and would never withdraw approval. The children get stuck in the middle of all that politicking.

My thesis looks at trying to identify where responsibility lies in the non-government and government relationship in welfare and justice. Non-governments are not a problem; the involvement of non-governments marks Australian welfare. What is a problem is probably a past and continuing lack of clear accountability mechanisms between the government and non-government agencies and a lack of a clear line of reporting and responsibility for people involved in the system and for children who are caught up in the system. There is an ongoing assumption by governments that non-government organisations will provide services and have a religious, social or charitable mandate to provide these services. That marks Victorian welfare very much. It is an assumption that non-governments will provide these services—we can change the legislation and throw the number of children at them that we want; they will still pick up the children and provide the services. Here is the assumption that the government plays non-governments off against each other—the idea that if you will not take that ward because you



think he is difficult, too bad; we will just remove all the wards and remove all your money. So there is competition between non-governments for government funding, which the government continues to be quite aware of.

I now refer to some areas of responsibility. As a preliminary part of my thesis, if I were to say where state responsibility for state wards lies, I would tend to say that the state holds responsibility because of legislative definitions. It defines which children come into care and which children do not come into care, so it legislates that responsibility. It selects wards. It sets up the system which says, 'You will be a ward; you will not be a ward.' It selects the institutional destinations of wards—it says where these children are to go. It funds institutions. It knows it is funding these institutions, so it is responsible in that respect. It is paying institutions in return for a service. As I said, it inspected the institutions, not necessarily the children in the institutions. It does appear that it sometimes, knowingly or unwittingly, provided inadequate funding, even when faced with receipts for expenditure on the part of non-governments.

Non-government institutions hold the responsibility for abuse carried out by staff on their payroll or in their employment and sometimes for misrepresenting institutional conditions to inspectors—covering up or undertaking that they will carry out repairs and then not carrying out repairs, saying to the inspectors or the department, 'Yes, we are planning to knock that down and build a whole new dining room,' and 10 years later there is still no whole new dining room, but they need the funding. They are responsible for accepting wards and non-wards in return for money, regardless of the fact that they might have inadequate facilities. They know that if their institution can take 100 they should not be taking 150. I would say that the institutions would know what their capacity was. Sometimes they possibly deny children adequate food et cetera. I have encountered a lot of stories from secondary sources about children being denied adequate food. The institutions are directly responsible for that. They bought their own food; they often grew their own food.

There are examples of positive behaviour by both governments and non-governments. I have read of extraordinary social workers who really went above and beyond through the 1950s, 1960s and 1970s to provide for children and to reunite children with families. I have read archival materials which detail exchanges between the superintendent of an institution and the department. The superintendent said, 'This child should go home. She wants to go home; she is really good and her mother is suitable. Send her home.' The department said, 'No, we will not send her home.' The superintendent was the one living with this child, saying, 'You should send this child home,' but, because of a memo from 10 years ago on the file saying that the mother was an alcoholic, or whatever it might have been, the child was not allowed to go home. I have read of people who seemed to be bashing their head against a brick wall to do the best for children but could not, for whatever reason. There are good and bad stories, and the good ones do not excuse the bad ones by any means.

One of the reasons I am appearing before this committee is that I am aware that state wards—or institutionalised children—are quite confused about their own lives and histories. They want to understand and to know other people's stories. They want to know that their case was unique but that it also was not unique—that they are not the only ones and that it is not their fault. There does not seem to be a general awareness in the community of the experiences of these individuals. I am aware that they are confused. I was a bit concerned that juvenile justice clients

do not necessarily have a voice through this inquiry even though they are institutionalised children.

As a society we have to realise that these problems have not gone away: it is not restricted to the 1950s and 1960s. There are still children in the care of or under the supervision of the state and non-government organisations. We no longer have big industrial institutions, but we still have a series of responses by agencies and social institutions to child welfare issues, to child protection and to juvenile justice issues. It is not a problem that goes away. You cannot say that this ended in 1983; you cannot just pick a date and say that this has stopped. It is ongoing. We still have the same non-government institutions providing services. I am not saying that that is a bad thing. I do not want people to think that this is something that only happened in the past and that it is over, and that once you have addressed the concerns of people who were wards in the 1940s, 1950s or 1960s that is it. We still have the government assuming responsibility or attempting to abrogate responsibility for young people in its care and known to its care. That is about all I wanted to say. I am happy to answer questions or to hand over to Neil.

**Mr McIntosh**—Thank you for giving me the opportunity to address you today and for the opportunity to have a slightly wider reading of my project. That is quite gratifying personally, and I appreciate that. I do not have as much faith in my ability to deliver impromptu, so I have a written statement here. It will not address the issues that occur in the project, although I am happy to answer questions on that. I want to address matters relating to the committee's term of reference 1(g) and in particular 1(g) (iii):

... any necessary changes required in current policies, practices and reporting mechanisms.

It appears that we have not learnt from the lessons of the 1930s, when fostering as a substitute for institutions failed as the economy fell into depression. While as yet we do not have the problem of economic recession, we have at state and federal levels a policy of what the economics adviser to President Kennedy, Professor John Kenneth Galbraith, described as private affluence and public poverty. In real terms, resources in people and funding to support children in need are being kept back at recession levels when they are not being wound back in the name of government economies. This, of course, impacts on the quality and number of foster homes available to children who are wards of the state.

It is fair to say that the Senate is a part of the authority of the state to which wards are entrusted. Therefore, those wards are in some way wards of the Senate. Of course, nearly all wards are wards of one of the states, not of the Commonwealth, but there is such an overlap of responsibilities and funding between the two tiers of government that it is not really relevant to say where the buck stops. My first proposal is that wards should be the sole financial responsibility of the federal government so that there is a unified and even treatment of children in need across all of Australia. As a model I ask you to look at the funding for non-government schools, where the federal government has no problem with providing billions of dollars of needs payments for the children of the wealthiest and most privileged families in the country. In addition, the states have no problem in adding to that dole-out of taxpayers' money.

A respondent in my project, who was a government inspector, described the orphanages as boarding schools for the poor. I regret that I did not explore this aspect of her information but I did become aware that some of the children in orphanages were placed there by their parents,

who out of deep poverty, intractable family problems or parental illness had to take the option of having the orphanage take over the care of the children. Some children were so placed for a short time and others were placed for a time and then returned home. They were sometimes put back in the orphanage until they could go home again.

This idea of a facility for respite care should be examined closely. Again, it should be a federal government financial responsibility. I suggest that certain government schools across Australia, in the cities and the country regions, be financed to build and manage boarding schools next to those schools or nearby. Those boarding schools could be modelled on the best practice shown by the non-government schools that have boarding schools attached. This suggestion is aimed at taking away the pressure on state welfare agencies and fostering and is not in any way meant to replace those programs, which would also continue to be needed.

I will go back to the difficulty with foster care. Even with the best resources available to them, some children find themselves moved a number of times, as they have been severely traumatised by events in their lives which have led to their being fostered away from their home environment. However, they cannot cope in a normal family situation and the foster relationship breaks down. Therefore, the respite centre with—you would hope—well trained staff could be most effective.

How do you decide where to put these boarding schools or where they are likely to be needed? Before I ended my full-time working life, I had a short period in the grand-sounding position of Executive Officer of the Disadvantaged Schools Program of the southern metropolitan region in Victoria. Every time I saw that title it always reminded me of the time I was in the chorus of Gilbert and Sullivan's *The Mikado*, because it was a beautiful Pooh-Bah name. I mention this because the Disadvantaged Schools Program operated on an index of disadvantage mostly based on material from the Commonwealth census. For a school to be placed on the program it had to satisfy the demands of the index of disadvantage. Thus, at times some schools, as a result of demographic and economic change, would be removed from the program.

I suggest that the index of disadvantage be reviewed and applied as a means of establishing whether boarding schools for the poor will be built. They must not ever be allowed to grow to the size of the congregate orphanages in my project. The numbers of children in each would no doubt also be modelled on the numbers provided for wealthy children in non-government schools. At the risk of boring you, these too are funded by federal grants. I would suggest that, while most children placed in them would be wards of the state, there should be some opportunities for parents to use the boarding schools as respite care givers without having to have a child made into a ward. As well, it is possible that some children may want to gain respite from their parents, but this issue would require very careful study before it could be put into practice.

Now I will come to the concept of lesser eligibility. I would hope that now in the 21st century we have moved away from the concept of the 18th century poor laws, determined as they were to reduce the burden on the ratepayers of the shire or parish in their provision for the poor—or are we still thinking, in the *Oliver Twist* way, that the workhouse is all that we will pay for? I would expect that now we believe that world's best practice means that the standard of living and quality of life of a ward of the state or any other children wholly dependent on government for their livelihood would be equal to the standard of living and quality of life of any other child

in the country. To believe otherwise is to say that a three-year-old who has become the responsibility of the state must always be subject to a significantly lesser degree of material and financial care than a three-year-old who has not had to be looked after by the state. We should look on these children as if they were our children or grandchildren. Was it not a former prime minister who said that no Australian child would be living in poverty?

**CHAIR**—Ms Gaffney and Mr McIntosh, both your submissions are very thorough and concise. We have all had an opportunity to read them.

**Senator MURRAY**—I have a question to both of you. The contribution that scholars and researchers can and should make in these matters is huge, because policy makers need to be fed not just an understanding of the effects from those who have been affected but also the kind of rigorous and academic analysis which enables a proper translation of that into policy directives. I have been startled by the lack of long-term and in-depth analysis generally into these matters. It is a relatively recent field.

With respect to your two universities, which are very substantial institutions in Australia, the University of Melbourne and Monash University, do the libraries or your supervisors—those you have access to in the academic disciplines in these areas—have regard to the rich material available from the bringing them home inquiry in 1997 and the Senate inquiry into child migrants which reported in 2001? I am referring to all the books, the submissions, the *Hansard* record of the hearings and the reports. That is a huge, diverse and current body of information. Have either of you been advised to use or have you used those as sources and inputs for your own work?

**Mr McIntosh**—My work was completed in 1985, and that was when I graduated. I am afraid that from that time on I became pretty much a layperson, with minimal contact with the university where all that research was going on. I apologise for not being able to add anything to that.

**Ms Gaffney**—I would say that those documents are kept in the parliamentary papers section of the libraries at Monash and Melbourne; I am a graduate of Monash. I encountered a problem with the Wilson report while trying to find a Melbourne university masters thesis which had been used. I went to the Baillieu library and asked, ‘Where is this masters thesis?’ and it was not there. At Melbourne university, masters theses are held by the department in which the thesis was completed, but that was not indicated in the list of references for the report; whereas at Monash, say, a masters thesis would be held in the central library of the university. That was the main glitch I have encountered: if you use anyone’s unpublished material from a university, it is not always easy to locate that material, short of trying to chase up the actual author and trying to work out where they might be and whether the Fred Smith in the submission is the same Fred Smith you found on the Internet. That was the only problem. But the reports are all kept in the libraries et cetera. I have not used them much, but I have gone looking and I have not had much trouble.

You could probably name the academic experts on child welfare—juvenile justice is a separate issue. You have people like Shurlee Swain at Melbourne uni in history, who is excellent in criminology. I am in the criminology department but my training is as a historian, so I am the lone historian. I am the lone voice banging on about child protection issues and legal

responsibility. My supervisor is Professor Arie Freiberg, who has nothing to do with child protection. His area is sentencing, regulations and compliance. So, from an academic point of view, I am on my own in the department of criminology. There is no-one else. There is not anyone there at the moment who is employed as an academic involved in juvenile justice, for example. You can name people who have researched in that area—people like Donella Jaggs. You can name the big names. Those big names have not necessarily been added to much over the past 10 years or so, but there is some academic support.

**Mr McIntosh**—I became aware that the reverend mother in charge of the St Vincent's girls orphanage in South Melbourne at the time my wife was there was doing a masters at Melbourne university. I am not too sure in what faculty. I think it may have been arts.

**Senator MURRAY**—The reason I put the question to you in the way I did is because the scale of the number of children last century involved in institutions as state wards and in juvenile justice circumstances does not just run to tens of thousands; it could well run to 200,000. We just do not have the scholarship to deliver the absolute numbers, but the fact is it is a disgrace. The universities and the academics of this country would deserve a beating, if it were not illegal, because they have not done the basic historiography. The first discipline a historian knows is to go to the source documentation, and there is no better source documentation than that which has been provided to inquiries in this country, including the Forde inquiry, the Senate inquiry, the bringing them home inquiry and, of course, the specialist bodies which attend to this area. As one of the few current academics, I will leave you off the list, Mr McIntosh, but there are a few current academics interested in this field. It seems to me that your response has confirmed my instinct—that is, to date it is poorly coordinated and poorly researched. Although we have some very fine people on this committee, we are not really equipped in an academic sense to do that sort of job. The committee is being forced to break ground which has not yet been broken by the academics. That is more of a statement of my disappointment and irritation than anything else really.

**Ms Gaffney**—I think you will find that the people who do the research and the academics who are involved in researching state wardship issues are often the ones who have had some involvement with it. They will either have been clients of it or are people, like Shurlee Swain, who was a social worker. As I said, I have some personal knowledge in that my mother was superintendent of Winlaton before I was born. That is why it was on my radar. But for a lot of people, academics included, it is not something that they are aware of or think about particularly but, in my experience, the people who do research in this area have had some involvement with it on a personal level. Maybe those people are not very common in universities, for whatever reason.

**Senator MURRAY**—My remarks have a serious intention. I believe that this committee has to recommend that a university or a body be developed which has a specialist expertise and develops an understanding of these areas and their consequences, because they are directly linked to criminology, welfare dependency, social problems, drug and alcohol abuse, family relationship breakdown, despite all those people who did reasonably out of the system and escaped it. But I will leave it at that.

**Senator MOORE**—My question is for Mr McIntosh. Your paper is now almost 20 years old. Is that right?

**Mr McIntosh**—Yes.

**Senator MOORE**—A lot of the research that Senator Murray has talked about and the interest and the inquiries on this issue have happened in those 20 years. When you actually chose your topic in 1985 and when you produced your paper, was there a degree of interest in the community about the work you were doing?

**Mr McIntosh**—No, not to my knowledge; in fact quite the reverse, I should imagine. I think what you are asking is: how did it come about that I chose that particular topic? I do explain in the beginning that in fact the respondents concerned were keen to have something recorded in some way. But, to be perfectly blunt, I was required to have a project of this size to complete the degree. I discussed it with my supervisor and, luckily, there was a project right in front on me. My wife had been in St Vincent's, her brother had been in St Joseph's and St Vincent's, and her sister, who declined to take part in this, had also been in St Vincent's. I suppose it was handed to me on a plate, and I was rather fortunate.

**Senator MOORE**—When your work was completed, were you actually interviewed by people in the system at the state level to get more information about the kinds of things that came out?

**Mr McIntosh**—No. It just disappeared until this hearing. There may be a copy somewhere in the education faculty at Monash; I think you might be able to find one there. Apart from that, I think it has been a lost document until now.

**CHAIR**—There being no further questions, we thank you very much, Ms Gaffney and Mr McIntosh.

**Proceedings suspended from 10.55 a.m. to 11.06 a.m.**

**GLARE, Ms Jennifer Rosalie, Manager, Heritage and Information Service, MacKillop Family Services**

**HONNER, Dr John Roderick, Director, Practice and Policy, MacKillop Family Services**

**CHAIR**—Welcome. I believe that you have been provided with information on parliamentary privilege and the protection of witnesses and evidence. Is that correct?

**Ms Glare**—Yes.

**Dr Honner**—Yes.

**CHAIR**—The committee prefers evidence to be heard in public, but evidence may also been taken in camera if such evidence is considered by you to be of a confidential nature. The committee has before it your submission. I now invite you to make an opening presentation, which will be followed by questions from the committee.

**Dr Honner**—Thank you, and thank you for taking on this inquiry. Last year Jenny and I attended the conference at Liverpool that was organised by CLAN and Origins and opened by Senator Murray. That not only confirmed what we already knew but also transformed and energised us in putting into effect what we learned there—that is, that the quality of care of institutions today and in the past in looking after young people in their care is and has been nowhere near what it should have been. The pain of identity and separation of attachment expressed there was very moving. We have put a lot of work into what we have written here, but we would defer to those who have grown up in care and have a different view.

MacKillop is a fairly recent organisation. Our expertise is probably in the Heritage and Information Service we have set up, which provides support for those who have grown up in the institutions that we have grown out of. We also look after a few hundred of the 20,000 children and young people in care in Australia today. We have put some work into trying to improve the way they are attached to their natural families and have a sense of their own identity, history and belonging, and in our following through with them after they leave care. Our submission really addresses two terms of reference: 1(b), the adequacy of existing remedies and support mechanisms; and 1(g)(iii), necessary changes in current policies, practices and reporting mechanisms. You will have seen, I think, a list of our recommendations on pages 32 and 33.

It is particularly difficult in the state of Victoria at the moment; those who try to work in this sector have to find extra funding from their own pockets to generate such initiatives as our heritage service, our Leaving Care project and our identity projects. I would particularly endorse the importance of having at the federal level some sort of commission or standards as a way of responsibly dealing with this neglected area of social policy. I will take the rest of our submission as read and I am happy to answer questions. But first I will introduce Jenny, who has gained a lot of experience of working with people who grew up in care, to report on what we have done in our Heritage and Information Service.

**Ms Glare**—Thank you for the opportunity to speak with you today. When MacKillop was first formed in 1997, we inherited the institutional records of seven Catholic children's homes and orphanages. It was agreed that MacKillop would be the custodian of those records, although their ownership would remain with each of the religious organisations. So the board of the new organisation set about working out the best way to care for the records but really the best way to provide a service to people as individuals or to other members of their families who had had a connection to any of those orphanages.

So the Heritage and Information Service was developed to preserve and archivally care for the records, and to provide a service to people who want to access their records and, in many instances, wish to make a connection with their separated family members. We have been doing this work now since March 1998, and in that time we have had on average 20 new inquiries each month from people whom we help. Our work is very focused on working with the individual person about what it is they want to do—what sort of a journey they want to go on, how much information they want to find out, how much reconnecting with their family they want to do. In that time, we have been really privileged to sit with and listen to the stories of many hundreds of people who have grown up in that form of care.

In 2001, as a way of trying to acknowledge this part of our history, we held a series of reunions at the original orphanages and homes where they existed. In that year, more than 2,000 people came back to the place where they had grown up. Some people brought their grandchildren and some people brought their great grandchildren, but it was a time for them—if they wished to do so—to reconnect to the place where they had grown up. Many of the people who came back had very positive memories of their time in care, but many of the people had very dismal, very sad, very painful memories. But the people with the painful memories were even able to say after that time that it was still the right thing to do to come back.

I wanted to say that because what we have tried to do with our service is to have a really broad focus—to acknowledge the light and the dark and the shadow sides of people's lives. We are not wanting to put a rose-coloured view on what happened, but we really are open to sitting with people and acknowledging the pain and the difficulties that they went through. Those experiences have led to us doing an oral history project. The initial one was with the religious people who had worked in the orphanages, to capture their views of their lives there. But more recently we have interviewed about 50 former residents and we have their stories recorded about what it was like to grow up. Those stories have formed part of the basis for our history, which is currently being written and will be published next year.

I would like to conclude by saying that we believe really strongly in the voices of the people who grew up telling the story. Just to comment on a point Senator Murray raised earlier, we do know how many people we had in care across our orphanages because when we started the program we undertook a project, that cost almost \$200,000, to put all of our records onto a computer database. I think the final number was something like 115,000 individual client records, so that is a record of how many women and children went through the orphanages and homes that preceded MacKillop.

**Senator MURRAY**—Whilst you are on that, that is a very interesting figure. You say women and children?



**Ms Glare**—Two of the organisations that were part of the founding agencies of MacKillop were receiving homes for pregnant women and also homes that provided care to women post the birth of their children. So, whilst the other five were institutions for children, two of them cared for babies and single women.

**Senator MURRAY**—Does your database enable you to give a demographic profile: ages, sexes, that sort of thing?

**Ms Glare**—The database does enable us to do that. So we can tell how long people stayed in care—whether it was just a few weeks, a few months or a few years. Many of the adults that we now work with commenced their lives in the babies home at Broadmeadows but moved through to the next institution when they were toddlers, the next institution when they started school, and their final institution where they grew up and exited at 16 years to join the work force.

**Senator MURRAY**—What period is covered?

**Ms Glare**—The records date back to 1857, so there are records from 1857 until the date that MacKillop was formed in 1997.

**Senator MURRAY**—Would your organisation be able to provide the committee with a summary of the profile and the demographic that you refer to?

**Ms Glare**—We would certainly be able to provide the numbers of children that were at each institution and the age range of the children according to the function of the institution, but the question of demographics is a little more difficult. There is a wide variety in the records that we inherited. Some of the records are very rich in describing the circumstances and the communities from where the children came; other records are very sparse in their information. There is certainly information as to the reason children came into care—whether it related to the death of a parent or the death of both parents, whether they were placed there by their parents or whether, as state wardship developed, they came into care as a result of state intervention.

**Senator MURRAY**—Could you provide that? I doubt that there are many records as comprehensive as that. That would be invaluable to the committee.

**Ms Glare**—I think in Victoria all of the major providers of care in the private sector have records. The real richness that MacKillop can contribute is that the board decided to put an investment into this service. Because we were struggling to locate and find records in order to release them to people, we had to undertake the project initially, and that has then been so valuable. For each institution we could just count how many children were there, and we know that. The plaques that were commissioned for the reunion project listed the numbers of children or women at each of the homes, so that was an important thing to be able to do.

**Senator MURRAY**—Returning to my question, would you be willing to provide that for the committee?

**Ms Glare**—Yes.

**Senator MURRAY**—Thank you very much.

**CHAIR**—Who made the decision that a number of these children went into one of the seven Catholic institutions?

**Ms Glare**—The children that went in as private admissions would have been on a request that was often made to the local priest or to the local doctor. Families that were in difficult circumstances, historically, would have contacted someone in the community or the children would have come to the attention of religious congregations and been admitted into care. But, as time went on and there was greater state intervention into neglected children—from, I would say, the 1940s onwards—the main form of children coming into care would have been through being made wards of the state.

**CHAIR**—I asked this question because yesterday we had evidence from a gentleman called Francis Patrick Golding. He was put into a situation where he was Catholic but had to receive Anglican communion and all the rest of it. Why would someone with such an obviously Irish-sounding name get put into that sort of institution and not into one of the seven Catholic ones?

**Ms Glare**—We have in our case records a number of examples of Catholic children being retrieved from the Protestant orphanages because the Catholic congregation got wind that they were there. Equally, I do have to tell you, we also have examples of Protestant children being exited out of our institutions. You have to remember that religion did play a big part in determining where you went. In a lot of the files on children who were state wards, which we help adults to access, quite often there is discussion of what religion the children are. Sometimes, where one parent was one religion and the other parent was another religion, the children were separated because the parents could not agree on them all going to the one place. But, in the main, children went to institutions on the basis of the religious denomination that was specified, and that probably continued until around the 1970s, when it would not have been a factor anymore.

**CHAIR**—Regarding the database on the children who went through the institutions—and you heard evidence earlier about the inspectors that went into the institutions; they commented on whether the beds were hard enough and whether there was enough clothing et cetera—have you done anything more? MacKillop had an opportunity to see what a number of these children—some of them are still alive, and I suppose that some are dead—made of their lives. Do you know how many of these children committed suicide or ended up in jail—or became prime ministers? Do you know anything about that?

**Ms Glare**—We have not done such detailed research, but I guess we know anecdotally that, when they exited, the lives of people who grew up in care have taken a variety of paths. Certainly some people have suicided, some people have been in jail and some people have never been able to form relationships—have never been able to marry and have children—but I guess the reverse side of that is that we continue to be amazed at the resilience of people who grew up in that form of care. It seems to me that people who were able to keep some connection to their family of origin have been able to survive that process to a much greater degree than people who were completely cut off from their family of origin have.

**Senator HUMPHRIES**—What records have you kept of the training and qualifications of the people who worked in those institutions, particularly before MacKillop Family Services was formed? The committee has received some comments about people coming into the system who

were extremely poorly trained. Obviously, the religious staff who worked in those institutions would have had separate paths towards that kind of work, but, for lay people who worked in those situations, have records been kept about those sorts of things?

**Ms Glare**—There would be some records, but I doubt that the personnel records from those eras would have survived. The St Joseph's Babies Home at Broadmeadows ran a mothercraft training school from 1935 onwards, so the religious staff that worked there and at St Joseph's Receiving Home in Carlton were, in the main, mothercraft nurse trained or medically trained. Across the other institutions, the religious staff would have been trained as teachers and there would have been other religious staff who were untrained but working with children. Certainly when child-care courses came in, through the Institute of Social Welfare, all the religious congregations were among the first wave of employees of the non-government sector in Victoria to undertake those courses. But they did not start until the 1960s.

**Senator HUMPHRIES**—It was about the same time as deinstitutionalisation was starting to cut in.

**Ms Glare**—It would have been beginning, but it was not completed until much later.

**Senator HUMPHRIES**—You talked about the provision of information to people who have been through this system. Are there any circumstances today where information would not be provided to a person who has been through that system?

**Ms Glare**—There may be in other organisations and other services, but we at the Heritage and Information Services operate under the privacy legislation that has recently been enacted. Where children who were in our care had been adopted, their records have to be released to them under the provisions of the adoption information service. Once that requirement has been met, people may then choose to come to MacKillop to look at our photographs or to see if we have any additional records. We believe very strongly in a process of openness in terms of releasing our records. When we first set up our service it would be fair to say that we received some criticism from other providers for our willingness to be open—to release records. We release records according to the privacy legislation, which would mean that we could not release information about a person to somebody else unless that person has given permission for them to receive it or unless that person was deceased.

**Senator HUMPHRIES**—So information pertaining to an individual would be fully accessible in the case of an institution that is now under the umbrella of MacKillop Family Services?

**Ms Glare**—If we hold the record, we will release the record; but we only hold the records that we inherited when we were formed in 1997. It would be fair to say that, before that time, records that were made at the time children were in care were destroyed or have disappeared, or would have been thought to have had no value by the then holders of the records. So I do not believe we have inherited the complete set of records, but whatever we hold we release unless the requirements of the privacy legislation would indicate that the records should not be released. In the time that I have been doing this work there have been very few circumstances where I believed that releasing a record was going to cause the person receiving it to do harm to themselves or to another person. We do not just put it in an envelope and post it to the person.

The person comes in to meet with us and we go through it with them. If they live interstate or a long way away then we send it to them by post, but we ring and speak with them and go through it over the phone or we invite them to meet with another organisation near where they live.

**Senator HUMPHRIES**—Has anyone ever taken out legal proceedings to enforce access to information, such as seeking an injunction or something of that kind?

**Ms Glare**—To access their information?

**Senator HUMPHRIES**—Yes.

**Ms Glare**—Not to MacKillop, but I am sure that people would have taken them out against other organisations.

**Senator HUMPHRIES**—I am referring to MacKillop. Thank you.

**CHAIR**—How detailed is the information? We heard that there seems to be a lot of information.

**Ms Glare**—The records vary. Some of the oldest ones are quite rich in information; it might seem unusual that between 1850 and 1890 people were writing some detail about people.

**CHAIR**—What sort of detail are you referring to? How tall you were? That your eyes were blue?

**Ms Glare**—Some of the records do give physical descriptions of what the children looked like, physical descriptions of what they were wearing and physical descriptions of their home situation. From the 1940s onwards there would be more detail in the records. Also, given that at that time most of the children coming into our institutions were also state wards, it is always really important to get the state wardship record. Whatever we hold is a little bit of the picture that goes with that. The state wardship record usually has more detailed information.

**Senator MOORE**—The parts of the paper that look at recommendations for the future in relation to children being moved between foster care and things like that are really positive. I hope they are being taken up in the industry, because that is the future. But in terms of the past, you only cover listed institutions in Melbourne and Geelong—that is right, isn't it?

**Ms Glare**—They are the founding agencies that MacKillop grew out of. But perhaps we could say that we do a lot of consultation with people who know they were in an institution but are not sure which one it was. They ring up to use our service for advice to try and get to the path of where they might have been.

**Senator MOORE**—How many institutions run by the Catholic Church in Victoria are not covered by MacKillop?

**Ms Glare**—The ones that are not covered are the Sisters of the Good Shepherd, who ran Abbotsford, Bendigo and Albert Park; the Sisters of Nazareth, who ran St Joseph's, Sebastopol and Nazareth House at Ballarat; and then there is the Morning Star Boys Home—

**Senator MOORE**—That is the one that was linked to the juvenile justice program.

**Ms Glare**—and the St John of God Brothers.

**Senator MOORE**—So they are Catholic Church organisations but they are not part of MacKillop?

**Ms Glare**—No. The ones that are part of MacKillop grew out of the Christian Brothers, the Sisters of Mercy, and the Sisters of St Joseph.

**CHAIR**—Why aren't they part of this information? What decision was made that put these seven institutions in and excluded the other ones? In the evidence we have had before us these ones get mentioned on a lot of occasions.

**Dr Honner**—The history of MacKillop's founding goes back quite a way—to the 1970s, when the leaders of the institutions used to meet occasionally within the Catholic social welfare network to discuss policy and other matters. It became evident that the future was going to be different from the past, and there were various discussions about the direction to go and there were workshops held. Most parties involved in that scene were part of those discussions, and I am not sure why some chose not to be in them. I think the Sisters of the Good Shepherd had actually moved out of direct care work, but in the end it was certainly the Christian Brothers, the Sisters of Mercy and the Sisters of St Joseph who took the risk of handing over everything they had to a new organisation.

**Senator MOORE**—On paper, the model that you have is a very positive one in terms of access and openness and people being able to find records. Is that not reflected in other organisations? Is it peculiar to your organisation?

**Ms Glare**—I guess the difference is that the congregations gave us the records to care for and for us to provide the service and the other congregations hold the records and they provide the service. When the new organisation was formed, it was an opportunity for us to look back, to see where we had come from and where we wanted to go and to have a real commitment to the people who had gone before us, to the people who had been in care before. I guess the fact that they chose to fund the service is a mark of the vision and leadership they had in that area. Certainly, our service is consulted on a regular basis by Protestant and non-religious organisations and by other Catholic organisations about the model that we have set up. It is probably true to say that for some organisations today there is a fear of engaging with people that have grown up in care in the past. I think we were really fortunate that the board of the new organisation was not fearful about that and saw that to go forward we had to acknowledge the past, which was not always going to be good but was there.

**Senator MOORE**—Do you have people on the board who actually lived in care?

**Ms Glare**—On the advisory committee to the board for the Heritage and Information Services, we have two places always for former residents. They are currently filled by two very active and very wise people who contribute a lot to how we should provide our service. That has been a really important resource for us.

**Dr Honner**—There is one former resident on the board of MacKillop at the moment, but it is not a policy necessarily to have that.

**Senator MOORE**—But there is that real experience in the process. In terms of networks, because all these organisations have networks, do people who work for places like VANISH—and we heard from them yesterday—have relationships with your organisation so you can work together to identify the issues and help people through the process?

**Ms Glare**—We have interaction with VANISH and with other organisations.

**Senator MOORE**—I just mentioned VANISH because we heard from them yesterday.

**Ms Glare**—We also have involvement with, for instance, the Koori records task force in Victoria, which is devising a directory of services for Indigenous children in care. We would contribute through other forums as well. We have been involved in speaking at seminars to raise the profile of this issue and to encourage other organisations to put policies in place, firstly, to preserve their records and then to think about the service that they might provide.

**Senator MOORE**—Finally, in terms of what has happened over the last 20 years, with the raising of awareness about things that went on in institutions, how do you work with the people who work in your organisation to help them to confront the kinds of realities that are there in 2003 for the Catholic Church when so much of the experience we are finding out is so damaging? What kinds of things do you do for the people who work with you to provide that support so they can move forward and work with people? In your submission, you have given us what you do when someone comes to you with an issue where they are claiming that there was abuse, and you have got paragraphs about how you handle that. I am interested in how you handle the environment for the people who are working in the industry when it has become so clear what the problems of the industry were.

**Dr Honner**—It is perhaps not quite as simple as that, because the problems are in the industry today as well. So people are well aware that this is an area where very vulnerable children and young people are often put in situations that actually increase their vulnerability and that still happens today. What we have done—and this will perhaps answer your question most directly—is set up a system of identity training. That has involved Jenny and another worker who helped write this report, Terri Scott, who have piloted a lot of ways of understanding and addressing how a young person's identity is formed. Jenny has given some examples of former residents who have come back and what their journey has been like and how difficult it has been but also how healing it is when they find their history, even if it is just finding a place or a grave. The power of that really washes over our workers now who have taken on the identity processes. So we do life books, scrapbooks and videos and make memories with young people. There is a lot more emphasis on reconnection with natural family. It influences them in that way.

**Senator MOORE**—The key element in the report is identity. That is a major issue for people finding themselves and their past so they can move forward. But I am particularly interested in the evidence that has come forward quite openly over the last few years about viciousness, abuse, horrific behaviour. We heard yesterday from people who just blame the Catholic Church. As you are representing MacKillop in that process, I am interested to know what you have done with your staff and how you handle that anger, that betrayal, that personalisation.

**Dr Honner**—I do not know that we have done very much directly there. People often ask me informally—and they probably ask Jenny too—whether I know something about the history of the place. We both work at St Vincent’s orphanage, which goes back to 1854, and they ask what this place was like. There is a volunteer who lives around the corner from me who I drive to work and home once a week. For years now, he has given me the living history of the place. What he describes you would not describe as best practice, but his experience was not anything I would call vicious either. I am sure some vicious things happened, and we know they did. It has not really become a big issue in some sites. I think there are a couple of sites in Geelong where more serious issues have been addressed and, not working in that environment, I am not quite aware how much they are handled. But I know there are links. Probably we have not faced that issue as such; it is probably in the too-hard basket.

**CHAIR**—Many people have indicated that they would not seek assistance from any group related to the institutions they were in. How would you respond to that point of view?

**Dr Honner**—Our recommendations say that in every state there should be two ways of accessing records and that people should be supported in their approach. One of those ways should be managed by former clients, with some support, for those who do not want to go back to the church bases. There are people who do want to go back as well. This should be managed so that both those needs are met. There is one last thing I would say that is important. I know that your main interest is on the past, but we are in serious danger of continuing this neglect in the future. So evidence about present practice really needs to be addressed and looked after.

**CHAIR**—Why do you say that?

**Dr Honner**—For evidence, there is the *Background Briefing* program on 19 October on the ABC on high-risk kids, which was a very strong survey. There is also the Victorian consultancy report on the Child Protection Outcomes Project. We know that it is not going well at the moment, and there is plenty of evidence and research to back that up. We are pretty hamstrung in what we can do. At the moment in Victoria we are suffering productivity cuts, which will limit these self-funded operations that we do which are already necessary. It is a very difficult situation. We are looking for you to lead us forward.

**CHAIR**—Thank you, Dr Honner and Ms Glare.

[11.42 a.m.]

**CHAMLEY, Dr Wayne Alfred, Treasurer, Broken Rites Collective, Australia**

**CHAIR**—Welcome. Is it correct that information on parliamentary privilege and the protection of witnesses and evidence has been provided to you?

**Dr Chamley**—Yes.

**CHAIR**—The committee prefers evidence to be heard in public, but evidence may also be taken in camera if such evidence is considered by you to be of a confidential nature. The committee has before it your submission. I invite you to make an opening presentation, which will be followed by questions from the committee.

**Dr Chamley**—Before talking to the submission, on behalf of the organisation I represent I want to express our gratitude that this inquiry is taking place. As Senator Murray indicated yesterday, we presented before this committee when it conducted its inquiry into child migrant schemes. At that time we made the point strongly that the members of that committee—its membership was slightly different from that of today—needed to recognise that what they would hear about the experiences of child migrants could also be heard from, at that time, about 100,000 Australian born non-Indigenous citizens. I acknowledge that Senator Murray, in particular, took up this flag and worked diligently to convince the Senate that this inquiry should take place. When the committee reports, the trilogy will be complete and the public record will reflect a terrible time of some 70 years in Australia's history—a time which very few Australians are knowledgeable of and many are in denial of and which should never, ever be repeated into the future.

I would like to make a few minor acknowledgments before I get into the detail. I want to recognise the Indigenous peoples who were the original owners of the land which we occupy. Their descendants have been affected by these policies and actions in the past also. That is recorded in the first report, the *Bringing them home* report. I want to acknowledge the role that the media has played in Australia, because I do not believe that we would be where we are today if we had not had a whole range of professional journalists who were often prepared to go way out on a limb—and I know, because we interact with them very closely—and run stories which began to expose what has happened. It is still an unfolding case. It is not just about the Catholic Church. It is clear that the Salvation Army is now coming up on the ramp. It is clear that the Anglican Church has got problems, but as a church it seems to have been able to respond to them more than the others. It is clear that state governments, through their agencies, abrogated in a very serious way their responsibilities for children.

I want to acknowledge a minor league—the workers within Broken Rites, the unsung people who are small in number but who have been at it for 10 years. I would like to read into the public record the following names: Chris McIsaac, the president of the organisation; Jackie and Richard Ivers, who are present today; Bernard Barrett; John McNally; Eileen Piper; and Stephen Woods. Our campaigns over the last 10 years have largely been carried out by these people, through letter writing, working the media, advocating for people, advising them on how to get access to



their records, accompanying them to police interviews, being with them in the courts and counselling them about launching criminal prosecutions. We have been behind at least 90 criminal convictions right across Australia. There are still several in the pipeline. We have written to bishops, monsignors and agencies. We have been to public meetings. We have called for changes in practices. It is all done on a voluntary basis. We run on a turnover of about \$12,000 a year and we keep a few thousand dollars in the bank. We own two computers and a telephone.

I would like to also acknowledge the bravery and the guts of all those people who have written, often for the first time, about their experience. The ones that you faced yesterday you will face time and time again as you move around Australia. It is very easy for me to appear in this sort of thing, because I have done this in my professional life for years. But it is absolutely daunting for a person who has never appeared before any examiners at any time in their life to face this sort of situation. What is really pleasing to me is that so many women this time have been able to move to a point of disclosing what was done to them, invariably by males but sometimes by females. That is all I want to acknowledge.

I had not actually looked at the submission since I put it in the post, and there are a few things there that I want to comment on. There is heading missing of 'Advice to the Senate committee', and that is the need for research and whatever. I hope Senator Murray will give me a question on that. Looking through it, I should have pulled all the major recommendations into one point, and I did not. But I would like you to take on board that this matter needs a national royal commission. There are too many bodies buried in files et cetera. This will go on for decade after decade, in terms of addressing the needs of the people so far affected. Other organisations like CLAN and VANISH are getting stronger. It will go on and on, because we will not back off until we see a national royal commission. Flowing from a national royal commission, we need to see, as is set up in Ireland, a compensation trust. There the responsible authorities representing the perpetrators—be they religious, state government or whatever—negotiate about the compensation trust. In Ireland, it is 500 million euros. There is then a compensation tribunal which hears the cases of individuals whose lives have been absolutely destroyed by these experiences.

That is No. 1. No. 2 is that we have to have a national agreement between the Commonwealth and the states that, in all situations where children are being cared for by persons outside of the biological family, there must be independent inspection of that caring situation. You would be surprised that it is only four years ago that St John of God was refused an exemption from inspection by the public advocate in Victoria, and yet I have listed, as you see in my submission, what members of that monastic male order did for 25 years. It is only since the Bracks government came to power, and we went to see the then minister, that community volunteers can inspect those facilities. I am not yet aware of any person who went through the St John of God system who has ever got his records about anything. Not a single record has been delivered. So we have to have some independent mechanism of inspecting any foster care arrangement et cetera, without treading on the toes of the foster parents who are working diligently, as the last speaker yesterday told us. Maybe the use of a community volunteer model, as operates within the Victorian Office of the Public Advocate, might be a way to go with that. We have to extend mandatory reporting requirements—we said that in the submission—so that any person at the level of a bishop in any denomination is required to report. There are too many instances of cover-up.

Later I will ask that you accept a supplementary submission from me. You can read it when you are buckled up in your seats on the way to Adelaide. You do not have to read the whole lot. It relates to South Australia. In September 1991, after a tip-off about films in the position of a certain person, police in South Australia investigated. The certain person worked at a school, caring for intellectually disabled boys. On 4 August 2003 the person pleaded guilty to five of six charges for paedophilia. This has never got out in the media. There is a legion of people involved in this 10-year history.

I would like to suggest—it was hinted at yesterday—that a recommendation has got to come from the committee to get the states and the Commonwealth to agree to initiate data capture. It is not rocket science. Perhaps we can start to capture data from simple questions on Centrelink forms, Medicare forms, court and prison documents, such as: were you raised in institutional care? Tick. Over a time, you will download a huge amount of information that can then be interrelated to the use of health services, housing services et cetera. I have not gone through it in detail, but it should not be rocket science; they are very simple things. The question is: will the states agree to setting it up? It would, of course, have to be done on a voluntary basis.

Another recommendation—and this is what Senator Murray was hinting at—is that the Commonwealth initiate a program of social research and analysis in this area. We have a vehicle that might be the conduit: the Institute of Family Studies. But, given the politics that went on after Don Edgar retired, with the new appointee, we have got to get all-party agreement on some of this stuff. I am not saying that the institute would do all the work, but it could commission academic departments and government agencies to start to pull together all these things which, I believe, translate to a monumental cost to the community.

The other thing I would like to see the committee recommend is that something goes to COAG which initiates the conduct of five-year plans focusing upon the child. The model to look at is the mental health system; we are now into the third five-year mental health plan. There are very strong similarities in this rush by governments to go towards deinstitutionalisation; they did it with mental health and they did it with child protection. The mental health patients came out of the asylums and landed in the streets. We have had to go through these five-year plans to try and shore it up—to focus on areas that could be corrected quickly—and to recognise other areas that need a longer-term fix. I am not saying it is there in mental health, but at least it is happening. It seems to me that in the child protection area it is an absolute void. It is jealously guarded by the states and the costs are largely borne by the states.

I agree with the second speaker: we are going backwards as a nation. If we do not start to crystallise the first set of priorities and the second set of priorities and so on there will be another Senate hearing here in the year 2040—we will all be pushing up lilies—which will be hearing the same things again. Let me speculate on what I think is going to be one of the big drivers of what might happen in terms of a blow-out of child protection crises over the coming years. I would like to read into the record what I call the ‘Melbourne Cup’ selection of diseases causing major disability. Currently, if you look at the ranking, the five most community-affecting diseases worldwide, in order, are lower respiratory infection, peri-natal conditions, HIV-AIDS, mental illness/depression and dementia, and diarrhoeal diseases. As communities become more affluent, according to World Health Organisation data, by 2020 ischaemic heart disease will be No. 1, followed by depression/dementia at No. 2—it shifts from No. 4 to No. 2—and then the others.

Added to that, in Western societies we are yet to see the impact on families of parents having had the experience of recreational drug usage prior to becoming parents. I believe that is an absolute time bomb. There is very clear clinical evidence—pathology—that these patterns of drug usage are likely to have long-term effects. What will happen in families where one or the other parent has been a user? They have children on their hands and—bang!—something unfolds. I cannot give you all the data, but someone like Fiona Stanley will probably be thinking the same way.

They are the major recommendations I hope the Senate can take on board. In talking to the submission, we tried to identify what we had picked up in terms of themes and occurrences from working with numerous survivors over a long time. There is a whole section dealing with the Order of St John of God, because I came to view that this had to be put on the public record. This order is, I believe, not even fit to exist within Australia. We have argued with the state government that its commercial arm, St John of God Services Victoria, is not an appropriate organisation to be a major service provider within Victoria. It has fallen on deaf ears. The minister's chief of staff says, 'It's too hard.' I cannot see how it can be too hard to simply say, 'As of tomorrow, the contracts are going to Anglicare'—or something like that—and the people that you look after stay where they are. Another organisation is running it, and we don't want to see you on the doorstep ever again.' There is a whole lot of material there which raises questions about probity. To me, it suggests gross inattention to detail in the formulation of Commonwealth-state agreements in following up what actually went on. It suggests to me, even today, a massive rip-off of men with intellectual disability in terms of the way their pensions are being siphoned off and what they are used for. It is a total of violation of their human rights. These fellows have bank accounts, and someone within the organisation has access to those accounts. The parents are not consulted, the guardians are not told about it, and the money is just moved out of the accounts. It buys assets for the operation, like minibuses and so on.

**CHAIR**—Thank you, Dr Chamley. You must have some questions after that presentation, Senator Murray.

**Senator MURRAY**—I have found that policy makers and bureaucrats lack the understanding that in harming a child over a few years you end up with many decades, often, of harm, which has huge social and economic costs. To me it is so self-evident in physical and financial terms, never mind in human and social terms, that you have got to deal with these matters if you are going to improve your society. I have found an inability to persuade the highest in the land—but I cannot name them because they are private conversations—in all sorts of spheres; it is almost impossible. There is a total inability to understand anything but the short-term pain, the short-term cost, of dealing with these things. What is your experience with ministers, bureaucrats and community leaders, in the direct cause and effect knowledge that you have? What is their reaction to what you say, in a general sense?

**Dr Chamley**—It is just in the too-hard basket. A major deficiency is that we are not seeing the analysed data put out before them to begin to get them to realise that something is not going well. We are seeing the analysed data come out in the mental health system, with studies of coronial records linked to criminality—bang, bang, bang; that sort of thing—and that becomes the basis for the next set of targets in the five-year plan. We have got to have that sort of system built in to protect children. This is not just the institutional thing; this is children in general. If we have forensic psychiatrists saying that one in four girls can expect to be abused and one in eight

to one in 10 boys, that is a time bomb. These experiences are recorded deep in the limbic system and they sit there like a landmine. The person often represses it, and they go into life and they have families, or they do not have families, and they have overseas trips and then the odd adverse circumstance begins to occur; two or three of those coalesce at some point, with the fellow in his 30s or 40s, and—bang!—he tops it. I can give you data. The risk of suicide in just those boys in the St John of God system is 17 times the coronial calculated expectation of suicide. In one class from St Alipius Parish School in Ballarat—these are men in their early 40s—a quarter of the class has already suicided. There are one to two suicides a year in Ballarat which are all attributable to the activities of three paedophiles. These fellows lead totally dysfunctional lives, and their wives and partners are trying to hold the whole place together. I meet them and I advocate for them.

Rather than just thinking about numbers, I can show you a photograph of some young boys in the St John of God system. There are 12 boys there, and they are all in school uniform. I know four of them. You will notice that eight of them have a biro mark on them and four have not. I asked one of them, 'What is the biro mark?' He said, 'When I reached 40 I sat down—because they all keep in contact with each other—and worked out who was still alive.' I asked, 'What about those four?' He said, 'They all suicided.' So you have these clones, where there is dramatic impact, and that is not understood by the bureaucrats. A lot of people are in denial about this. This is a landmine in their brains and it just sits there. If a number of things coalesce—divorce, loss of a partner or a child—then, bang, it is all over rover. So it is no good saying, 'Let's just have 'counselling'.' You have to have special counselling. You have to have heavy duty psychiatric treatment. You do not go to the rank and file psychiatrists; you go to psychiatrists who have been treating the Holocaust victims. It requires that level of precision and targeting, and we are not anywhere near it across Australia at the moment. As you say, there may be 200,000 people walking with these creatures on their shoulders all the time.

**Senator MURRAY**—You have been on this case both professionally and as a volunteer for well over a decade: is it a hopeless cause?

**Dr Chamley**—I do not believe so at all. The difficult thing is to get the state governments to face up to their responsibilities. I concur with yesterday's comments. I have never seen such a sanitised submission as the one put in by the Victorian government, and it obviously was sent to the Solicitor-General to work through before it was signed off by whoever the minister is. Within the Catholic Church, it is pleasing to me to see that the congregation is now starting to mobilise. It has taken them 10 years, but Voice of the Faithful is now being set up within the Catholic congregation. They are not happy with the bishops either. My view is that half of the Catholic bishops in Australia should be run out of town, but so far they have been able to get the ear of important people.

I think there is a view at the moment, particularly with this Prime Minister, that the separation of church and state can be fiddled around with at the edges. The appointment of the previous Governor-General, a cleric, is a case in point. The education bill in 2000, where the Catholic Education Commission were treated differently from all other private schools, is another issue. They accepted that, even though, according to Mark Latham, it cost them \$140 million. I have here a copy of the *Hansard* of that, dated 5 September 2000. If you want to look at that, it is from Mark Latham's speech in the second reading debate on the States Grants (Primary and Secondary Education Assistance) Bill 2000.

The third case we saw was the previous Attorney-General giving legal standing to the Catholic bishops of Australia to contest the High Court case dealing with access by women to IVF treatments. They lost the case, which was run against them by a woman in Victoria who is now dying. We seem to have this blurring at the moment, so I do not think that objective decisions can be made. That is what is disturbing to me.

**Senator MURRAY**—As you know, in America the Boston case—if I can call it that—was a combination of congregational figures, the media, an independent DPP and, of course, racketeering legislation, which is the equivalent to our royal commission legislation. It was only that combination which busted that case open. You have mentioned that the media play a helpful role here. In my experience, DPP's have been poor and governments have been abominable, and they control the setting up of royal commissions. I do not think the problem is any different in Australia. It is very difficult to contemplate any government being willing to pursue a royal commission of the kind you outline—though, of course, a state can run a royal commission, if it wishes, into its own state. You advocate a royal commission but, given your experience of a conspiracy between politics and prosecution, the police and the judiciary—and I use the word 'conspiracy' deliberately; I mean not a criminal conspiracy but a conspiring not to do things—do you think it is genuinely possible for a committee like this, with concerned senators, to activate the sort of royal commission that you recommend?

**Dr Chamley**—To answer that question first—and I do want to come back to the question about whether I have given up hope—I think it is within the purview of a committee like this to make that recommendation based on what it has been presented with. The community then has to be mobilised, and I believe that there are sufficient organisations around now with sufficient experience that we could mobilise—we put it to the thousands of people out there who are caring for children, who hear these things and are very disturbed about them but do not have an entry point. That is the way it goes. It is a long march—I am not denying that—but it has happened in Canada, it has happened in Ireland and there is no reason why Australian society should be denied that, so that we can get this whole thing corrected before we face another 50 years of it.

You asked whether I had lost hope. I have talked about the Catholic Church. The other thing that is pleasing to me is that two years ago the Anglican Church had 26 separate processes for dealing with allegations of child abuse and now they have one, which is out for discussion. So these organisations do respond to these things. There has now been exposure of the Salvation Army, who are held in very high regard across the community—and yet there were dark days in that organisation. They have yet to face it. We are in correspondence with them, to find out the process by which they are going to deal with it. They do not appear to be able to answer us yet, but we will not back off—we will keep going. If we have to, we will start to work the media, to begin to hop in to the Salvation Army. I am not attacking individuals; I am attacking the hierarchy of the organisations, because I believe that they should take responsibility and accept the accountability which goes with the office they hold, rather than duckshove it.

The supplementary submission represents 10 years of duckshoving—I cannot give you all the detail, because the person who gave it to me would be identified: boys abused by a paedophile denied counselling for 10 years; aberrant behaviour in the families, for 10 years. It could probably have been corrected, just like that, had there been an admission that something had gone wrong in the school; call in the parents; let us see what has got to be done—but, no, we will fiddle around for 10 years, and still those young men are not getting treatment.

**Senator McLUCAS**—On the question of data capture, I notice that a condition of self-identification was put on the question you were asking of Centrelink and a whole range of other agencies: ‘Were you raised in institutional care?’ There is then a question about the veracity of the data you are collecting. I do not know, but I would imagine that there are people who do not want to tick that box, who want to forget.

**Dr Chamley**—It is entirely voluntary.

**Senator McLUCAS**—Then is the data that we are collecting robust enough? What I am leading to is this: what is the best way for us to collect data so we can actually do this research to prove the point?

**Dr Chamley**—I will take that on notice. My bet is that the survivors of these experiences, by and large, would see that as a first attempt by a government to find out what the hell is going on and that they would voluntarily go for it. I think the bigger problem will be when those sorts of data sets become available. Because of the way the privacy legislation is working, there are going to have to be some heavy duty decisions made about who is going to be able to access certain things. That can be done. I know that certain persons in the mental health system of Victoria have access to all the coronial records, and they are the only ones who have that. You pick the horses for the courses. It is not rocket science, but it would require some uniform policy positions and attitudinal positions within the states.

**Senator McLUCAS**—What data are we collecting now? What do we know about the life experiences of people who have been raised in institutional care?

**Dr Chamley**—From the 400 submissions that you have received, I would say nothing.

**Senator McLUCAS**—Nothing? Is there no systematic collection of data happening, even by the Institute of Family Studies?

**Dr Chamley**—No. Not only that—and this follows on from what Senator Murray was saying about the speakers who had done academic studies: we do not even have a point in Australia which captures all the publications. We do in mental health. We have three people at La Trobe, funded by the Commonwealth, to capture every mental health publication. Anyone can go in. They will say: ‘All these data sets exist. All these reports exist. You can start your research.’ We do not even have that. We even have the situation where the *Bringing them home* report is out of print.

**Senator McLUCAS**—I cannot get a copy.

**Dr Chamley**—I believe that the *Bringing them home* report should be in every household across the nation. It is out of print; it has been out of print for two years. It is an appalling indictment on Australia.

**Senator McLUCAS**—With regard to counselling services, it has become evident to me, just in this short period of time that I have read about and listened to people, that we need to do much more to assist the profession to be able to deal far more appropriately with people who are presenting. Do you have any recommendations about how that should occur?

**Dr Chamley**—Unfortunately some psychologists see this as a growth industry. Our experience is that, while many of them are well intentioned, we question the ethical approach of some of them—counsellors and psychologists who are linked to law firms and that sort of stuff. They are the conduit for the lawyers to get in on the case, even though every lawyer in the land knows that under the current arrangements—certainly with the Catholic Church—it is impossible to get a case up in civil law. They will fight night and day until it gets to a point of settling out of court. We will not get a judgment. We have another case being formulated at the moment in Melbourne, which is trying to breach the wall.

The respectable law firms around Australia will tell people, ‘We don’t advise you go to civil litigation, because we don’t believe we can get it up,’ but there are a whole range of other ones who say, ‘Come in, sit down and have a cup of tea, and sign this form which says that if we get the case to a certain point you’ll agree to settle.’ So they start off with a lack of experience and they go until it gets too hard. Their real focus, I believe, is on recovery of their costs, so they have some namby-pamby settlement. The person is put through all this trauma and nothing is really resolved.

In the Catholic Church all they then have to go to is the so-called Towards Healing process, which, as I said in my submission, is a lottery. My experience of the Anglican process is that it is very good. It is very sympathetic; it is very fast. There is a whole sharing of things that goes on. But the Catholic one is adversarial right from day one. We are yet to find out what the Salvation Army process is going to be.

The training of psychologists and counsellors in this area has got to have that level of clinical training. It should not just be the barefoot psychologist who comes out with a three-year degree. These are highly traumatised people with major psychiatric disabilities and major psychological problems. The best outcome, I believe, will be where these two types of professionals are treating in tandem.

But, of course, so many of these people who have been survivors have never had education and have never been able to access that treatment at that level, because it is so costly. I now see time and time again with the Catholic Church process that a survivor will be in crisis, he or she is put on some course of counselling, and it gets to eight, nine or 10 episodes and looks like getting a bit expensive, and the view is, ‘Let’s accelerate the mediation and get all this finalised,’ and—bang!—they are out the door, see you later, nothing is done for them. I have been concerned about some fellows for whom I have advocated for a whole day and the mediation has not been resolved. I have at times wondered whether they would get home that night; whether they would wipe themselves out before they got there.

We have approached DHS at least three times to set up a system, as you heard before, where a person’s records are not simply sent out in the post, because they read, ‘This person has a mental deficiency,’ and ‘This person’s mother was a drunkard,’ and all that sort of thing. They still send them out in the post. They cannot even set up a simple system of a card saying: ‘We have your records available. Would you like to come in and to bring someone with you? Understand that there will be material that may be disconcerting to you.’ Instead, they just go in the post. We have had police phone us on a weekend, saying that some poor person is in his car with the exhaust pipe through the back window, because he received his records on Friday night. It is like

water off a duck's back. I was pleased to hear that MacKillop do not do it that way. Why can't the state agency adopt a similar practice? It just falls on deaf ears.

**Senator HUMPHRIES**—I want to be clear about the number in that category of people who are traumatised and who have severe psychological problems. Are you saying that they are typical products of Catholic welfare services in this state, or are they a significant minority?

**Dr Chamley**—It is not just the Catholic Church. The institutional experience, I believe, is a big driver. It presets their risk factor for subsequent mental illness. We are in this country facing a pandemic of unipolar depression. My bet is that, if you had the records—a simple thing would be for a person to tick on a sheet: 'Were you in institutional care?'—you would see that a big driver is this childhood experience.

**Senator HUMPHRIES**—Are you saying that that is the typical experience, that people typically have trauma and those severe psychological problems?

**Dr Chamley**—About three years ago a report from the New South Wales criminal justice system based on interviews with some 140 female prison inmates found that 90 per cent said that they had been abused as children, and for 85 per cent of those it was sexual abuse. The incidence of borderline personality disorder in the general population is about four per cent. In men who have been sexually abused as children, it is about 37 per cent. It is a big driver of these things, and we have these statistics of one in four girls, one in eight boys—and it is just going to go off like a rocket.

**Senator HUMPHRIES**—Are you saying that, in the case of St John of God in Victoria and this matter you have just tabled in respect of the Catholic diocese in Adelaide, the police investigations have been lackadaisical? You are basically implying that they are unmotivated.

**Dr Chamley**—They have been on holiday for 10 years.

**Senator HUMPHRIES**—Do you suggest that is because police are underresourced, or because some sort of pressure has been placed on them not to take these matters seriously? What is the reason for it?

**Dr Chamley**—I cannot answer that. Two or three times a year, for several years, I was in contact with the community policing squad in getting people to make police statements. At times the police said that only one detective was on the case. As you will have seen, we went to see the former minister for community services. At the time we raised it with her, she assured us that she would see the minister for police. I phoned her three times over the next few weeks; she had not seen him. I finally called her 10 minutes before question time. You can always catch a minister if you phone them at Parliament House 10 minutes before question time; they are in panic mode. The call comes through and you have got them. I said, 'When are you going to speak to him?' She said, 'I'll see him today'—and she did. They put three more detectives on the case. Those detectives are not on the case anymore, as it is not seen as a priority.

But with a story of the same order—boys being abused only two years ago in a home in New Zealand—the New Zealand police are now investigating 14 paedophiles. They have even been to Australia and interviewed New Zealanders here. It is a different mind-set. Why is it that the New



Zealand police can move so quickly on several matters of criminality and yet the Victorian police are now 10 years down the track and a number of the alleged perpetrators are now dead? There is just not the same urgency. It is not just that case; we see others. There will be the individual police officer who really gets on the trail, but the police as a body probably have higher priorities. There are more demands being made on them, and this just does not get the attention that some people believe it should get.

**Senator McLUCAS**—You have talked of the need for a royal commission; we have been given that evidence from a lot of people. Do we need a state based royal commission or a national royal commission? Can you explain to the committee why?

**Dr Chamley**—We certainly do not need state based royal commissions; we need a national royal commission. Subpoenaing documents held by state agencies will be just as important as subpoenaing documents held by church agencies, and so it will be difficult; the Forde inquiry made that clear. There is the submission from the whistleblowers; they allude to a few things there. Governments do not like royal commissions unless they know before they sit what the findings will be. But a national government can sit back from the process and let it roll. I do not think matters would be resolved by having a state royal commission.

**CHAIR**—There being no further questions, Dr Chamley, we thank you for the evidence you have given.

[12.34 p.m.]

**GIBSON, Mr Charles Davidson, Social Policy Adviser, UnitingCare Victoria and Tasmania**

**CHAIR**—Welcome. I believe that information on parliamentary privilege and the protection of witnesses and evidence has been provided to you.

**Mr Gibson**—Yes.

**CHAIR**—The committee prefers evidence to be heard in public, but evidence may also be taken in camera if such evidence is considered by you to be of a confidential nature. The committee has before it your submission. I invite you to make an opening presentation, which will be followed by questions from the committee.

**Mr Gibson**—UnitingCare Victoria and Tasmania really appreciates this opportunity to be an active part of this inquiry. UnitingCare Victoria and Tasmania is actually an umbrella organisation which is the head office, to put it in simple terms, for a range of UnitingCare agencies across Victoria—some 140 agencies. About 42 of those are community service agencies of one sort or another.

I should declare my background: I am a social worker who commenced as a social worker in the Department of Social Welfare in Victoria and worked in that department in child protection and alternative accommodation and care services for 17 years before going on to undertake a number of other roles. I am relatively new to UnitingCare, having started there in March 2003. This inquiry provided a really important opportunity for us to reflect on our history in the provision of alternative accommodation and care and obviously a very useful opportunity for me to get a sense of where the organisation was on these sorts of issues. I think you will see from our submission that reflecting on our history reveals quite a mixed record of experience and a range of responses to people who have been looked after in our facilities. I have tried to reflect that throughout the submission.

As an introduction, I would like to share two stories with you—one old and one relatively new. The old one is a story of Charles Gibson, as a very green social worker in the Department of Social Welfare, embarking on a mission to do annual reviews for state wards who were located in various facilities around Victoria. I travelled off to a provincial city and arrived at the destination, turned in to the driveway and saw this huge driveway up to this rather immense and very austere looking building. It was fairly daunting for me as a young professional to drive up that driveway. I walked up the steps into the fairly cold paved area and sat on one of the leather chairs until I was summoned into the office of the superintendent.

I have to say that the welcome was less than enthusiastic. He went back behind his desk, pulled out a card file and started to take out the files of the individual children and tell me what he wanted to tell me about what had occurred to that child during the year. He would say, ‘Johnny has attended school. He is going okay, his parents have visited him once this year,’ and put the card back into the file. It was clear that discussion was not on the agenda and it was very difficult to engage in it. When I suggested that in fact we might actually meet some of these

children that was seen as a very outlandish request from a state government social welfare worker. We did manage, after some negotiation, to meet some of those children. That is a story of how we worked in one era.

The second story is based around a reunion that was organised—I have made mention of this on page 8 of the submission—of former residents of Kilmany Park in Gippsland. Kilmany Park had actually ceased to exist as an organisation, and there is a similar organisation with a similar name down there that provides family services under our auspice. They had frequently had people who lived in the surrounding area who had been previous residents of the Kilmany Park organisation. Because it was a training farm and a number of the young people there developed skills in farming, they tended to remain in that area.

Some of those people expressed a desire to have some sort of reunion and some sort of bringing together of a number of the people who had been in that institution. With help from some of those former residents, the organisation managed to come up with a list of about 180 former residents. Those that could be traced were contacted, and I think 70 said in the first instance that they were prepared to attend, that they would like to attend and that they would find this a really helpful and perhaps healing thing to do.

On the day of the reunion and in the days preceding it, some of the staff at Kilmany who were involved in its organisation received numbers of phone calls from people saying: 'I can't do this. This has raised all sorts of issues for me. I've never talked about my institutional background with my family.' Some people actually got in the car, got to the location, continued driving and turned around and went back because they could not get out of the car and face the issue. A number of others went to the reunion and found it really helpful and talked about the positive relationships that they had had. To me, that was a really good example of the mixed response that people have to their experiences in institutional care. Some people see it as extremely traumatising and negative, and it has been, and for others it has been less so. There is bit of a flavour of that through the submission that I have given to you.

In conclusion, the recommendations that we have put forward in this submission certainly reflect the experiences of our agencies, but they also draw heavily on the experiences of the other two inquiries that Dr Chamley spoke of this morning. Whilst there have clearly been improvements over the years, I would echo the MacKillop comment that we still need to keep working on these issues, that there are still a lot of things that need to be looked at in terms of professional practices and the sorts of care and care models that we provide that might help to prevent these sorts of things happening in the future. I will leave my introductory remarks at that and give you some time to ask some questions.

**Senator MOORE**—I have a question to do with the reunion process—you are the third person to mention it today, and your experiences have been very positive. If you were as horrifically treated as some of the people who have given evidence to this committee were, I doubt you would participate in a reunion. How do you, as an organisation in 2003, engage with the people that may have had these kinds of experiences in one of the organisations—prior to it being the Uniting Church—that was in your area? What process does your organisation have in place? I could name one, but I will not, because it would be wrong; but if somebody identified now that they had had an experience in one of the many organisations, what would the process be?

**Mr Gibson**—Coming back to your point on the reunions, a number of people would not want to respond to that. Others have issues with the organisation but have in fact strong peer relationships with the people that they were together with—perhaps unity in adversity was operating there—so they may still want to come to a reunion, particularly if it has a strong organisational capacity from former residents themselves, from VANISH or from one of those organisations, behind it. If somebody appears now, obviously most of these organisations still have some sort of structure that continues. For those that do not, then some records are held centrally in our synod office. If the person were comfortable in working with the church organisation, or one of those organisations out there in the community auspiced by the Uniting Church, then they would be put in touch with those organisations. If not, then I think we would be having discussions with other organisations, like VANISH, to say: ‘Can we work in a different way with this person? Can this person be referred?’ I think it is a matter of linkages.

**Senator MOORE**—If somebody wanted to have the information about their background that we discussed with MacKillop and they had happened to be a woman who had gone to the Presbyterian babies’ home, would they be able to get the same degree of record through your organisation as we were told they would be able to get through MacKillop?

**Mr Gibson**—I did not hear that bit of the presentation, but I understand that they have done a lot of work in that area. I do not think we are nearly as sophisticated as they are in terms of those records; I think the records are quite patchy. Some organisations held quite comprehensive records; others did not. It would also be an issue of whether or not a person was a ward of the state. If they were a private placement and they were in an organisation that did not keep good records, then there is not going to be a lot of information there. If they were a ward of the state and in that same organisation, there still may be a state file that would provide a range of materials.

**Senator MURRAY**—Am I to understand from your reaction to Senator Moore that you do not have reasonable records, for any of the institutions, of the demographics—or, at least, the basic numbers—of children who went through those institutions?

**Mr Gibson**—As I have said, I am relatively new to the organisation but, in the work I have done in preparing this submission, I have found that some of those organisations have very good records. For example, UnitingCare Connections has done a lot of work around pulling together the records of all the previous organisations that now comprise the one, larger organisation. Some of the older organisations’ records, which are held in synod, are patchy: for some individuals they have a reasonable amount of information; for others they might only have a card. Regarding the other organisations, Talley Ho, for example, had a fire—so they lost a significant number of records. So it is a mixed picture, in terms of what is there, but our role would be to try and facilitate access to what is there.

**Senator MURRAY**—Let me ask you a question on notice. I do not want to burden you with work that you might not be able to complete but could you please try and ask the constituent organisations for their history? Could you ask them whether they have a knowledge of how many children went through those institutions, and provide a summary of that for the committee? The great difficulty we will have is understanding the scale of it. It is quite startling to see in the MacKillop stuff that 115,000 children are listed over pretty well 150 years. If we

can build up some understanding, we might get a sense of the number of Australians who have been affected by these experiences. Do you understand what I am after?

**Mr Gibson**—Yes, I would be happy to pursue that.

**CHAIR**—Mr Gibson, thank you very much for coming along today.

**Proceedings suspended from 12.47 p.m. to 1.27 p.m.**

**HERMANN, Mr Anton, Chief Executive, Australian Council for Children and Youth Organisations**

**CHAIR**—Welcome. Is it correct that information on parliamentary privilege and the protection of witnesses and evidence has been provided to you?

**Mr Hermann**—Yes.

**CHAIR**—The committee prefers evidence to be heard in public, but evidence may also be taken in camera if such evidence is considered by you to be of a confidential nature. The committee has before it your submission. I invite you to make an opening presentation, which will be followed by questions from the committee.

**Mr Hermann**—Thank you and thank you to the committee for having commenced this inquiry. We are very supportive of the objectives of the inquiry. We have focused particularly on term of reference 1(g), based on our commitment to prevention in this area—prevention of abuse and neglect of children and young people in care settings. There are no panaceas when it comes to a framework for prevention, but we believe that it is an initiative worthy of experimentation, research and coalition building with other organisations in a constant pursuit of the best ways of ensuring that a child or young person in a care setting, whether institutional or otherwise, is safe.

Our organisation is only two years old. We were created by a coalition of philanthropic trusts and foundations that have a long record of making financial contributions to organisations in this area. Their concerns were based very much on the same concerns that would have led to this inquiry being held—concerns about the constant revelations of abuses of trust in care settings and how such abuses can be prevented. Even though the organisation has been made possible by these philanthropic trusts and foundations, it has grown very much into a coalition that includes community service organisations seeking some new directions. It also has great support from police, magistrates and judges in Victoria.

It is very much an embryonic organisation, and the project we have conducted is also best described as embryonic, but we believe that there are some very positive signs that have come out from the independent evaluation of the work that we have done so far. We also feel that there is at least some role we can play in advocacy in relation to public policy responses to these issues. We recognise that the issues have traditionally been dealt with primarily at a state level, based on the state constitutional responsibility for child protection, but we believe there are ways and means that a federal government and parliament can influence the national debate on these matters.

Other than that, I would ask that the submission be taken as read, except for one concluding remark: when we as an organisation are seeking to develop an accreditation process for organisations working with children and young people, we are struck by the fact that accreditation is already a given in public hospitals and in residential aged care. We have even seen the extension of the whole principle of accreditation to child care, through the National Childcare Accreditation Council. But when it comes to the really sharp end of services for

children and young people—namely, out-of-home care, also known in other states as substitute care—there is no such framework.

The only evidence of such a framework would be the attempt to develop the Office of the Children's Guardian in New South Wales, which is in a very early stage of development. I understand that the legislation in New South Wales has not yet been proclaimed and therefore the functions of that office have not yet commenced in relation to accreditation. But with that one exception, where there is at least some movement, there is an absence of an accreditation framework in the remainder of Australia. Considering the evidence that was given yesterday, which was overwhelmingly known through other avenues prior to this inquiry being conducted, it seems quite astounding that there is not a quality framework for such services. Other than that, I am very happy to take any questions and assist the inquiry in any way.

**CHAIR**—Thank you. Recommendation 4 relates to using the accreditation model developed by your council in other jurisdictions. Have there been any further developments on this which you can discuss?

**Mr Hermann**—The main development is that we have had an opportunity to outline the model to a group of national organisations which work under the banner of the Australian Forum of Youth Organisations. Their interest in the framework is that, in providing services across state and territory borders, it is unclear to them what the basic requirements are on a consistent basis in relation to screening staff and volunteers and in relation to the development of child protection policies that would constitute effective risk management. Their dilemma in terms of the inconsistency between state and territory regimes has brought them into discussion with us. There is potential for us to involve them in a similar pilot project, as has been conducted in Victoria. That is the main initiative.

**Senator HUMPHRIES**—I assume that your suggestion that there should be nationally consistent frameworks for providing out-of-home care and your comment that only one or two jurisdictions have put in train the process to set accreditation based standards does not mean that any of the jurisdictions allow people to provide such care without some kind of screening process.

**Mr Hermann**—Taking Victoria as an example, there are requirements in the standard funding agreement for screening to occur. In Victoria's case, screening is in the form of a national records check—otherwise known as a police check. So, yes, there are contractual requirements in respect of screening, but then taking it a step further and translating that into a more holistic accreditation process is where the gap is.

**Senator HUMPHRIES**—Would most jurisdictions that you are aware of not require anything beyond a police check to accredit somebody or allow them to practise as an out-of-home care provider?

**Mr Hermann**—Yes. The standard requirement is the police check, except in New South Wales. There a more comprehensive screening requirement is built into legislation. That resulted from the Wood royal commission, where certain deficiencies with screening were noted. The New South Wales parliament created a process that requires the combination of a police check, a check of one's employment record for any relevant disciplinary matters that might be related to,

for example, a sexual misconduct case, and a check of one's history regarding domestic violence where an apprehended violence order has been taken out by the police or another public official for the protection of children. So in New South Wales a three-step screening process is undertaken. That kind of more comprehensive screening test, we believe, would be a worthwhile initiative for other jurisdictions.

**Senator HUMPHRIES**—Would you recommend the New South Wales model rather than, say, the Queensland model, which has gone some way down this path as well?

**Mr Hermann**—The Queensland model is certainly one step ahead of the other states in that it is a universal system that applies to organisations that are both government funded and community funded; it applies across the board. The only concern with the Queensland system is that essentially it is a legislated police check requirement which does not go beyond a police check.

**Senator HUMPHRIES**—I assume that every state engages in—at least informally—an interview process for providers and conducts examinations for suitability on some kind of not necessarily standardised but at least regularised basis.

**Mr Hermann**—Yes; however, again taking Victoria as an example, a very important gap exists. There are requirements for funded agencies, but many other agencies which rely purely on non-government funding do not have such a requirement. Very recently in Melbourne, a court case occurred where a volunteer on a church camp—a volunteer cook—was committed to stand trial on a range of sex charges. This person had prior convictions both in Victoria and interstate, including convictions for sex related offences, but had not been and was not required to be screened. That is the type of case which is entirely preventable if a 'working with children' check, otherwise known as a suitability check, is put in place as a standard requirement as part of state based legislation.

**Senator HUMPHRIES**—So you are talking about a regime, say, based on that of New South Wales, which would also screen people who took part in activities like being a cook in such a situation, not just those who are nominally or formally carers for particular sets of children.

**Mr Hermann**—That is a very helpful question because it teases out another difficulty—and that is that the New South Wales model would address those issues, except that it does not currently apply to volunteers. So paid staff, whether in agencies that are government funded or privately funded, are all required to undertake a 'working with children' check; but volunteers currently are not. A pilot is under way in New South Wales to extend the regime to volunteers, but it is not yet mandatory. In each jurisdiction, whether New South Wales or Queensland, there are gaps with current legislation. The overall objective from our perspective would be to have a robust and comprehensive system that was universally applicable around the country and not to have to have this situation of different standards applying in different states. Our starting point is that any child in Australia, regardless of where they live, should have some basic protections in relation to these matters, especially because we know as a community that these things have occurred on a far too regular basis over time—and not just in the past.

**Senator McLUCAS**—I notice the Commonwealth Department of Family and Community Services and VicHealth have put some funds toward the establishment of what seems to be a



model suitability check. What moneys did the Commonwealth put in, and what was the arrangement between your organisation and FaCS?

**Mr Hermann**—The Commonwealth contribution to the project was \$50,000, on a one-off basis, and it was specifically to assist with the establishment of the scheme. That means that the vast majority of our funding is still from non-government sources and that, as far as recurrent funding is concerned, we have to look elsewhere.

**Senator McLUCAS**—When you received that \$50,000 from the Commonwealth, was there some discussion about how your work would be further implemented? Where are you up to in your discussions with the Commonwealth?

**Mr Hermann**—The grant was subject to a standard contract. The clear indication was that funding would be on a one-off basis, as seed funding, if you like, to get the project up and running. I mentioned before that we have established a dialogue with the Australian Forum of Youth Organisations. That has been very much assisted by FaCS. FaCS coordinate the twice-yearly meetings of that group and were able to put us in contact with them. So there are non-monetary ways that FaCS are able to assist us.

**Senator McLUCAS**—Is the dialogue positive between yourselves and FaCS in terms of where further implementation of the check list might be used?

**Mr Hermann**—Yes. When we recently had our independent evaluation report completed, the Minister for Children and Youth Affairs, Larry Anthony, launched that report and, in doing so, called on states and territories to examine the model with the view to potential implementation. So there has been some quite positive support at the federal level.

**Senator McLUCAS**—Good. We will get a copy of that. Was it in his speech?

**Mr Hermann**—Certainly there is a press release in that regard on the FaCS web site.

**Senator MURRAY**—Is there any debate about language in the development of these processes and standards? I will give you the context in which I put that. I quite often find people using the word ‘abuse’ as a euphemism. It may be inappropriate at times to abuse a child but not illegal. For instance, some of the evidence we have had of remarks being made of children showering I would regard as abusive but certainly not illegal, whereas the rape or the sexual assault of children is and always has been criminal. I notice, for instance, that your Child Protection Policy states ‘taking all reasonable steps to prevent emotional, physical and sexual abuse and neglect.’ I would agree with that, but physical assault has a criminal category and sexual assault has a criminal category. I just wonder why the language of criminality is missing in your document. It is not peculiar to your organisation, but it is peculiar to others. That is the context in which I put the question: do you debate language and the severity of what you are trying to prevent?

**Mr Hermann**—We certainly do debate language. To some extent, those issues have probably held us back. The definition of ‘abuse’ is definitely a major issue, as would be the definition of ‘accreditation’. These are all matters where, as one goes into deeper layers, discussions can be quite difficult. Our approach to your specific point about what constitutes abuse is that there

really are two streams. One is the legal stream that results in notification to a state based child protection service, and the other is matters which would cause any reasonable person concern but may not necessarily result in a legal process. If our objective is to achieve the best outcomes in care, we believe that it is not just a legal perspective we should be taking to those who are entrusted to an organisation; it is a much broader perspective about a moral duty of care as well as a legal duty of care.

**Senator MURRAY**—In the attachment, you refer to the definition of ‘abuse’ on page 64 of *Choose with care*. I do not have that in my package; perhaps you could send it through to the committee. Whilst I agree with you that there are two streams, from my perspective both streams need to be identified and dealt with. This question relates to some of the evidence you might have picked on before. It seems to me that in the process of accreditation there is also the opportunity to generate data to help collect some of the statistical information that policy makers need in order to know what is out there about both past causes and present effects. As an organisation have you discussed that at all? Do you attend at all to the need for the collation, centralisation and standardisation of the collection of data in this area?

**Mr Hermann**—Yes; it is vital for our work and we would certainly understand its importance to the committee. We have, I think, looked in the same places that others look in. There is the Australian Institute of Family Studies as a clearing house. Data from the Australian Institute of Health and Welfare is probably the high-water mark of what is the current state of play in out-of-home and substitute care; at least there are some hard numbers there about how many placements there are currently around the nation. But, as we go down that path, again we come up against there being different definitions across state and territory borders. I know that a number of organisations are looking for a focus on that particular issue—that, if we are going to be measuring issues in relation to out-of-home and substitute care, we do so consistently around the country. We have the agencies in place to do that work—AIHW and AIFS. But, because the data is generated at a state and territory level, we unfortunately have inconsistencies, and some of the comparisons we seek to make between jurisdictions are therefore not particularly solid.

**Senator MURRAY**—Would you add ‘the collection of data’ to your four recommendations? It is not within them.

**Mr Hermann**—Yes. In the way you have put it today, it would be most valuable.

**Senator MURRAY**—Obviously you would add to it the framework of being consistent and so on.

**Mr Hermann**—Yes.

**Senator MURRAY**—In the development of your models and an understanding of what is needed, do you consult activist on-the-ground groups? Many are involved but, for instance, there are people who have a great deal of experience, historically at least. There are the Child Migrant Trust, Broken Rites, CLAN, VANISH and many others. Do you try and consult those specialist organisations that have some understanding in these sorts of areas?

**Mr Hermann**—I must say that the main consultation we have had has been with the service providers themselves about what they regard as helpful tools in this area. Interestingly, the very

process of conducting this inquiry has brought us into contact with the likes of CLAN; that would be a spin-off from this inquiry. We certainly commenced dialogue that was not there previously.

**Senator MURRAY**—Are your founding and funding bodies aware in a formal sense—is it a topic for conversation—of how badly funded and how impecunious so many of the activist organisations are that are trying to deal with those that are harmed? Do they concern themselves with that area, or are they only concerned about the prevention field? Excuse my ignorance, but I do not know about the work they do.

**Mr Hermann**—The organisations, the trusts and foundations which have assisted our creation are certainly aware of that issue, but I think there is a blockage in that organisations tend to require tax deductible status in order to receive funding from trusts and foundations as a legal requirement, and advocacy does not tend to lend itself to obtaining tax deductible status; so there is a problem there in a public policy sense. It is the provision of service to people in need that would tend to create that legal status that would tend to be the blockage.

**Senator MURRAY**—That is a useful reminder to the committee, because, as you know, the change in charities laws is not yet before us. Thank you for that.

**CHAIR**—If there are no further questions, I thank Mr Hermann for appearing.

**Mr Hermann**—Thank you.

[1.52 p.m.]

**KEALY, Ms Chris, Regional Manager, Centacare Catholic Family Services**

**LARKINS, Mr Kevin Patrick, Chief Executive Officer, Centacare Catholic Family Services**

**YUNCKEN, Ms Mary Rose, Director, Counselling and Family Services, Centacare Catholic Family Services**

**CHAIR**—I welcome representatives of Centacare Catholic Family Services. Is it correct that information on parliamentary privilege and the protection of witnesses and evidence has been provided to you?

**Mr Larkins**—Yes.

**CHAIR**—The committee prefers evidence to be heard in public, but evidence may also be taken in camera if such evidence is considered by you to be of a confidential nature. The committee has before it your submission. I now invite you to make an opening presentation, to be followed by questions from the committee.

**Mr Larkins**—Allow me to open the proceedings for Centacare. We thought long and hard about putting a submission in, and in that context we canvassed our staff on the basis of the history of the organisation, which has something like a 68-year history, although my engagement in the organisation is not of that length—it is about 18 months. We have had about 68 years of involvement in families and child care. So our historical roots are there as an organisation. Our current experience in this area and also as a counselling agency that interfaces with families in crisis is that some one-third of the people who come through our doors express in confidence that they have been abused at some time in their life—not all through institutions. So we took a focus in our submission on looking at what it is that we assess from our experience to be the case that might assist the Senate committee address the issue. You can see from our submission that we have taken a focus of looking at the needs of the children and, in essence, we have a thesis that the current system as it exists creates systemic abuse for children in that they are subjected to, in some part, multiple placements that militate against their best welfare and health interests. I would like to invite both Chris Kealy and Mary Rose Yuncken to address this issue, because they both have extensive experience in this area not only within our agency but within other agencies in this state.

**Ms Yuncken**—I have had over 30 years of experience in out-of-home care of children. Over that period of time I have seen a huge shift in focus. When I first began as a practitioner—I am social work trained—it was at a time when children were placed in institutions. I started my career at the state's reception centre for boys. We had over 1,600 children come through per year, and they were placed very quickly in a number of large institutions. What happened to them after that was really up to chance. In those days there were not the resources or the staff to look into the individual needs of those children. Also, they had been made state wards and could remain as state wards until they were 18 years old.

Since that time, things have changed—and I think they have changed for the better. I have been responsible for managing a large number of family group homes. I think these are an excellent model, because you are able to provide qualified, experienced and trained staff to look after children in a family-like setting. I worked at St John's Careforce—now Anglicare—for 19 years. During that time, I believe that the children were, on the whole, very well cared for. Why I believe that model is a good one is that the staff are very well supported, they are given plenty of opportunity for skilling up—for professional development—and they are very closely supervised.

I am not saying that the model was perfect, but I think it was far safer for children than the current one—foster care—where people are placed with very well-meaning people but in a voluntary capacity, where you do not have the capacity to supervise them to the same extent. It is very difficult to really know what is going on in those families with those children. It is difficult to know whether those children are being abused. With the family group home model you certainly knew very quickly if a child was being abused, and you were able to do something about it. The foster care model has come as a result of the costs associated with the number of children needing to be placed in care and as a result of the way that the legislation is now—children come under protection orders for much shorter periods of time. Chris, perhaps you would like to comment about the regulations.

**Ms Kealy**—The regulations under the Victorian Adoption Act 1984 provide for some of what the previous speaker was alluding to, in terms of a systematic way in which agencies are to conduct the business of assessing and accrediting people and the sorts of checks and balances that need to be in place before there is a formal approval. Centacare has taken that knowledge and used it for our permanent care program. That represents the latter part of what we were talking about in our submission. It is very different from what happened from the 1930s onwards, when children, on a large scale, were placed in institutions and there was a range of care—good and not so good. Things are now emerging that perhaps none of us within the Victorian society were aware of at the time, and they need to be addressed.

From our agency's point of view, we have had checks and balances in place for more than 10 years. We have been running an adoption agency since 1935 and a permanent care agency since 1990. We have looked at the issues in relation to children requiring placement and children requiring stability. The first part of our submission focuses on the range of options that was available to children and the relative stability in placement and knowing where they would live and who they would grow up with. We think this is in stark comparison to what has been happening in the last 10 to 15 years, but particularly the last 10 years, in Victoria, where children's futures remain largely uncertain and undefined.

**Senator MOORE**—Ms Yuncken, you said that under the family group home arrangement that was in place you would be able to find out really quickly if someone was suffering abuse—how?

**Ms Yuncken**—With the family group home model, there are a number of staff going through—there is a 24-hour caregiver and their spouse, and often there is an eight-hour worker and some support staff going in—and someone would always say something; it would be either a child or a staff member. We monitored the staff very closely and, if they were showing signs of being overly stressed or whatever, we would send them off on leave or counsel them.

Fortunately, it did not happen very often, but there were always some alarm bells around. A social worker visited them at least once a week, going into the family group home and spending time there, talking about each child and how the needs of each child were being attended to. Often, staff might say, 'I'm just beyond it. I'm just finding this too stressful,' and you would just get in a reliever and send them on leave.

**Senator MOORE**—What happened? Did you find cases of people being abused?

**Ms Yuncken**—It is very difficult to substantiate. There were a couple of occasions where there were allegations of abuse. As soon as that happened, we would stand a person down. We would take them off the site and have a thorough investigation.

**Senator MOORE**—Yesterday we heard from someone who had been in a family group home, and they explained that one of the real stressors for them was that they would come home from school and find new house parents. I do not know which part of the state the home was in, but it was very disconcerting for young people who are in that situation to build up relationships with house parents and have them changed. Yesterday, we were told that that happened quite frequently during that period of time—I would imagine that would have been in the sixties or seventies. That experience was shared with us yesterday.

**Ms Yuncken**—I think that that is a problem. In the early nineties we had two state receptions centres, and when they were closed down St John's Careforce was asked to start up some temporary emergency care units. I do not think the staffing model was ideal for children. There were too many children and too few staff. They had to take children on a 24-hour basis, so they could have three or four children land on them at two o'clock in the morning. We had a rostered staff model for that, but I do not think that that works well for children. We were very fortunate at St John's in that I would say all the children who were with us long term—and when I say long term that would be 15 years—had the same caregivers for that period of time and, if they had a change, it would only have been one change of caregiver over that time. What I think was extremely abusive was that in the early nineties a lot of those family group homes were defunded and a lot of children who had been in them all their lives were affected.

For example, we had a sibling group of five boys who had borderline intellectual disability. They had been with the one caregiver basically all their lives. The eldest one at the time had just moved out. He was 17 or 18, and the youngest was 11 or 12. The caregiver was given a weekend to decide. She and her husband were told that her program had been defunded and she was given from Friday to Monday to make up her mind whether she was going to take the children off into the blue beyond and look after them herself or leave them in the care of the department, in which case the children would have been split up. Some of them would have gone into hostels, some of them would have gone into some sort of smaller family group home, or they were going to try to find foster placements for them.

There were a number of children at that time who had some really bad times. That was extremely abusive, and a lot of those children did very badly—very badly. One child I know was 13. She had no history at all of difficult behaviour, but then she lost her family group home mother, who she had had since she was 18 months old. Within three years, she had tried a couple of hostels and they had failed for her, she was out on the streets, she was on heroin, she had been

charged with armed robbery, she was in jail and she had had two children, who had both come into the care of the department.

**Senator MOORE**—That was in the early nineties?

**Ms Yunkken**—That was in the early nineties, yes. That was as a result of a change in policy—the move from the family group home model to the foster care model.

**Senator HUMPHRIES**—You seem to be saying in your submission that you think the policy pendulum has swung—I think you said this in here somewhere—a little too much in favour of returning a child to their natural home setting or to their natural parents when in fact other care is more appropriate. Is that a product of the legal regime, which as you point out does not emphasise the rights of the child so much as the rights of families to stay an integrated unit, or is it simply an expression of the value system at work within welfare services in this country at the moment? What exactly is the reason for that pendulum having swung that far?

**Mr Larkins**—I will ask both my colleagues to comment. It could be a combination of both. What we are saying in this submission and trying to put to the Senate committee is that there is a shift and that it seems unfortunate that what starts out as a well-intentioned brief, which was to look after the interests of the family and keep it intact, has in some instances militated against the best welfare interests of the child. For instance, you can have multiple placements, with children having 37 and 40 foster care placements, which really militates against any attachment potential whatsoever. Chris, you can speak more on that. Clearly, if there was one point we wanted to make in our submission it was the impact of that on children. Subsequently, down the track the impact of other welfare issues on those children and their children is quite substantial.

**Ms Kealy**—I certainly think the children and young person's legislation follows social policy, which is to look at the family as the core unit of society in which children are raised, nurtured, protected and educated, and in which their needs are met.

**Senator HUMPHRIES**—That is very much the Catholic Church's position as well, isn't it?

**Ms Kealy**—I think it is broader than that—it is not just the position of the Catholic Church.

**Senator HUMPHRIES**—No.

**Mr Larkins**—But we do represent Centacare Catholic Family Services, you are quite right.

**Senator HUMPHRIES**—That is right. Particularly it is a Catholic ethos.

**Ms Kealy**—Yes. Interestingly, within particular sections of that piece of legislation it says that, where it is in the child's best interests, (a), (b) and (c) would follow. But the way in which it seems to be interpreted through the legal system and all of the parties to that, as well as child protection, is that the natural family, the mother and father, are the first consideration no matter what. That has been the experience that we have noticed—and certainly the experience that I noticed in my previous work as well. It has swung so far in favour of parents to the exclusion of children's needs. That is why we are saying that it is out of kilter, and we are very pleased that

the Senate has taken this opportunity to seek comments from people. Perhaps, if our view is shared, there is some way in which that could be redressed.

**Senator MURRAY**—Counselling can be of two types: mandatory—that is, a court, a department or an institution may require a person to be counselled—or voluntary. I presume the people who come to you for counselling are on the voluntary side of things.

**Ms Kealy**—Yes, they are.

**Mr Larkins**—They are on both sides. We do see people who are mandated through conciliation, but most people come voluntarily.

**Senator MURRAY**—I am interested in the long-term effects of the ill-treatment of children. To some extent, you can tell how long the period of damage is by when the period of healing begins. Counselling is often a sign that people are ready to be healed and are starting the process of restoring their own balance. In your submission, at page 3, you state:

... we provide counselling for in excess of 3500 clients per year—

that is, in Victoria—

We have estimated that between 27 and 33% of clients requesting assistance with relationship issues, also have a history of childhood abuse.

Of those who have been harmed as children, typically at what age—as a generalisation—are they likely to present themselves for counselling?

**Ms Kealy**—Certainly in terms of the branch that I run, which is a fairly large branch down in the City of Greater Dandenong in the south-east growth corridor, people would typically present in their early 30s, but they can be as old as in their late 70s. In the submission I think we highlighted the fact that someone in their 70s was maybe dealing with childhood abuse for the very first time. It often happens at an unconscious level. So people come to an agency that is skilled in providing relationship counselling, because of a presenting issue relating to how they and their partner can or cannot get on or how they want to improve their relationships with their children, and in the course of the counselling process and outlining it often becomes apparent that there are previous issues that lend themselves to abuse having occurred in the families of origin and that that has been pushed to one side and not dealt with, and that comes up through the crisis of a potential relationship breakdown.

**Senator MURRAY**—So typically it is one or two decades after the abuse has occurred?

**Ms Kealy**—Yes.

**Senator MURRAY**—I assume the range of usual characteristics are there in that intervening period such as: family breakdown; difficulty with social relationships, including employment relationships; drug and substance abuse; alcohol abuse; criminality; sometimes, mental health problems. That is the indicative range of the signs of people being disturbed by their background, isn't it?



**Ms Kealy**—It is, and some people would have a plethora of issues involved in terms of their antisocial behaviour, whereas others may not. Others may have one or two of those factors present in terms of their struggle with life. But, be that as it may, what is causing their behaviour is at an unconscious level for them—whether it is in terms of substance abuse or whether it relates to early childhood abuse or assaults.

**Senator MURRAY**—If we accept the general proposition—and of course we have to be careful with generalisations, as you and I know—that counselling is a sign of a beginning of a restoration of self and of an ability or desire to get back on an even keel, one to two decades of untreated harm which has been going on before that happened—for instance, that which happened with children—is a clear signal to me of the social and economic cost of allowing bad treatment to go on. Would you agree with that as a general view?

**Ms Kealy**—Yes, I would, but only in recent times has there been an awareness that counselling is one of the methods to use to try to resolve things like that. People have perhaps not seen that other people have been abused too; they believed that it has only happened to them. They have had to struggle on. People bring their life stories with them, and you cannot help but be moved at times to hear that they do not know that that is not normal.

**Senator MURRAY**—What about your abilities with counselling? It is quite apparent from both the submissions to this inquiry and the child migrant inquiry that counsellors with general experience are often very inadequate and very poor when dealing with people who have a specific experience, such as institutionalised abuse and so on. Do you develop counsellors with special expertise and training in these areas who understand the environment and background, which differs vastly from a ward of state to an institutionalised child to an adopted child? They are very different experiences.

**Ms Kealy**—They are.

**Mr Larkins**—One of the features that I have noticed in the organisation is that it seems to have the capacity to hold on to staff. There are staff who have been with the organisation for in excess of 15 and 20 years who have developed quite extensive experience in certain areas. There is a high focus given to a supervision model that supports both the worker and their professional development. It is my experience that there is a suite of staff within the organisation who have select skills that are drawn upon for special occurrences within each of the branches. There is a collective wisdom that seems to have evolved from the work that is done.

**Senator MURRAY**—How do you deal with both the slur, because it is not true in all cases, and also the reality that many, particularly those who have been damaged, consider the Catholic Church, in your situation—and the Anglican Church or the Presbyterian church in other situations—to not only be responsible for what has happened to them but also have been an accomplice in covering it up and continue to adopt an aggressive adversarial minimisation of what has happened to them? As people devoted to trying to heal people, how are you dealing with that?

**Mr Larkins**—We have dealt with that on two fronts. One is that whilst we are a Catholic organisation we are not an organisation for Catholics. We are an organisation that is driven by the values and the philosophies of the church, which are articulated in that gospel message. It is

an agency that is, if you like, a by-their-deeds part of the church. It is our experience that people see you for what you do. The agency does good work; it actually does work with people. There is no doubt that there would be people out there who would think twice because of the name, but in our experience it does not seem to affect our work. The Footscray branch, which is a good example of that, would probably be one of the most diverse working environments that you could find, with something like 17 different languages spoken and Muslim, Turkish and Jewish people working within the organisation. My answer to that is that the very work that we do is what people know about, and that is what we promote: ours is a welfare agency and it is designed to provide support to families in crisis, regardless of religion.

**Senator MURRAY**—One of the tests of the integrity of an organisation is their reporting. If you, as an organisation, receive information which indicates that somebody has experienced criminal sexual assault or criminal physical assault as a child, or even as an adult, and they come to you, do you report it? Do you refer it to police in the appropriate circumstances, or do you handle it internally?

**Ms Kealy**—Is your question in relation to people being abused by someone in their family?

**Senator MURRAY**—The specific problem is that many people in many organisations, including a number of Catholic organisations, have conspired to conceal crimes—in other words, they have known that a criminal or sexual assault of a child has occurred and they have transferred the priest, tried to settle it internally and so on. To me, they have a clear responsibility: it was a criminal act and they should have referred it to the police. I assume those circumstances come before you at times if you are dealing with 3,500 clients a year. What do you do about it?

**Ms Kealy**—There is a formal protocol with the Department of Human Services child protection system so that if we have a reasonable belief that someone has been physically or sexually assaulted we must notify them—and we do. In turn, they have a protocol with the Victoria Police, so it becomes a joint investigation because of the criminality of that alleged action. All counsellors are trained in relation to notifying, and there are check and balances within each branch and through to the director of services about being able to notify—in my case, the regional manager. So that there is support for staff to do that.

**Senator MURRAY**—I am pleased to hear it.

**CHAIR**—Thank you very much.

[2.23 p.m.]

**CLEARY, Dr Ray, Chief Executive Officer, Anglicare Victoria**

**ROLLASON, Mr Russell, Executive Officer, Anglicare Australia**

**CHAIR**—Welcome. Do you have any comments to make about the capacity in which you appear before the committee today?

**Dr Cleary**—As well as being the CEO of Anglicare Victoria, I am a member of the council of Anglicare Australia.

**CHAIR**—Information on parliamentary privilege and the protection of witnesses and evidence has been provided to you. The committee prefers evidence to be heard in public but evidence may also be taken in camera if such evidence is considered by you to be of a confidential nature. The committee has before it your submission. I now invite you to make an opening presentation, to be followed by questions from the committee.

**Mr Rollason**—Thank you for the opportunity to present this submission to the committee. I will quickly summarise our 10 key points. Anglicare Australia is the national network of caring organisations and social justice organisations within the Anglican Church. We cover the whole of Australia. We have fairly substantial involvement in out-of-home care for children, and we have given a very brief summary of the nature and extent of that. Anglicare is in most states and states and territories across Australia.

Our major concern is that we are alarmed about the growing number of Australian children who experience abuse at the hands of their family members at home, but we are also concerned that care must be taken in any decision to locate children out of their family situation into care. So the challenge always is to get the balance right between addressing the deep concerns of children who have suffered abuse but not too readily resorting to placing children in out-of-home care. We therefore would certainly support expanded programs to assist families to address their needs well before the need for out-of-home care might arise.

As I mentioned in my introduction, many of our agencies are involved in foster care. Most of them feel that foster care is chronically stressed. Australia depends too heavily on foster care. The system is struggling under the weight of the demands placed on it and the limited resources available to it. In particular, the question of adequately providing reimbursement, training and support to carers is critical. It is essentially a volunteer system. People volunteer to provide the care to children in the foster care system. They struggle with the issues of reimbursement. They need more training and they need better resourcing. It is a challenge that faces the whole of Australia at present. We believe that something needs to be done about that fairly urgently.

These days there is limited emphasis placed on residential care but, in certain circumstances, it may be the most suitable care. In other situations it may not be the most suitable care, but children may be placed in it regardless of their needs. Obviously, we have argued that the needs of the child should be the paramount consideration. There needs to be a variety of options

considered. We believe there is a place for residential care, but at present there are very few places available in residential care around Australia. Increasingly, the needs of children are becoming more complex. We see emotional or behavioural disturbances, an increased risk of self-harm or substance abuse, emotional attachment problems and numerous other problems associated with abuse and neglect. This complexity is challenging people involved in the field—and, again, the volunteers struggle to deal with the complexity of the situation of the children they now find in their care.

Finally, we welcome the government's initiative for a national agenda for early childhood. We believe that is an important step forward. We will certainly do our bit to contribute to the development of that. The government has taken a stakeholder engagement approach, and we welcome that too. We believe that not only the children themselves but also the organisations that seek to help them have experiences and insights that are relevant to the development of such a national agenda. We hope within that that there may be some attention paid—and we have suggested this to the committee—to questions of definition. What in one situation may be abuse in another situation may be acceptable. For example, the issue of how children are spoken to often becomes a point at which judgments need to be made. So we think there are questions that need to be cleared up about what we are talking about when we talk about this range of unsafe, improper, abuse situations. Clarifying that may help to sharpen the response of both agencies and governments towards addressing these problems. That is a brief summary of our submission. Thank you for the opportunity to appear here today.

**Dr Cleary**—I would like to make one or two additional comments. There has been much debate in the media and elsewhere recently about institutional abuse. I do not want to in any way diminish that concern; I believe it is a very healthy sign that we now recognise it. As someone who has been involved in this field for over 35 years, I have to say that the issue of abuse is not new. A comment was made earlier about the way in which welfare agencies and churches have colluded on abuse issues. One needs to remember that, back in the seventies, when you had an issue of abuse and went to the police or the authorities no-one wished to know about it—no-one wanted to talk about it and no-one wanted to engage with it. In fact you were told to go away and solve the problem yourself. When I entered the field in 1970 there was a little black book that listed those you did not employ.

I suppose my first point is that this is not a new issue; it has been around for a long time—for example, we can go back to the industrial schools, the borstals, the workhouses, the orphanages, the mental asylums. I think we need to put this whole debate into some perspective. It is a very healthy sign, I think, that we are now as a community beginning to recognise it. My second point is that 95 per cent of abuse and neglect occurs in the family homes, not in institutions. The focus has been very much on institutions because, in a sense, we can be easily targeted and examined. But when I have raised the issue with the media in terms of, 'Let's explore it in relation to families,' the code of silence, once again, is predominant. I think that is a significant issue that we need to look at in this context.

My third point is that I think we are at the present time in danger in Australia of creating, using another term, a new stolen generation of children. The states and the Commonwealth, I believe, have neglected their responsibility to adequately resource a child welfare system in this state which would enable community service organisations and others to deliver the best quality practice that now the community, at least verbally, seems to be demanding. At the moment in

Victoria, we have a crisis in out-of-home care. We are losing carers. We have got multiple placements. We have got a child protection system in crisis. The issue of mandatory reporting needs to be revisited in terms of whether it is an effective means and way of achieving the sorts of outcomes we want for vulnerable children. We have high-risk adolescents in placements inadequately resourced and inadequately supervised. There have been media reports about this, there have been government reports, yet we seem unable to address the issue when it comes to the crunch of adequately resourcing these programs.

Instead, what we see happening throughout Australia is a shift of government responsibility to the community sector: 'Take on this responsibility and do this work, and the next time there's an abuse or neglect issue, we can blame you. We actually don't have to own it as a government or a community.' We have got young people leaving care with no resources. We have got working conditions for staff making them probably the lowest paid in Australia in the community sector. Despite representation to governments over and over again, this issue is not resolved.

In summary, I would like to say that this is a community responsibility. The wellbeing of our children, the healthy state of our families, is a community responsibility. It is not the responsibility of the community sector or government; it is a broader community responsibility. Instead of laying blame on these issues, I believe we need to look constructively at how we can build and support families in the future. That, I believe, is the agenda of community service organisations—not for one moment suggesting that we have not failed. It has been reported to me today that we have a case of abuse by a career. Our systems are in place, the appropriate authorities are notified and we can deal with those issues. But 99.9 per cent of our work goes on day by day supporting and enabling families and children to reach their potential with very little recognition. So my plea is that, in the context of this review, let us look at the positives that are happening and let us broaden the debate to the wider community.

**Senator MURRAY**—Dr Cleary, were you a part of any submission to the stolen generation inquiry or the child migrant inquiry?

**Dr Cleary**—No, we were not.

**Senator MURRAY**—Are you familiar with the submissions, the evidence, the hearings and the reports of those two inquiries?

**Dr Cleary**—I read them some time ago.

**Senator MURRAY**—You used the phrase 'instead of laying blame'. Do you accept the proposition that people who are living or have descendants who are harmed by individuals and organisations are entitled to pursue justice?

**Dr Cleary**—Most definitely.

**Senator MURRAY**—So when you use the phrase 'instead of laying blame', you are not saying that people should not seek to secure restitution of such rights?

**Dr Cleary**—Most definitely.

**Senator MURRAY**—I am pleased to hear it. You used the phrase, which made me prick up my ears, that 95 per cent of abuse goes on in the family home. I readily accept that not only the abuse of children but the criminal and sexual assault of children goes on in every circumstance in our community. But is it just a loose phrase, or have you got research or any data which enables you to put a percentage on like that?

**Dr Cleary**—It is not a loose phrase, that is for sure. It has come from sources on the whole issue of abuse that I have read. In the experience of Anglicare in Victoria, most of our work is with families who are outside the system, and in many cases the abuse and neglect issues come up through that process. So we are an agency that not only works with children in foster care and institutional care but also has family support programs, family counselling programs and drug and alcohol programs—a whole variety. That is the basis of the advice to me that most abuse and neglect happens in the family home. And I am not simply talking about sexual abuse; I am talking about abuse and neglect in the broader context. Emotional abuse would be the one that we would say is highly significant in the long-term wellbeing of children. So it comes from our practice base and our experience as an agency. That is primarily what I am saying.

**Senator MURRAY**—If I put into today's context, intuitively I think you would probably be right, in that institutions of that kind are almost non-existent. There are institutions, obviously, for people who are physically and intellectually disabled and there are institutions for care, as you know, but on nothing like the scale of the past. But would you ascribe that same 95 per cent figure to the past? One of the organisations to appear before the committee today said there had been 115,000 institutionalised children in their care alone in the last 150 years.

**Dr Cleary**—I have not actually thought about that question, so I am not sure I can give an answer. But I recall from my own childhood and my own experiences as a child that we lived in a situation which I am not sure I would have called abusive at that time but I certainly would have called neglect. I think that is one of the difficulties we have with definitions. In the seventies we talked a lot about child neglect rather than child abuse. The work of Henry Kemp and so forth in the seventies and early eighties, who were the pioneers—particularly in the United States—of much of this work, raised issues about child abuse and neglect. We tended to think much more in terms of neglect rather than abuse. So I think we have to be careful about using our understanding, our knowledge and our terminology today historically. I can recall my own parents talking about the emotional abuse as children during the war—just the context and the environment that people were faced with. I think that is often very different to what we are talking about today.

**Senator MURRAY**—The difficulty I have with your proposition is that, while it might not be true in your case, that is the language of apologists. The physical assault of children has always been a crime—

**Dr Cleary**—Yes, it always has been.

**Senator MURRAY**—and so has the sexual assault of children.

**Dr Cleary**—Yes.

**Senator MURRAY**—The evidence—and you must have regard to how much research the committee has had access to—is that the prewar state and federal requirements about corporal punishment and so on at institutions were very clear and they were disregarded by men of the cloth but also women of the cloth.

**Dr Cleary**—But they were also disregarded by schools right throughout the country.

**Senator MURRAY**—Not as much; we have had the evidence placed before us. I am concerned with your remarks from two directions: (1) you may not have had access to the depth of evidence that we have had both during this inquiry and in the past and (2) you as a representative of your organisation are using the language of minimisers and apologists.

**Dr Cleary**—I do not think so. I reject that—I do not think that is true at all. I am not saying that at all. I think language is a very important issue and I think language does change in its meaning and understanding. But I am certainly not at all an apologist for the past.

**Senator MURRAY**—The Anglican Church got praise today from an organisation which deserves to have credibility as being a long-term advocate and campaigner in terms of its protocols for dealing with issues of past criminal assault and abuse. That was in comparison to other churches, and I have heard that from elsewhere. From the perspective of Anglicare, how do you lock into that sort of thing when you are doing counselling or providing services and you come across matters of concern to you in terms of the treatment of a child in a non-criminal sense, which Mr Rollason has rightly picked up on, where there are nuances and grades, and in the criminal sense, where there are no nuances or grades?

**Dr Cleary**—If there is an issue which is a criminal offence, it would be immediately reported to Human Services and the police. That is the policy. Our own protocols were in place before the reviewed ones of the Department of Human Services. If it is of a non-criminal nature, we would generally advise the individual concerned that they should lodge a complaint with the organisation and we would be willing to support them in the lodgment of that complaint.

**Mr Rollason**—I will add that there are two elements to the situation in terms of the Anglican Church. The Anglican Church operates nationally, obviously, and it may have been the national guidelines, which are in draft form, that were being referred to.

**Senator MURRAY**—Yes, I think it was.

**Mr Rollason**—They are due to be adopted in October next year. So, much as we would like to bask in some reflected glory, I am not sure we can yet. The critical issue with all guidelines—and I think it applies to us as much as it may apply to anyone else—is that, until the guidelines are actually in place and adopted and some training program is connected to them, they may not be as good as they look. I think we have that challenge ahead of us. There are also guidelines at the diocese level now. The Anglican Church in Australia has 23 dioceses, and most of them—perhaps not all—have their own guidelines. They have been around a little longer, and their adequacies or inadequacies have been put into practice more effectively. I think the national guidelines are a genuine attempt to address the issue and to adopt a good code of ethics nationally. I think the real test—and hopefully they will be adopted at the general synod later

next year—will be to put them into practice through training for clergy, church workers and the rest within the church.

**Senator MURRAY**—This submission has some very useful constructs and supporting data. One of the real issues that we as a community, and particularly we as a committee, face is the lack of a sense of the scale of things, which is the reason that I tested your percentage. We do not even know cumulatively how many children were in institutions, for instance, and so on. In that context—and I will say to you what I have said to others, because I do not mean to impose work on you as a stressed organisation, which I am sure you are, given the kinds of jobs you have to do with the amount of money you have—are you able to lay your hands on statistics for us of how many children have been through your books over the century or so? You could even do it per individual institution. We want to get an idea of how many Australian children have been institutionalised, were wards of the state, or went through adoption programs or anything of that sort. Secondly—I might have missed it—how many are going through your counselling services? We want to get a view as to the scale of people using those services—the percentage of them—in the same way that the Catholic organisations have provided it to us. If you are able to, could you provide an estimate of how many have experienced real childhood problems in terms of what I would regard as the assault end of things or the serious end of abuse?

**Dr Cleary**—If it is any help, in Victoria we have seen 6,000 families in the past 12 months and we have cared for nearly 1,500 children in out-of-home care, residential care, short-term care and so forth.

**Senator MURRAY**—Do you regard that as the tip of the iceberg—in other words, are you only reaching a proportion of those in a society who are stressed?

**Dr Cleary**—Yes, I think that is correct. I think that would be the experience of most agencies. We certainly know that, in certain parts of Melbourne, we probably are only reaching something like 30 per cent to 35 per cent of the client group that we would normally see, with waiting periods up to three, four or five months. I think there are two significant issues confronting us at the moment. Firstly, we are seeing families and children that historically we would never have seen—if you like, a new working poor group. Secondly, we are seeing a high number of adolescents—13- to 17-year-olds—with very significant family relationship issues. Some of it is related to drugs, but drugs are really a symptom of something else. So it is just the tip of the iceberg in dealing with that second group of people. That is why I made my comment earlier about new stolen generations, because—

**Senator MURRAY**—Yes, I understood what you were on about.

**Dr Cleary**—my deep concern there is that we are not resourcing and addressing the needs of those young people in a way. As we have been challenged in the past about being complicit, I see young people in the future coming back and saying to church agencies like ours: ‘You were complicit in the year 2002 or 2003. You knew what my needs were but you were unable to address them.’

**Senator HUMPHRIES**—I think you suggested in the body of the submission that there was an underutilisation in some cases of residential care places. Do you know how many residential places are there in Victoria at the moment?



**Dr Cleary**—It is less than 200, I think, in the state. That is the figure I have. Victoria has swung over the last 10 years to out-of-home care and principally foster care, permanent care and kinship care. I think what has happened, as has happened quite often, is that we have moved with fads. Out-of-home care went out of fashion and foster care became the order of the day. Agencies were encouraged to go into foster care. Now I think we are all arguing that we actually need a balance along a continuum of a whole variety of care, from paid professional foster carers to family group homes to small residential units, so that we can in fact provide a range of options and choices for young people.

**Senator HUMPHRIES**—You are not the first person today to warn us about what I think has been called a looming crisis in foster care, but, looking at the stress that is on the foster care system at the moment as you describe it in your submission, it seems to be a crisis of supply. You seem to have a lack of people willing to come forward. I assume you are not suggesting that there is a crisis developing in terms of abuse within the foster care system that could be compared with the kind of abuse which has occurred in the past in residential or institutional care settings?

**Dr Cleary**—I have no evidence to think that is the case. In fact, I believe that our protocols and standards will prevent most of that, but not all of it—I think there are still ways of things happening through the system. But the crisis is on the supply side—of foster parents. I think the crisis is also in the expectation of what foster care will do. I think in Victoria foster care has really become synonymous with the child protection system. Foster care historically was a family support service at an early intervention and prevention level to in a sense prevent children from coming into the system. Because of the greater awareness of child abuse and neglect, in a sense, what has happened is that the child protection system has taken over the foster care program for placements. So we have a supply crisis, but I also think we have a crisis in what we expect foster care to do. That is where I think other forms of residential care and other forms of alternative care have to be explored.

**Senator HUMPHRIES**—Do you think we would substantially solve the problem in foster care by better resourcing it? Is that the answer?

**Dr Cleary**—If you mean simply paying the foster parents, no, I do not. I think foster parents deserve much more financial support for the costs they bear; there is no doubt about that. But I think it is also about resourcing of the agencies and skilling of the staff. The great challenge that I face in my organisation is recruiting the quality of staff we need in order to deliver the services. Staff tend to stay for 18 months to two years. Our best caseworkers, in order to get promotion, have to move up the ladder. Their skills are lost in terms of intervention. We are still the lowest paid sector in the community sector. So the differential between, say, a social worker class 2 that we may employ and what is in the hospital system is about \$10,000. It is about resources, but it is also about professional development and quality of staff training as well.

**Senator HUMPHRIES**—Finally, what is the problem with mandatory reporting that you alluded to before?

**Dr Cleary**—It is not so much a problem. The issue for me is that, with the way mandatory reporting currently operates, it takes huge amounts of resources in terms of the investigation and the legal process. I think in Victoria—and I will stand corrected on the exact figures—we have

about 40,000 reports a year. My recollection is that about 11,000 or 12,000 of those are investigated and about 2,500 are substantiated. We have a huge resource going into those reports. On the other hand, we have very few additional resources going into the agencies who have to deliver the services for those cases which are substantiated or otherwise. So we have system which is throwing up more and more children but which has fewer and fewer resources to be able to deal with them. That is where I come back to my fears about another stolen generation. We know that we have these 2,500 to 3,000 children needing some additional support. We do not have the services to provide to them. That is my issue about mandatory reporting—not that we necessarily need to do away with mandatory reporting but that we have to devise a more efficient and effective way of actually dealing with the reports that come in.

**Senator McLUCAS**—I want to pick up on one of the points that Senator Humphries made. We met yesterday with a foster carer and we canvassed this question of being paid or being reimbursed for expenses. She agreed that to be paid is the wrong motivation to become a foster carer. I think that is what you are saying as well, Dr Cleary—is that right?

**Dr Cleary**—That is correct, although I think there may be cases with some seriously damaged young people where you actually need a full-time carer. I think it then becomes unreasonable to expect someone who is in essence a volunteer to be a full-time carer, 24 hours a day, seven days a week, on simply a reimbursement basis. But it does move the notion, the idea, of foster care into another dimension.

**Senator McLUCAS**—I noticed in your submission that you talk about this intensive foster care program operating as a trial in Brisbane. I have to say I was surprised to see the \$600 a week, which is the amount you are reimbursing these parents and families for their work. How did you come to \$600? I understand—I am not absolutely certain of this—that that is a lot more than the amount of money that people are being provided by way of reimbursement through the regular shared family care or foster care situation in the state of Queensland.

**Dr Cleary**—I really cannot comment on Brisbane, except to say that the experience that we have in Victoria, where a similar scheme has been in operation—not with Anglicare but with Berry Street, I believe—is that they have virtually paid the person a salary. It has basically been a salary rather than another formula. That is as I understand it. I suspect that is what is happening in Brisbane.

**Mr Rollason**—We would be happy to chase it up and give you more information about how they determine the cost.

**Dr Cleary**—That is how I would expect it would happen.

**Senator McLUCAS**—It does look like a wage, I have to say. But expenses for caring for children are very high, as all of us with them know.

**Dr Cleary**—Unless there is more than one child. Potentially, that could be another explanation.

**Senator McLUCAS**—If you could provide some more information, that would be terrific.

**Mr Rollason**—I think it is high-risk kids too, so it is extra demands as well. We will follow it up and get some more information.

**Senator McLUCAS**—Thank you.

**Dr Cleary**—When you compare that particular scheme with the average cost of a high-risk adolescent in residential care, which is \$220,000 a year, it looks very cheap in comparison. For us to run a high-risk adolescent unit for four young people aged 13 to 17 costs us about \$230,000 per adolescent.

**Senator McLUCAS**—I am glad you made that point—it puts it in perspective.

**CHAIR**—As there are no further questions, I thank you very much, Mr Rollason and Dr Cleary, for appearing today.

**Proceedings suspended from 2.55 p.m. to 3.09 p.m.**

**CLARE, Ms Coleen, Chief Executive Officer, Children's Welfare Association of Victoria**

**RAMAN, Mrs Sunitha, Policy Research Manager, Children's Welfare Association of Victoria**

**CHAIR**—Welcome. Information on parliamentary privilege and the protection of witnesses and evidence has been provided to you. The committee prefers evidence to be heard in public but evidence may also be taken in camera if such evidence is considered by you to be of a confidential nature. The committee has before it your submission. I now invite you to make an opening presentation, to be followed by questions from the committee.

**Ms Clare**—Thank you. On behalf of CWAV and 83 community member organisations, I want to start with an acknowledgment of the abuse that has occurred in institutional care in the past. I make a statement of our support for those who have left that system and for the work that is being done to maintain them. I commend the emphasis in the MacKillop Family Services submission. We have not focussed particularly on the past; we chose to look forward. But we want to acknowledge those submissions.

Currently, we are concerned with the system's abuse that occurs in the current system of child protection. We have a long way to go for the system to be anything near what it should be. In fact, we are extremely concerned for the children and young people who are in our system at this point in time. There is still a lack of suitable policies and practices to meet the developmental needs of children. For example, the issues with multiple placements and the instability in our care system cannot but have a negative impact on the children and young people who are in it. Indeed, we know from our work on young people leaving care that they are not well equipped for their future life in a large number of areas.

There is a lack of proper assessment of children's needs at the point of entry into care and a lack of ability to place them in an appropriate stable placement where their needs as a child and a young person for stability, for warmth, for love, for education and for any other counselling or support that they may need because of the circumstances that have brought them into care are adequately met. There is a lack of educational opportunity for young people, and their study is often fragmented by the moves they have.

Also, in Victoria we are really very culpable in terms of our children leaving care. In other states and territories there is support for quite a number of years and there are services for them in counselling, in finding out their history and their stories and in getting located in study and employment. In Victoria we do none of these things. We allow our young people to leave care at a tender age and we know that their educational achievements are not good. They often do not even have one significant other person in their life and they may not be in any form of employment with a secure income and they may not be in study. They are really left adrift at that age to survive on their own, whereas our own children are often supported well into their 20s. So at all levels of the system there is a need for better resources for these children and young people.

I have focussed mainly on the children to this point but there are also big issues with the work force. The work force needs to be much better sustained, prepared and trained for the job they do, from the point of preemployment and recruitment through to the training and support to do the job. We know that young people coming into care have very complex needs, and the system needs to have carers and workers who are able to meet those needs. I might stop so we can focus on the points of interest to the committee.

**CHAIR**—Mrs Raman, would you like to say something.

**Mrs Raman**—Not at this stage, thank you.

**Senator McLUCAS**—I want to go to the after care support. Yesterday we heard a lot of evidence about the need for people to be supported post the care situation. Do you have any recommendations to the committee about the sorts of supports that are required and the time period for which that support would be required? It seemed pretty evident to me that it might be forever for some people. But what are your views about what is required?

**Ms Clare**—We are looking at support through to the age of 21 or 25. In other places, particularly in the UK and in Scandinavian countries, that is what has happened. They use a point where the young person is actually looking to be independent—they have stable accommodation, they are in study or employment and they have a significant network of support and friends. Currently we do not have that, so we could extend it to support from the carer or from a nominated person. As well, there is a tangible need for help to find accommodation and a life course. As I mentioned earlier, these young people often need specialist services too, whether it be counselling for trauma, services for substance abuse or educational tutoring.

I think that, when the state takes on the responsibility of parent, that responsibility means that the young people should be faring as well as their peer group. I do not think we should expect any less than that. Currently in Victoria we have only the tiniest amount of mentoring and we do not have any of the substantial support systems that are in place, for example, in other places overseas. So there is much to be done. We could start from the base of where the young person is at the point of leaving care and equipping the carer or the organisation to start working with them on those other issues that every young person has at the point when they try to begin an independent life.

**Senator McLUCAS**—The model of service delivery needs to be varied to respond to the different requirements of those individuals.

**Ms Clare**—Yes, I think so. There is the issue of a significant other. Whether that is the worker from the organisation or the carer who is financially supported to provide that care for longer is a significant point. There are the services that might be needed for counselling or for putting together one's history and tracing one's life story. There are also very practical things like finding a house and deciding whether you are going to study or whether you are going to look for a job. Some of those things require different services. It needs to be a comprehensive model that allows all of those things to be attended to.

**Senator MURRAY**—I am going to speak with a Fruit Tingle in my mouth; it is going to be difficult! For Hansard's purposes, it is a sherbet. Ms Clare, I thought your submission, whilst

short, was very helpful and very precise. To me it indicated the direct connection between a failure in care of whatever kind, ranging from simply the inappropriate, and having someone experience bad outcomes. The consequences are very clear in terms of lifetime effects. In your long experience, have you ever known any government try to do a cost-benefit analysis between the investment they put into a child in care and the costs of failure over perhaps a 50- or 60-year lifespan?

**Ms Clare**—Senator Murray, you have touched on a point dear to our hearts. CWAV are currently engaging in such a study precisely because the government have not and we have not been able to persuade them to do so. We have some funding from the Telstra Foundation, and we are able to look at only two years, but that is the analysis we are doing. We have felt that we have put the arguments that are in the submission many times and somehow they do not seem to move the heart of Treasury, if indeed they do have a heart. We are hoping that an economic analysis might do it.

In the Scandinavian countries that is the choice they have made. They have decided to put the money into early prevention and early intervention and a very well-resourced care system that is amazingly comprehensive. But they have fewer people coming in and, when the young people leave, they do quite well. So there is proof from other places that it does work, but we have not managed to persuade government here. I do not know whether it is the short-term, cyclical nature of government that does it, but we cannot get that focus on the long term.

You only have to look at things like hospital costs, correction system costs, the cost of being on income support, the cost of becoming a young parent when you do not have parenting skills yourself and the costs in a number of other areas such as substance abuse to see that these young people who do not fare well are astronomically expensive for the long term. We have not seen that translate into putting in sufficient money to change the system. However, I passionately believe that, if we did that, we could make a difference, obviously not only economically but also in the lives of these young people. In particular—just to reiterate—many of them become young parents and become parents more than once, so you start to have a transgenerational effect as well.

**Senator MURRAY**—From your answer, would you suggest to the committee that it consider a recommendation to the federal government to fund such a research analysis, which almost in a productivity sense would indicate the real social and economic costs of a failure in terms of the proper, normal or average development of a child?

**Ms Clare**—I think that would be a worthwhile enterprise. The art then would be to also engage the state governments in taking up the outcomes of that research and putting in the resources and policies that will make a difference.

**Senator MURRAY**—A point you make in your submission—your page numbers are not numbered; it is on the third last page—states:

In the last two decades, the child protection service delivery system has undergone significant changes, the principal among which has been the drive for fiscal austerity.

But it seems to me that it is penny-wise and pound-foolish—a short-term gain through low costs but long-term pain through very high social and economic costs. Is that a good summary of your judgment?

**Ms Clare**—Yes.

**Senator MURRAY**—I want to ask you about data. You say that your body represents 80 organisations in Victoria and that you have a vast and frightening array of responsibilities—at least they would frighten me. What sort of data collection do you do, or are you able to do? It is what a corporate organisation would call management and information systems. Do you collect up good data as you go along, or are you simply not equipped with the computer systems, the IT analysts and the information people which would enable you to do that? You sit on a repository of social wealth, if I may say so, in terms of knowing what is going on, but it does not help policy makers much if it is not fed in some way to them.

**Ms Clare**—We are a peak body, and we do not have those resources. The data is collected by the Department of Human Services. Many of our member organisations, depending on their size and ability, will have their own data. We have undertaken research in the past and, as I intimated, that was not successful in getting more funds and was focused more on the describing of what was happening for young people. As I also said, we are now looking at one with much more focus on economic analysis, but it will only be a snapshot because we are limited in the funding we have for research and the data we can call on. We do not have access to the Department of Human Services' data, and that would not tell us anything post 18 years because they do not have responsibility post that age. Data is not comparable across states; however, in New South Wales some excellent work has been done by Dr Judy Cashmore, which is available. I think that probably would be the best source of Australian data at this point.

**Senator MURRAY**—Bearing in mind that politicians—like those on this committee as well as ministers and policy makers—are generally far removed from the daily coalface experiences that your organisations have, if what you have described is accurate, and I am sure it is, how does your organisation persuade politicians, ministers and policy makers as to the need to address your problems? How do you get the understanding that I presume you have in a corporate sense into their heads if you do not have good management and information systems?

**Ms Clare**—As the research that we can do is limited and as an evidence base is usually the best way to persuade people because the data is there, we are involved at state level and a little at national level on committees that try to influence the policy and the budget decisions. There is more impact at the state level than there is at the federal level. It is difficult to get a holistic approach to seeing that just looking at young people before they are 18 is not the whole story. We need to look at what happens through their life course. Indeed, in our conversation we have only talked about those first few years post 18. I know that other submissions, like that of CLAN, have talked about the lifelong impact of not being well nourished and cared for in care.

The answer is that we need help. We need the federal government to take a lead in this area and to say that every one of our children and young people is so valuable that we need to see that they all do well. I do not want to digress, but we do know that we have a big shift in the demographics of Australia, and it is going to be even more important that every child and young person does well—as it always should have been. It does require leadership. It is not only the

reports and even the research—we know that there have been many reports and there has been much research—but the will to put the policy and funding into place that will do it. For example, in the UK it has been taken up at the highest level of government, and that has started to make a difference. We do need your help; we need somebody to say, ‘This cannot continue.’ One does not want to be overemotional but we may well look back in 10 or 20 years at this generation of children and young people for whom we are responsible in state care and say, ‘We did no better.’

**Senator MURRAY**—You are chief executive of this organisation, representing 81 community based organisations, and the script here says that you deliver a diverse range of services for children, young people and families. Have you ever had either a federal or a state minister come and talk to you directly—personally and face to face—about these problems?

**Ms Clare**—Usually if that happens we get them to talk to our member organisations, because that is the coalface and that is where the children and young people are.

**Senator MURRAY**—Our ministers do that?

**Ms Clare**—Some.

**Senator MURRAY**—Do the chief executives of the public sector organisations do that?

**Ms Clare**—They do in the community care branch; less so at a departmental level.

**CHAIR**—I think you have pretty much summed up in your submission and your presentation. Thank you, Ms Clare and Mrs Raman.



[3.30 p.m.]

**CUMMINGS, Ms Jennifer Anne, Regional Director, Gippsland, Berry Street Victoria**

**GORJANICYN, Ms Katrina, Manager, Social Policy, Berry Street Victoria**

**CHAIR**—Information on parliamentary privilege and the protection of witnesses and evidence has been provided to you. The committee prefers evidence to be heard in public, but evidence may also be taken in camera if such evidence is considered by you to be of a confidential nature. The committee has before it your submission. I now invite you to make an opening presentation, to be followed by questions from the committee.

**Ms Cummings**—I would like to start by thanking senators very much for the opportunity to present to this Senate committee hearing and for giving us the opportunity to raise some of the issues in out-of-home care which are so significant to us. The key, overarching point in our submission that we would like to emphasise is the need for a whole-of-system response which incorporates both preventative approaches and the need for protective legislation and review and government resource allocation—the ecological model, in fact. Another key point for us is developing, funding and implementing a more responsive range of models for out-of-home care which reflect the diverse needs of the children and their right to a sense of identity and connectedness. We would like to particularly refer to improved quality and consistency of information collection and record keeping; strategies such as the Looking After Children approach, which no doubt you have heard about, being implemented right across Australia; and access to past records with the assistance of trained professionals to assist young people to gather some sense of their past. The reason that I believe trained people need to be involved in this is that sometimes in my experience, where I have shared past records with young people, the young people have seen something written which pretty well traumatises them—sometimes it is a mental health description that they had no idea had ever been put on them—and they need somebody to help them to understand what that actually means. We also believe that there needs to be outreach therapeutic services and integrated model therapeutic care.

Innovative education programs and strategies are essential. Young people in out-of-home care suffer severe deficits in education, as no doubt has already been brought to your attention. Berry Street has a range of initiatives in that direction, including the BEST Centre, which is a school that we have established. Of concern to us too are leaving care programs and postcare support strategies—and I was listening to Coleen Clare referring to some of those—adequate preparation for transition to independent living and rent assistance for young people who move out. Currently we plan for them to move into the homeless system, the SAAP system, because that is the normal way through. It seems to me to be wrong that young people are put in protective out-of-home-care and then, when it is time for them to leave, they are really pushed towards the homeless system, the SAAP services.

Other key points for us are the design and implementation of a sector development plan for the purpose of extensive funding of research and evaluation to identify benchmarking for the determinants of quality care; introduction of funded quality-assurance processes, such as the minimum standards in out-of-home care which the state government has developed, and also

ABEF training using the model for best practice quality assurance; the introduction of improvements to remuneration levels; and access to training and support for staff and volunteers. The final point that we think is absolutely essential is facilitating advocacy to increase children's and young people's entitlements such as through a children's commissioner, which of course would assist in hearing the voices of all children. That would be of particular significance to the disadvantaged children that we work with.

**CHAIR**—Ms Gorjanicyn, would you like to say anything?

**Ms Gorjanicyn**—Jenny will provide most of our findings, because she has 26 years of experience in the field. I would like to make a few extra points in regard to education. I have recently been conducting an education scoping project for Berry Street, and I have information on the range of services that we offer. In addition to what Jenny mentioned in relation to the school—our BEST centre—we also organise education around early learning, preventative issues and resilience. We call that our Connect for Kids project, which is located at Alexandra. We run programs around VCAL and the School Focused Youth Service. So we have a broad range of programs and services around education. At Berry Street we believe it is essential to a holistic approach in terms of determining quality care for young children in care.

The other issue I would like to pick up on is the children and young people's commissioner. As Jenny was saying, we believe that this could offer a lot to our young people in care, because they are the most vulnerable children in our community. Whilst a children's commissioner would be of benefit to children and young people more broadly in the community, specifically it would be of assistance to children in care.

**CHAIR**—What do you think may stem the decline in voluntary foster care providers and attract more people who generally want to foster a child or children?

**Ms Cummings**—The remuneration that foster carers get is inadequate for the job they do. I also believe that more training is necessary for foster carers. Perhaps we should be moving to less a volunteer model and more a professional foster care model, particularly for the more difficult to place young people. I am involved in operating what we call 'one to one' home-based care programs for high-risk adolescents in which the carers' remuneration is higher and we work with them as paraprofessionals, which, in a sense, we can ask of these people because we give them higher remuneration. I think that if we are going to attract more people to manage the more difficult young children they would need to be more appropriately remunerated and trained, and treated as co-workers.

**CHAIR**—Do you recommend to the various institutions the foster carers for children to be fostered out to? Are there foster parents who clearly should not be foster parents? How do you categorise them?

**Ms Cummings**—There is quite an extensive process of recruiting, interviewing, assessing, training and starting them off—which is often with just some respite foster care, to see how they manage. Berry Street has developed a full training package for carers. But, before they even get to the point of being taken on as carers, there is a very thorough assessment process. I would like to think that we are getting a lot better at recruiting the right sorts of people into foster care. But you do need a huge range of people, because the young people coming into care have such

complex needs. The sort of person who could do respite foster care once a fortnight is quite different from somebody who would take on what could almost be a lifetime commitment of a relationship with a high-risk adolescent who is a very damaged young person. I do not know if that quite answers your question. I suppose I am talking about horses for courses but being quite targeted and skilled in our assessment and training.

**CHAIR**—Could you elaborate on your point in recommendation 4.2 regarding the need for flexibility in residential care models which allow for a continuum of care reflecting the individual needs of young people?

**Ms Cummings**—The funding for residential care, in this state, anyway, is quite set according to certain models and funding levels regarding the difficulty of the young people—what we call RP1s, RP2s and RP3s. Really, young people do not fit into those boxes at all. What we want to do is be able to be more creative in our matching of client groups so that we have compatible groups of young children—and young adults, I suppose, by the time you are talking about 17-year-olds—and the group environment is one which is more conducive to appropriate developmental tasks. At the moment, really, if there is a vacancy, you put your next referral in there. So we do not have the capacity to match or to have different sized models. We certainly do not have the opportunity to develop therapeutic residential care, which is something that is quite close to my heart. Not all young people need therapeutic care, but some certainly do.

You cannot put a range of young people who have quite complex needs and issues—because they have suffered quite considerable abuse—together in the community and expect that they will just meld in, be able to go to mainstream schools and live happily ever after. It is just not going to happen. That is what we mean. I would also like a flexible bucket of money—and I have talked to some of my staff about this—so that, at times when a residential unit is becoming a bit of a pressure cooker, you are able to actually pay a foster carer remuneration or get somebody just to take them out, take them away or break the pattern. That is what I guess I am talking about when I am talking about flexibility—trying to develop packages for the young people rather than fitting the young people into set models with price tags of RP1, RP2 or RP3. Does that answer your question?

**CHAIR**—What is an RP?

**Ms Cummings**—It is residential price 1, 2 and 3. The more difficult the young person, the higher the unit price. But, as I said—

**CHAIR**—So RP3 is highest, or is it RP1?

**Ms Cummings**—RP1 is the lowest level. RP3s are the high-risk adolescents. But most young people now who are in residential care have complex needs. Despite all the difficulties in recruiting enough appropriate carers, foster care nevertheless does provide out-of-home care for a lot of the less challenging young people. Those young people who come into residential care are really quite socially and emotionally damaged.

**CHAIR**—So, if they ever call for their file down the track, it will have RP1, RP2 or RP3 on it?

**Ms Cummings**—No, it will not. It will just say where they lived. It will not say how much the organisation was paid. But, when we are talking about models, that is what we are talking about as far as I am concerned. One of the problems for me now is that I am working in a rural area where I have quite challenging young people to deal with across a geographic spread but it is deemed somehow that rural young people are not as high risk as those in metropolitan areas, so the unit price per young person in my residential units is not as high as if I were working with the same sort of young person in a metropolitan area.

**CHAIR**—Are there further questions? Senator Humphries.

**Senator HUMPHRIES**—I assume, reading your submission, that you would agree with a comment made earlier today that the system has swung slightly too far in favour of emphasising retention of children within their natural family settings and that it perhaps does not often enough allow people to take up out-of-home care or foster care arrangements when that would be more suitable in many cases.

**Ms Cummings**—To a point. I would like to see more early intervention support into the families in the first place. I think what we really have to look at yet again but in more detail—certainly more rigorously—are the causes that bring young people into out-of-home care. I think the Victorian government is to be congratulated on the Innovations project, which is targeting the most vulnerable families, and it is rolling out across the state. I have just been involved in submitting in a consortium with a group of other agencies down in the Latrobe Valley in Gippsland for the Innovations program, in the hope that we can strengthen families and maintain young people longer at home—or hopefully totally at home. But for me, I would agree that the drift has gone a bit too far and that we often try again and again, or rather the courts do, to keep young people at home when it is clearly not in their best interests and some permanence in planning out of home would be the desired outcome.

I also think that we have a problem with our residential care, when young people that I describe as a ‘bad client mix’ are put all together in an isolated unit in the community and they are expected to be able to manage. I am not in any way in favour of those big central institutions, because I have been around long enough to know what they were like, but I do think that they provided professional services to the young people in a way that we cannot out in the community.

**Senator HUMPHRIES**—We have not heard much about preventative programs so far. You mentioned the Innovations program. Can you tell us a bit about that?

**Ms Cummings**—It is called the Strengthening Vulnerable Families Innovations Project, and this is the second round, I think. Targeted areas within the community—both metropolitan and rural—have been identified, and the Department of Human Services, in conjunction with non-government agencies like our own, have put up proposals around how we may be able to strengthen families. For instance, the one I am involved in is targeting the under-fives, but in that is a component for parents of adolescents.

**Senator HUMPHRIES**—So they target vulnerable families?

**Ms Cummings**—Yes—areas with a large number of child protection notifications. Are you familiar with the Latrobe Valley?

**Senator HUMPHRIES**—Not really.

**Ms Cummings**—It is a very depressed, deprived area of Victoria, where the SEC had privatisation. It is a brown coal mining area, so it is an area which, on pretty well every indicator, comes out as pretty deprived. That was one of the targeted areas, and that is the one that I am referring to now. We have put together a consortium with Anglicare—and I know they spoke to you earlier today; they are the lead agency because they run family support services already—ourselves and another youth service; Queen Elizabeth, which is a maternal and child support service; and the local council services. The Salvation Army have a component. So there is a great group of agencies that have pulled together a submission targeting only about 22 families all up—but they will be the highest risk 22 families. We hope to make a difference, and we are pretty excited by that, really. And are you aware of the urban renewal projects?

**Senator HUMPHRIES**—I have certainly seen a number over the years.

**Ms Cummings**—Again, there have been a few of those developed in Victoria. In the Latrobe Valley, because it is one of these red flag areas, there have been three urban renewal projects in some of the worst of the ministry housing areas. Already the DHS is reporting that the number of notifications in those areas is starting to fall because of the committee development focus and that sense of belonging, identity and self worth and all those sorts of things. I think, when we are having an inquiry into children in institutional care, we have to look at what we can do at the front end. That is why I started off by saying we should have this whole approach rather than just one at the tertiary end.

**Ms Gorjanicyn**—In terms of the preventative issues, I did mention the Connect for Kids program we run in Alexandra. That is a universal service. As well as targeting vulnerable families, as Jenny mentioned, we do run services for the broader community. This is a resilience program; it is to strengthen families. We run programs such as Early Learning is Fun, which is called the ELF program. The idea is to encourage reading at an early age. We encourage whole of community involvement. We have a youth arts project in the region. We are operating at both ends of the continuum at Berry Street in that spectrum, and we think that is very important.

**Ms Cummings**—And at some points in the middle!

**Ms Gorjanicyn**—Indeed.

**Senator HUMPHRIES**—It sounds very positive.

**Ms Cummings**—There are also case management services in schools to assist young people to better negotiate their pathways at school. As I said, I think we have to look at the whole picture and look at why young people come into care. There will always continue to be some young people who cannot be cared for by their families. Although you might imagine that these early intervention programs are going to be the magic wand to stop any child being removed from their family, that is not going to happen. So we have to be smarter about the services that we offer the young people when they are removed and not, as I said, put a whole lot of problem

young people together, which is what happens in a lot of our residential units. I find the one-to-one home based care that I referred to very exciting—that some of these really damaged, difficult young people can actually be placed in families if you have a great deal of support provided to the families.

**Senator McLUCAS**—I was interested in your comment earlier. I think you said, a bit offhand, that it is cheaper to bring kids up in the bush.

**Ms Cummings**—I don't believe that!

**Senator McLUCAS**—Coming from regional Australia, I am interested in that. Could you explain what you meant a bit more?

**Ms Cummings**—It is a perception, I think. I am talking about particularly high-risk adolescents, because that has been my specialty of 26 years. I find it very disappointing that there is this perception that regional and rural kids will not be as difficult and will not get into the drug scene. I believe it is a perception rather than a reality, having worked in both the southern metropolitan suburbs of Melbourne and down in this rural region. The rural issues are monumental, because there are not the support services around. There is no-one to refer to quite often, and so you have to do it yourself. There are also other costs. For us, most of our telephone contacts are STD. So a lot of these things are not understood, because if you just look at the number of young people using heroin and you compare a country town with the city, you say, 'Oh well, obviously.' But in comparison to the culture in that country town, these young people are highly marginalised and need all the support they can get. I guess you would agree with that.

**Senator McLUCAS**—I am very glad you have got that on the record because I struggle a lot with the notion that it is cheaper in many areas, not only in children's services, to operate in country areas. Every time you want to send someone to a capital city, there is a cost. That has never been included in the contract with government.

**Ms Cummings**—I run a service that operates right across Gippsland and our head office is in Morwell, which is in the Latrobe Valley. Some of our staff are in their cars all the time, because they are supporting, again, young people two to 2½ hours away. It is a very expensive operation with cars, petrol, mobile phones and the time taken simply in travelling rather than in the direct service. It is a perception held by the funding body rather than a reality.

**Senator McLUCAS**—I am glad it is on the record.

**Ms Cummings**—I am more than happy to have put it on the record.

**Senator McLUCAS**—I want to talk more about the children's commissioner or a children's commission. You have given us some advice in recommendation No. 9 that describes what you think the Victorian children and young persons commission could do. But earlier you said that there is a need to be very clear, if there are Commonwealth and state based commissions, that there is no overlap that could develop confusion rather than try and assist people. Are you suggesting that the sorts of roles of the commission that you have described in your recommendation could also be applied to a Commonwealth commission?

**Ms Gorjanicyn**—There are various models that could be followed and we have some international standards we could be researching. In fact, the YACVic model that was developed in Victoria has done that. Whatever models are developed, they have to be complementary. The point we made in our submission was to make sure that, if we have two commissioners at federal and state level, there are multiple points of access and that the jurisdictions are clear about how those commissions operate. There would certainly need to be specific recommendations for referrals to state services and to federal services.

**Senator McLUCAS**—It would just take a child or young person to ring the Victorian commission, for example, to be told, ‘That’s a federal matter.’

**Ms Gorjanicyn**—That would be a complication, indeed.

**Senator McLUCAS**—That would be really disheartening.

**Ms Cummings**—Yes, it would.

**Senator McLUCAS**—We have that duplication or replication in other areas.

**Ms Gorjanicyn**—Absolutely.

**Senator McLUCAS**—I think that point is very important.

**Ms Gorjanicyn**—We can learn from that. There is a lot of literature around about federal-state relations. We know about the overlap issues and we also know about the positive multiple points of access issues. That would need to be taken into account when thinking about setting up children’s commissions.

**Senator McLUCAS**—I note you also talk about the private member’s bill. Do you think that bill covers off these matters?

**Ms Gorjanicyn**—Generally we supported that at Berry Street. We thought it was a good move in the right direction.

**Senator MOORE**—Yesterday we heard about intergenerational issues to do with being in care. We heard people tell us their stories and in one case it was the third generation of a family that was in some form of care. Are there any special programs that deal with that at Berry Street? You seem to have a very well structured family support process for helping families. Is there anything particularly for people who have been in care of some kind and are now going through that process with their own families?

**Ms Cummings**—There is no particularly directed response to that group. We are very aware of that issue and the need to break the cycle and to work with both the parent and the child. For a lot of our parents who are not particularly good parents, it is not their fault, so an attempt to work with them and to parent the parent as well as the child is something that we are very mindful of. But we do not have specific programs targeted at intergenerational issues, do we?

**Ms Gorjanicyn**—No.

**Ms Cummings**—But they are real ones and we are certainly mindful of them when we are working with families and children.

**Senator MOORE**—The other thing that happens in inquiries like ours is that people with amazing experiences get to share them and hear what is going on. I am interested in whether there is a network in place, even at the local level in Victoria, where there is interaction between the various groups working in this area, so that there is a shared response—one that also uses the experiences of people. In your submission you have given us some current case experience and your first two recommendations go to the acknowledgement of the past. From your perspective as the largest provider of services to families in Victoria, is there an existing network, or could there be one that drew all that life experience together to benefit the future?

**Ms Cummings**—There are numerous networks.

**Senator MOORE**—That is what I thought the answer would be! How do they work and how do they interact?

**Ms Cummings**—They work at regional and state levels. For instance, you would have residential agencies meeting with each other and discussing issues state wide. At a regional level you tend to have both residential and out-of-home care because we acknowledge the need for the crossover. Residential care is not or should not be an end in itself. If we could move young people out of residential care into home based care, that would be the aim if they could not return to their families. There are also forums where CEOs and significant people within the agencies meet with the minister. So it is at all levels. Certainly, at the regional level—I have very close knowledge of two regions—we meet monthly, and we have both business meetings and practice meetings. It is the practice ones I think you are referring to—

**Senator MOORE**—I think so, yes.

**Ms Cummings**—where we share cases. There are opportunities for supervision—cross-agency supervision and supervision with mental health services. I am not saying it could not be done better, but I think we are all now very aware of some of the mistakes that were made in the past. They were made with good intent, but we know we can do better. So there is a lot of sharing currently, such as this innovations project I am in with a group of about seven disparate agencies—they are not all agencies that are involved in out-of-home care—sharing our knowledge and experience of vulnerable families and the best way to support them. So there are big moves afoot.

**Ms Gorjanicyn**—And within Berry Street we have cross-practice regional forums, so we have a lot of sharing within our own agency, which it seems to me would be a good starting point for the kind of issue you are referring to, Senator. Additionally—just pushing further that point about research—I have in fact just today come from a research network, and we have what I think is a strong research network in the community sector in Victoria. We have people coming from the regional areas as well as from the metropolitan areas. We do a lot of information sharing and we have also set up a subcommittee that is looking at evaluation issues, which are very important to us in the community sector at present.



**Senator MOORE**—The issue of research keeps coming up as well because there is such a dearth of research in this particular area that the committee is considering. This morning we heard evidence from a gentleman who wrote a paper in 1985, an oral history of people in care, and it had not been looked at between 1985 and today. That is such a waste. I am sure Senator Murray has lots of questions on these points and I am sure he will pick up the issue of records, because he shares my passion for record keeping. Valuing the experience, not just acknowledging but using the experiences, is critical.

**CHAIR**—Senator Murray, you have your instructions!

**Senator MOORE**—I was subtle!

**Senator MURRAY**—You are about as subtle as a brick; it is called leading the senator! Firstly, Ms Cummings, I want to know where you get your money from. Where does Berry Street get its funds from?

**Ms Cummings**—We get funding from the state government Department of Human Services for our out-of-home care services. That is the core.

**Senator MURRAY**—That is the main source of your money?

**Ms Cummings**—For those services, yes—and of course we top up those funds out of our own resources.

**Senator MURRAY**—Which is community based funding?

**Ms Cummings**—Yes, from donors or whatever.

**Senator MURRAY**—Yes.

**Senator MOORE**—People donate to you because they know you—is that right?

**Ms Cummings**—Yes. This is a very old organisation of 126 years, and so we are quite well known. We have a donor base which runs events. That sort of money enables us to be more innovative over and above the base funding we get for caring for children and young people.

**Senator MURRAY**—Does the Commonwealth give you money?

**Ms Cummings**—Not for these programs.

**Senator MURRAY**—‘Outsourcing’ is the modern term but it seems to me that, almost forever in Australia, governments have paid agencies that do not work for the government to look after families and children. You say that you were established in 1877 as an infant asylum and babies’ home, and I assume that the state was paying then.

**Ms Cummings**—I presume so, yes—

**Senator MURRAY**—I was not implying you were around at that time!

**Ms Cummings**—unless the benevolent ladies funded it all themselves, and I suspect they did not.

**Senator MURRAY**—I also suspect they did not. Do you have a record of the number of children you have cared for directly in the home since you began, as opposed to those you have serviced?

**Ms Cummings**—From the beginning?

**Senator MURRAY**—Yes.

**Ms Cummings**—We have records; but that is a very interesting question.

**Senator MURRAY**—It is not an idle question.

**Ms Cummings**—It would be a matter of pulling them altogether, as I suspect they would be kept in different places.

**Senator MURRAY**—Obviously I do not want to put you to the trouble of having to ferret around for months, but the committee needs to establish what has been the scale of children in residential care, in home care and in foster care around Australia.

**Ms Cummings**—You are referring to residential care or foster care?

**Senator MURRAY**—That is right. No figures like that are available, and so the best source is people like you.

**Ms Gorjanicyn**—That requires funding. Berry Street supports record keeping and, as you would know from our Looking After Children position, we think it is very important. But pulling together records to find out where they are and how to access them—you are right—takes time, resources and money.

**Senator MURRAY**—On the same theme of analysing and understanding, you say ‘Each year we work with over 4,500 of the most vulnerable and disadvantaged children, young people and families to prevent or help repair the damage of family breakdown, family violence and abuse.’ I presume that in ‘abuse’ you include criminal assault and criminal sexual assault of children—which, although people use those words in the same way, are not the same thing. Do you keep a breakdown of the 4,500? Does the department require you to give it statistics and data related to those people: age, demographic history, whether their parents were in care—all that sort of information?

**Ms Cummings**—Most young people we care for are clients of the Department of Human Services; they are on protective orders. So the department would have some of that basic background information. Certainly the department requires us to provide it with regular statistical information about how many young people are in care in particular units or programs. Then, from a case management perspective, it requires us to give progress reports and to submit

to annual reviews around the details of what we have done and how we are going against the goals that have been established.

**Senator MURRAY**—I am trying to establish what information is available already. With a family where a child is at risk do you automatically give to the government department, or does the government department automatically have, knowledge of the age of the parents, whether it is a one- or two-parent family, whether or not the parents have jobs, whether the parents have any history of being in care or institutionalised, committing a criminal offence or suffering from drug problems, homelessness or job insecurity? What kind of uptake is there of the descriptors surrounding families and children at risk?

**Ms Cummings**—That basic information would be collected by the Department of Human Services, because they intervene in a protective capacity and refer those children and young people to us for care. We keep some information. One of the things that we are looking at currently is a whole new data collection system within Berry Street that is compatible with some of the DHS data collection systems, because that has been a bit of a problem. DHS has had a range of different data collection requirements from us. Those systems have not necessarily captured what we ourselves want, which is some of that information that you have referred to. So we are looking at developing it now, but it has not been done well by us or by anybody else, I do not think.

**Senator MURRAY**—Let me just clarify this so that I can understand—because I do not. The department refers a child to you.

**Ms Cummings**—Yes.

**Senator MURRAY**—Do they send you a file?

**Ms Cummings**—Not a complete file.

**Senator MURRAY**—So you do not have in your file the information that they have.

**Ms Cummings**—I think we mentioned in our submission that one of the things which is absolutely critical for us, not only to make decisions about where to place a child or a young person but to know how to work with them while they are in care, is that we get as much information as possible. We do not get the full files.

**Senator MURRAY**—You deal with foster families as well, don't you?

**Ms Cummings**—Yes.

**Senator MURRAY**—The department does not give you the full picture and, according to the evidence we heard yesterday from a foster carer, they are also not given the full picture.

**Ms Cummings**—Looking after Children—LAC—we hope will bring about huge changes in that direction, because of the capturing of information from the moment the young person is referred, right through until they leave care. This is very new in Victoria. We are just starting to adopt it, but already the foster carers in particular, who are now getting a lot more information

than they ever got before, are feeling very empowered by that. I suppose what I am saying is that there is a glimmer of light at the end of the tunnel that we will more comprehensively collect the information that we need to ensure better outcomes for the young people in out-of-home care.

**Senator MURRAY**—Given your long experience in this field, don't you find it remarkable that it has taken so long for people to understand that very basic tool?

**Ms Cummings**—Yes. I find it extraordinary. It is something that I and many practitioners who have been around for a long time have been battling for ages. Sometimes child protection workers themselves do not understand the importance of the information that we consider important. For instance, we would like to know if a child has been in residential care before. Sometimes we do not even get that information.

**Senator MURRAY**—If you look at it from the perspective of the child, the adults who tell us about what they were unhappy with about their childhood—and 'unhappy' is probably a modest term sometimes—say that no-one knew enough about them, about their records and the way they were treated when they shifted between respite carers to more permanent carers and so on. The information people took with them indicated an actual lack of care or attention to the uniqueness or individuality of the child. It is not just a question from those who manage the affair but also from the perspective of the children themselves.

**Ms Cummings**—Again, looking after children, the records will belong to the child or young person. That is hugely significant. They will know that they went to the dentist in the year 19 whatever or in 20 whatever. There have been huge gaps in the knowledge of young people who have been in care about things like whether they have had their chickenpox vaccinations. They just do not know these things. The whole premise of Looking After Children—LAC—will be that all this information is collected in the one place. Although the agency will have a copy, it actually belongs to the young person, and when they move—say, from a Berry Street placement to an Anglicare placement—that information goes with them. At the end of the day they will have a history of who they are, where they have been, who their friends were and how often their mums visited—all the information which they do not have now.

**Senator MURRAY**—There are two other aspects I want to deal with. Ms Gorjanicyn, I assume from your remarks that you have identified the need for 'back capture'—in other words, it should not be a prospective program; you need to back capture those—

**Ms Gorjanicyn**—Yes, in line with adoption tracking in Victoria. It would be terrific to see the same sorts of procedures for the kids in care as have been applied to young people who have been adopted. Additionally, with looking after children, there two crucial issues. Firstly, it assists with integrated planning because it provides both the case managers and the carers with information. There is also that very important issue for a child: connectedness—knowing, as Jenny was saying, about their health, their education and their favourite toy. We used in our submission a wonderful case study from Maryana which I think captures that point beautifully.

**Ms Cummings**—I referred to that earlier. We need skilled people to help those who have been in care, and who have been given their records, to understand what they actually mean.

**Senator MURRAY**—The next thing, which I put rather crudely, is ‘after sales service’. Very strong points were made by witnesses yesterday—and have been made elsewhere at other times—that once young people leave either residential care or foster care, say at age 15, they fall into a hole and there is nothing afterwards. As they adapt to living in the community, they really need support services and a record of that needs to be kept. Is the LAC program going to do that as well? Is it going to run a file which not only picks up the history of a person that happens to be in the system now but will also follow them until, perhaps, they are in their early 20s, when you can really think they are on their way?

**Ms Cummings**—I would have to say no, not in this state—not until there is recognition that there needs to be state responsibility for young people after they have been in care. There needs to be a Leaving Care program like the one in New South Wales.

**Senator MURRAY**—We had a simply devastating time yesterday with some of the witnesses; it was quite tragic. One young woman charted for us her passage through child prostitution and drug addiction. Eventually she seemed to get out of it, mostly by herself, with the help of a few good people she was able to find along the way. But she was kind of deserted by the system. It seems to me that that area of transition, from that description alone, is as important as when they are in care. Is that an accurate observation?

**Ms Cummings**—Yes, I believe so. As I said, a simple thing would be rent assistance for young people when they move out of residential care, rather than having to go into the SAAP system. I should not say that that is all we do because it is not true that all young people go into the SAAP system but, when they are ready to leave care, where do they go? How do they gain housing, how do we support them? They tend to move into the SAAP system, which is actually a homelessness system. I find it quite abhorrent that we spend all these years trying to support, nurture and develop young people who are very damaged and then when they get to the end of their formal in-care time there is nothing but the homelessness service.

Of course a lot of agencies, and individuals within agencies, offer the sort of support that I think you might have been referring to with that young woman. There are good people along the road who continue to have involvement with young people they cared for years ago. But that is on an ad hoc basis. I really do feel very strongly that Victoria needs to look seriously at a leaving care program and needs to be prepared to support, as in other states and other countries, young people who need that kind of after care up to the age of 25.

**Senator MURRAY**—It seems to me from what I know of it, and I must confess I do not know enough of it, that the very high levels of suicide, drug addiction, substance abuse or alcohol problems involve young people from their late teens through to mid-20s. If they can make it through there then they can start to get on the right track, yet that is the very time they are released, when the care and the support ends.

**Ms Cummings**—My personal belief, and this is from being around a long time, is that the leaving care response should be twofold. There should be a leaving care program available for those young people for whom it would be a rite of passage to leave their residential care or their foster care and move to the next stage, not necessarily with the same agency. Do you follow me? It is like: ‘Hey! I’ve graduated; I am in the next stage.’ But for others who have developed

relationships with people in the agency that has cared for them, that agency should be funded to continue to support them for as long as they need that support.

**Ms Gorjanicyn**—An interesting point here, and I raised it in our submission, is that many young people today are living at home with parents until at least the ages of 24 or 25. Yet, we are seeing children in our care—the most vulnerable young people in our society—going on to homelessness programs, as Jenny mentioned. It does raise questions as to whether the state is acting as a good parent.

**Ms Cummings**—I am very proud of our one-to-one home based care with our high-risk adolescents because from the very beginning when we established that program I made it a basic tenet that it was the relationship between the young person and the carers that was significant and that that would go beyond the lapse of any protective order. These were very damaged young people. As I said to some of the carers: ‘They are not like puppies. If you take on one of these damaged young people—and we will support you 24 hours, seven days a week to care for them—then we want this to be a relationship that lasts for as long as people require it.’

We contrived some of those relationships. I brought people who expressed interest, were assessed and seemed to be committed into the residential unit as casual residential staff and watched a relationship develop. We then got those people to invite the kid home for tea and that sort of thing to build on the relationship rather than just the placement. We have been running this long enough now to know that some of those young people are now in their 20s and are still very much in touch with their carers. They were a significant other in the life of a young person who really had nobody. For me that is a huge measure of success.

Even if the placement itself was a bit shaky, the relationship was still there and so they came and went, more like what happens in a family, I suppose. That will not work for all young people. I am talking about young people who lived on the streets, prostitutes and heavy drug users who made connections with carers who were prepared to go the hard yards with them. I am not talking about large numbers, obviously. But to me that is a measure of success and in some small way militates against the sort of thing you were talking about—they getting to the end of their order and having nobody.

**CHAIR**—Thank you very much.

[4.25 p.m.]

**GUTHRIE, Mr David, (Private capacity)**

**CHAIR**—We are going to go in camera in a moment and that is when I will ask you all to leave except for the person who is going to give in camera evidence. But before we do that, since there are still a few people here, if anybody has anything they would like to say, come forward now.

**Mr Guthrie**—Like the previous speaker, I can certainly agree with what happened with the Latrobe Valley. As I mentioned yesterday, I have to come up to Melbourne every fortnight to access some things that I need to benefit me and also benefit the community. The main reason I wanted to talk this afternoon was earlier on today—mainly when the guy from Broken Rites was talking—I heard a fair bit about the effects on other people. I will not take too long with this but I mainly wanted to share how I ended up here today.

Prior to 1998, I had lived with a woman for 11 years. I was a full flight user of drugs and alcohol and whatever else. I had been in this relationship for 11 years. When I met this woman, her youngest son was four. Kids at that age take in a lot of things and learn very quickly and that type of thing. A week after his 16th birthday, because he had taken a lot of stuff in and copied a lot of stuff that I had done, he ended up in a casket because of drug use. That was the main thing that made me have a look at what I had been doing for the previous 41 years in regard to attitude, the way I treated other people and—as I heard someone say yesterday—the chip on my shoulder.

Today I have heard a lot of people saying, ‘We only need to help people until they are 25.’ As I was listening to that last speaker, I was thinking: ‘What about all those kids that are in Turana and Beltana? What about all those sorts of things that are still going on today?’ Those kids that are in Turana, at 25 they—if they are lucky—might start to understand the problems they have. I did not understand my problems until I got to 41 and my stepson died and I had a mental and physical breakdown all at the same time. Until then I had no idea who I was or where I was. Even today I still struggle with who I am, yet I am 46. All I know today is that I do not lead the life that I used to and I do not destroy my life and the lives of other people around me the way I used to. Thanks.

**CHAIR**—Thank you, Mr Guthrie.

*Evidence was then taken in camera—*

**Committee adjourned at 5.05 p.m.**