SENATE STANDING COMMITTEE ON COMMUNITY AFFAIRS

REFERENCES COMMITTEE

Commonwealth contribution to former forced adoption policies and practices

SUBMISSION

SUBMISSION NUMBER:

SUBMITTER: Janet Tough

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TERMS OF REFERENCE

This submission addresses the terms of reference of this inquiry:

That the following matters be referred to the Community Affairs References Committee for inquiry and report by 30 April 2011: (a) the role, if any, of the Commonwealth Government, its policies and practices in contributing to forced adoptions; and (b) the potential role of the Commonwealth in developing a national framework to assist states and territories to address the consequences for the mothers, their families and children who were subject to forced adoption policies.

SUMMARY

This submission outlines the events that resulted in the loss to me of my son, (...) (...) born on the (...) of April 1968 at the Royal Women's Hospital in Melbourne Victoria.

This submission will show the following:

- That the removal of my son was the direct result of State and Commonwealth practices at the time and was implemented by organizations funded and assisted by State and Commonwealth Governments.
- The options available to me as an unwed mother were systematically reduced by the institutions with which I came into contact during my pregnancy, the intention being to convince me I had no choice but to relinquish my baby into State care, so that he could be placed into a family chosen for him by the State.
- That my intention was to be a mother to my son, which I repeatedly stated and demonstrated at every opportunity, and without intervention by State and Commonwealth organizations I would have chosen to parent him despite any disadvantages that may have faced us.
- That deliberate actions were taken to prevent the native process of love and nurture between myself and my newborn, and that the impact of this violation has had a destructive effect on every part of my life since it occurred. This has been compounded by the knowledge that my child has also experienced the devastating effects of this violation.

RECOMMENDATIONS

1. That a full and frank enquiry in the form of a Royal Commission be undertaken to investigate the practices and procedures of adoption in all states of Australia.
2. That an enquiry recognizes that individuals at all levels of society have been involved, and have in many cases benefitted from, the practices of adoption, and that measures are seen to be taken to protect the integrity of any enquiry undertaken.
3. That the Commonwealth develops a national framework to address the consequences of forced adoption for the mothers, fathers, their families and children who were subjected to these practices.

4. That an acknowledgement in the form of a national apology be given to those affected by forced adoption. Any apology offered should only be done so after a full enquiry, so that an apology can reflect the actual events that occurred.

BACKGROUND

Early Pregnancy

In October of 1967 my employment as a Nursing Aide at the Freemason's Hospital Prahan was terminated when it was noticed that I was pregnant. As a live-in employee, this also meant I was without accommodation. I was nineteen years old at the time, and my family lived in country Victoria. The Matron recommended I contact the Royal Women's Hospital (RWH).

A record of the physical examination I was given by Dr (...) on the (...)October 1967 is provided at Attachment 1.

On the same date I was examined by the hospital's obstetrician. An 'A' was stamped in the top left-hand corner of my antenatal record, which I found out much later meant that the intention was for the baby to be adopted. At this stage I had not considered adoption, and certainly had not given consent to adoption. In fact, according to the legislation at the time, legal consent could not be given until 5 days after the birth of the baby. This illegally placed 'A' determined many aspects of my experience from this point forward. (Attachment 2.).

My next stop within the hospital was a visit to a social worker. The social worker was located within the premises of the RWH. It was my desire to question her about what to expect from birth and how to look after my baby. From our first contact, the social worker insisted that I would be unable to look after my child myself, and would have to give him up for adoption if I 'really cared about him'. As I had been raised to respect authority, and the social worker was presented to me as an authority on children and family, her advice caused me great internal conflict and distress. I visited the hospital once a month for physical examinations, and each time I was sent to visit the social worker. She continued to re-affirm her position; that I would be an inadequate mother to my baby, repeatedly using the phrase 'if you really care about your baby, you will give him up'.

Attachment 3. documents my unsuccessful attempts to obtain the records of these interviews with the social worker.

After several visits to the hospital and the social worker, I had become so distressed I was unable to continue the domestic employment I had been assigned. In February 1968 the hospital told me to go to the Fairfield Girls Home (also known as 'Girls Memorial Home', 'Georgina House, Fairfield', 'Methodist Institute for Woman and Girls in Fairfield'. Hereby referred to as FGH) where I would be cared for until the birth of my child.

Single Mothers Home

After arriving at the FGH I was interviewed by the Matron. I was informed that I was to be locked inside the home during my stay and needed to seek permission if I had special circumstances requiring a day pass. I was told that I must not form personal relationships with any of the other residents by speaking to them or asking them questions about the

circumstances that had brought us there. She reinforced the message that I was not adequate to mother my child and also used the phrase 'if you really care about your baby, you will give him up'.

Two officers from the Methodist Adoption Agency visited within the first week. I had not been asked to attend prior to this interview, nor had I requested it. They interviewed me and obtained background details of myself and our baby's father (see Attachment 4.).

One of the mothers who shared the dormitory style accommodation had outspokenly declared she had decided to keep her baby, and had begun to verbalise this. She was isolated from the other women and given accommodation away from us, petitioned from the dormitory. We were encouraged to keep away from her and not to give her comfort on the occasions she was seen to be crying.

On a Friday afternoon we were allowed to walk to the local shops and purchase toiletries. The local people would see a group of pregnant girls walking together and we knew that we were seen as shameful and without morals.

During our confinement, myself and the other residents worked about 5 or 6 hours per day doing laundry, polishing floors, feeding coal into the 'donkey', and other domestic duties. As my pregnancy progressed I began to become distressed about the future of myself and my baby. The Matron assigned me special duties in her office cleaning out her cupboards. She told me that this was to isolate me from the other girls while I thought about how selfish I was to consider keeping my baby, how I could not possibly care for him financially as I didn't have a husband.

Birth

The estimated date of birth that I had been given, based on my own calculations, was 6 March 1968, however my pregnancy progressed with no sign of labour until the last week of April. On(...)April I was transferred to the RWH. With my qualifications as a Registered Nursing Aide (RNA) I suggested I could monitor my own fluid intake and output. As the unit was extremely busy, the staff agreed.

I was in this unit for four days, monitoring my own fluids, with the freedom to walk around the wards, witnessing mothers with their newborns. This perspective on motherhood was entirely new to me. With this impetus I made the final clear decision that I wanted to keep my baby.

On(...) April I began labour, whether naturally or by inducement I am still unsure. After a 19 hour labour my baby was delivered by caesarian section.

Post Natal

I awakened from the birth of my baby very confused and disoriented. I found out later I had been given heroin and pethadine. (Attachment 5.).

I had also been given something to dry up my breast milk. (Attachment 6.) This drug was Diethylstilbestrol. I was informed of this by a sister when I asked why my breasts were unnaturally hard and sore. When she told me I would have no breast milk again, I began to

wail as I realized I would not be able to feed my baby. I asked to see him and was told he was being given away for adoption and I could not see him. For three days I asked continually for my baby, and began to cry, beg, and eventually scream when I was denied him. I was told I would be disciplined for being selfish and disturbing the other patients. I was given no information about his progress or well-being. Many years later I received a letter saying that although I had not signed an adoption consent, there is no record of me being asked for, or giving, consent for him to be removed from the hospital. He was taken with no authority, no consent, no permission (Attachment 7)

On the fourth day after the birth of my son I was moved to the Henry Pride Wing of the Royal Women's Hospital, an annex of the hospital based in Kew, a 20 minute drive from the RWH. I had been allowed to see him briefly once, and this had been facilitated by the kindness of a night nurse.

During the 12 days I spent at the RWH annex I experienced blood loss, extreme physical pain, and was unable to walk independently. Despite the effects of heavy medication I was extremely emotionally distressed. The patient who shared my room was breast feeding her baby. Every time I saw her with her baby I began screaming and crying, and eventually I was moved to another room. No records exist of my transfer to the RWH annex, however my father, brother and my baby's father (...) , all visited me during my internment there.

On discharge I was returned to the FGH. On my return I confided to the Matron that I intended to recover so that I could get my baby back and care for him myself. Although my family had not been able to support me throughout the ordeal of my pregnancy, I knew that if I could get my baby back to my home town they would help me. The Matron raised her voice, calling me 'stupid' and 'irresponsible', saying that I would never be able to look after him.

The first information I had regarding my son was a call from the MBH nearly two weeks after his birth. They informed me that my son was not 'fit for adoption' as he had slow reflexes and had experienced hypertonia at birth (Attachment 5).

Return Home

I returned to my home town after my final discharge from the FGH. My intention was to create a stable environment to which I could bring home my son. However my mental health had begun to deteriorate and I could not think clearly or make decisions rationally. Attachment 8 documents my communications with the MBH as I attempted to stabilize my life in order to claim my baby. Despite the sincerity of my intentions and the incredible depth of love I experienced toward my baby son (...) , I could not create a stable environment in which to raise him. I was 20 years old, a naïve country girl, and had recently experienced sustained physical, emotional and mental trauma beyond anything I had imagined possible.

Although I managed to recover him for a period of one month at the end of December, I returned him into care as I was not in a fit state to look after him. After having attempted in every way I knew for 11 months to keep my baby, I finally relinquished him and signed the adoption papers on February(...)1968.

Postscript

In the years subsequent to this I experienced irresolvable grief. I believed I was solely responsible for the loss of my son, and the weight of this responsibility was unbearable. My thoughts were constantly focused on my own culpability and the reality that my baby had spent the first minute, the first day, the first year of his life without knowing the love of his own mother. His rights as a human had been violated at the most fundamental level. This led to a feeling of self-hatred deep inside me, which manifested in drug use, homelessness, suicide attempts and self destructive decisions that lasted for many years. During this time I made the decision (at the age of 23) to have my tubes tied, a decision I came to regret and tried, unsuccessfully, to reverse at 40 years.

In 1986 I contacted the MBH in Copelen Street, South Yarra and was told I could meet my son. I was still too young, immature, and mentally unwell to be able to communicate to him the simple love I had always felt for him. Our relationship had been complicated forever by the trauma inflicted on us both, he as a baby, and me as a child/woman.

Meeting (...)) began a journey of healing that has taken many years. I began to contact the agencies involved in his forced removal. Between 1992 and 1998 I wrote hundreds of letters over a period of six years trying to piece together our story. It is now my fervent hope that the organizations involved can begin to take rightful responsibility for their part in this tragedy and thereby allow myself, my family, and the thousands of others affected by these abuses of power to complete this healing process and move forward.