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# **The experiences of Women Forgotten Australians and Care Leavers**

A literature Review

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2<sup>nd</sup> Anniversary of the National Apology to the Forgotten  
Australians

# Foreword

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This literature review was written by WCHM project worker Jasmin Ebbels, as part of a research project into the health and wellbeing experiences and needs of women Forgotten Australians in the ACT. It was edited by current WCHM Mental Health project worker Laura Pound. Further research findings about women Forgotten Australians and Care Leavers in the ACT, and recommendations for improving this vulnerable group's access to health services will also be disseminated.



## **About the Women's Centre for Health Matters Inc.**

The Women's Centre for Health Matters Inc. (WCHM) is a community based organisation which works in the ACT and surrounding region to improve women's health and wellbeing. WCHM believes that the environment and life circumstances which each woman experiences affects her health outcomes. WCHM focuses on areas of possible disadvantage and uses research, community development and health promotion to provide information and skills that empower women to enhance their own health and wellbeing. WCHM undertakes research and advocacy to influence systems' change with the aim to improve women's health and wellbeing outcomes. WCHM is funded by ACT Health.

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# Literature review

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## 1. Introduction

During the Twentieth Century, Australia's institutional care systems were responsible for the removal of an estimated 500,000 children from their families. Following their removal, these children were placed into out-of-home care, during which time many suffered trauma, neglect and abuse. This group of people, now adults, are referred to as Care Leavers and/or Forgotten Australians. For the purpose of this literature review both terms will be used in order to accommodate differing individual preferences.

In 2009, former Australian Prime Minister, Kevin Rudd apologised to the women and men who had grown up in this institutional system. The apology followed many years of activism by former Care Leavers/Forgotten Australians<sup>1</sup> as well as the publication of a National Senate Inquiry and several State Inquiries. In its Forgotten Australians report, the Senate Community Affairs Reference Committee<sup>2</sup> found that, during their time in 'care', many Care Leavers/Forgotten Australians suffered profound neglect, humiliation and deprivation, as well as emotional, physical and sexual abuse.

This literature review outlines research relevant to the Care Leavers/Forgotten Australians, their experiences and their continuing needs. In particular, the review focuses on the experiences and needs of women who are Care Leavers/Forgotten Australians.

The aim of this literature review is to:

- Explore the history of institutional care in Australia
- Outline who the Care Leavers/Forgotten Australians are, and the reasons why they were placed into the 'care' system
- Discuss the conditions children experienced in 'care', including evidence that suggests many of the children experienced difficult and damaging times in these institutions
- Discuss the consequences of children's experiences in 'care' for Care Leavers/Forgotten Australians in their adult lives, including examining the pattern of institutionalisation as children and the return to the institutional system later in life
- Outline the impact of time in out-of-home care on the physical health and wellbeing of Care Leavers/Forgotten Australians

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<sup>1</sup> Mendes, P & B Moslehuddin, 'Graduating from the child welfare system: A comparison of the UK and Australian leaving care debates', *International Journal of Social Welfare*, vol. 13, pp. 332-339, 2004.

<sup>2</sup> Senate Community Affairs References Committee (SCARC), *Forgotten Australians*. Canberra: Senate Community Affairs References Committee, 2004.

## 2. History of institutional care in Australia

Child protection is a relatively new concept within Western society. It was not until the nineteenth century that an increasing awareness developed around the need to sometimes protect children from their parents or guardian(s). Before this time, child protection policies had revolved around two main areas which were the protection of property from petty offences by children, and the provision of basic support for children who were considered a threat to orderly society.<sup>3</sup>

In Australia, formal child protection began soon after the first white settlements were established in New South Wales.<sup>4</sup> Services were developed with a focus on the general welfare of children, or what would be known as neglect in today's terminology.

In these early days of settlement in Australia, people were faced with problems in many areas of their lives. This included the care of children. From 1788, there was a need within New South Wales for some form of 'care' system for children who were orphaned or who could not, for some reason, remain with their parents. Australia's British heritage meant that many of the strategies of child welfare and juvenile justice used in Australia closely resembled the British system. These strategies continued well into the 1890's and often involved the removal of children and the placement of these children into what were considered more morally suitable environments such as orphanages and children's Homes.

Throughout the next century, the child welfare sector in Australia continued to grow and it developed a strong voluntary or non-government backing. The Christian churches were involved in running many of the orphanages.<sup>5</sup> The population of children needing to be fostered out or placed into orphanages increased rapidly as a result of the gold rushes, and increases in population. Conditions in the religious institutions and orphanages which housed these children became increasingly poor. This is reflected by a NSW Royal Commission in 1874 which labelled them a 'legalised gateway to hell'.<sup>6</sup>

After the formal establishment of Australia in 1901, the Commonwealth gave the Federal Government limited powers over children. Each state retained its own child protection legislation, and this meant that practices varied substantially across Australia. Most colonies made use of public and private institutions to house children who were seen as being in need of greater protection. New South Wales relied almost exclusively on public institutions.<sup>7</sup> Other states relied on a combination of organisations which included the Catholic and Protestant Churches, private hospitals, other religious movements (e.g. the Salvation Army), and other

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<sup>3</sup> Australian Institute of Family Studies, 'Some aspects of the early history of child protection in Australia', *Family Matters*, vol. 78, pp. 52-59, 2003.

<sup>4</sup> Tomison, AM, 'A history of child protection: Back to the future?', *Family Matters*, vol. 60, pp. 46-57, 2001.

<sup>5</sup> Tomison.

<sup>6</sup> Australian Institute of Family Studies.

<sup>7</sup> Penglase, J, *Orphans of the living: Growing up in 'care' in twentieth century Australia*, Freemantle, Curtin University Press, 2005.

smaller private institutions.<sup>8</sup> Around this point in time issues of child protection faded from the public eye, not to reappear again until the 1960s.<sup>9</sup>

The early twentieth century saw for the first time the introduction of policies which were directed toward helping children to remain with their mothers. This was partly influenced by research observations of the time, which suggested that babies did not thrive when removed from their mothers. These shifts in knowledge led to a Commonwealth funded Maternity Allowance in 1912.<sup>10</sup> This was designed to be available to all mothers, including those who were not married. This however did not seem to benefit mothers as it had planned. The allowances were deemed inadequate, and societal attitudes towards illegitimacy meant that many women were still unable to support their children at home. Women were often expected to financially support their children in Homes or orphanages, however unmarried mothers were not permitted to care for them, and adoption by married couples was considered the only acceptable solution.<sup>11</sup> Single or unmarried mothers were viewed as posing a threat to their children's moral learning and were often discouraged to spend time with them.

Around the time of the Second World War, women still faced structural barriers that included the lack of child-care facilities for mothers doing paid work and for single or unmarried mothers the adopting-out of their children into married families was the first solution. Unlike women in the United Kingdom, Australian women did not have access to social security benefits and were largely powerless in the decisions made around the removal of their children. One interviewee told Swain and Howe:<sup>12</sup>

*They said to me, 'the decision is yours'...But it was mine without any help anywhere...and at 15 or 16, I just had to make this decision.*

Growing concerns over the standard of care received by children in institutions led to the beginning of a new trend during the 1950s. This involved the closing down of the larger institutions and a shift towards smaller group care. This did not mean the end of institutional care as it continued throughout the 1950s and 1960s.<sup>13</sup>

In exploring the more recent history of institutional care in Australia, the literature leads us to research led by Dr Henry Kempe in the early 1960s.<sup>14</sup> This research highlighted something known as "battered-child syndrome" which was caused by the physical abuse of children. This paper is credited with sparking modern interest in these concerns in the United States and then on a global scale.

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<sup>8</sup> Senate Community Affairs References Committee.

<sup>9</sup> Australian Institute of Family Studies.

<sup>10</sup> Swain, S & Howe, R, *Single mothers and their children: Disposal, punishment and survival in Australia*, Oakleigh, Press Syndicate of the University of Cambridge, 1995.

<sup>11</sup> Swain & Howe.

<sup>12</sup> Swain & Howe, p. 145.

<sup>13</sup> Tomison.

<sup>14</sup> Kempe, CII, FN Silverman, BF Steele, W Droegemuller & IIK Silver, 'The Battered Child Syndrome', *Journal of the American Medical Association*, vol. 18, pp. 17-24, 1962.

The 1970s and 1980s saw a number of changes to child protection. The sector became increasingly professionalised and accountable for its work. Since the 1970s the process of deinstitutionalisation has also been continued.

### **3. Who are Care Leavers/Forgotten Australians and why are their stories important?**

In the recent history of Australia, namely the twentieth century, an estimated half a million children were brought up in orphanages, foster homes and institutions.<sup>15</sup> This was often called care, which will be referred to as 'care' due to the lack of care which often faced these children. These children came from families who were in crisis, while others were born to single mothers. Many children who were viewed as illegitimate were placed into 'care', and some of these were told that they were orphaned. According to the Care Leavers Australia Network (CLAN), its survey of 382 members found that less than two percent of the children placed into 'care' were actually orphans.<sup>16</sup> Fifteen percent had gone into care because their parents had divorced or separated. Others either did not know (ten percent) or gave other reasons, for example they had either a mother or father die, or lived with a father who was a war veteran and who had become an alcoholic. Often children were 'voluntarily' admitted by relatives or even acquaintances of the family. This was often seen by the family, as a temporary means of support in which time their child would be fed and housed in what they hoped would be better conditions to what they could currently offer them.

There were other reasons for institutionalisation, which included abuse and neglect in the family home, charges of criminal offenses or delinquency, although in some states children could be convicted for being neglected.<sup>17</sup> In effect, there were few mechanisms in place to help families who were facing some form of difficulty and there were no single-parent benefits to help them to cope. Therefore the solution was to remove the children from these families and to place them into the 'care' system.

Child migrants and Indigenous children were also placed into institutions around this time however their experiences are beyond the scope of this document.<sup>18</sup>

Eventually, practices and attitudes changed regarding the institutionalisation of children. In 1973 the Whitlam Government offered a support allowance for single mothers, which was paid at the same rate as a widow's pension.<sup>19</sup> This meant that mothers had more options available to them than placing their children into care. Attitudes to child protection began to shift worldwide. Emphasis was increasingly placed on supporting families through hard times rather than removing and institutionalising children. The system helped to support this by providing

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<sup>15</sup> Senate Community Affairs References Committee.

<sup>16</sup> Care Leavers Australia Network, *A terrible way to grow up: The experience of institutional care and its outcomes for care leavers in Australia. An overview of some findings from the CLAN Survey 2006-7*, Sydney, 2008.

<sup>17</sup> Penglase.

<sup>18</sup> Murray, A & M Rock, 'Child migration schemes to Australia: A dark and hidden chapter in Australia's history revealed', *Australian Journal of Social Issues*, vol. 38, pp. 150- 167, 2003.

<sup>19</sup> Swain & Howe.

smaller group homes as opposed to large single buildings to provide residential care where required.

Whilst there have been many improvements to the child protection system since its first days, this should not be taken to mean that the system holds no room for improvement. There are still gaps within the system through which young people can fall, and which need to be addressed.

#### **4. Experiences of Care Leavers/Forgotten Australians in institutional care**

In order to understand the health, wellbeing and social connectedness of Care Leavers/Forgotten Australians as adults, it is necessary to understand the conditions in which they lived as children. The following section provides an outline of the daily lives of children in the homes, from their lived experiences. The focus is on the living conditions which were common among Australian children's institutions before the 1980s when smaller group homes became the norm.

Whilst treatment of children differed between institutions, Penglase<sup>20</sup> explains that they all shared the same basic features. This included the institutional operation which tended to revolve around the needs of staff and administrators rather than the children or their families.

An important element of these environments was the disconnection between life in the institutions and the daily lives of most within society. Even in relatively 'well managed' homes, without the brutality of some, this disconnection was apparent.

Most of the information which can be found on life within institutional 'care' is found in personal accounts about the lived experiences from those who grew up in the system. There is little information to be found in external records. This is because the available records often provide only a negative account of the children, and because information about abuse within the system was rarely committed to print. The following section will examine the daily lived experiences of children who were placed in 'care'. The section will conclude with an overview of the experiences of leaving institutional 'care'.

##### 4.1 Receiving children into care

Children were mainly taken into care at a young age. CLAN<sup>21</sup> found that 77 percent of them had been placed in Homes under the age of eight. Fifty-nine percent entered institutional care aged between three and six years of age.

The experience of arriving in the Homes could be frightening and overwhelming for these children. In an account in the CLAN Newsletter, Care Leaver Mark wrote:

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<sup>20</sup> Penglase.

<sup>21</sup> Care Leavers Australia Network.



*The Salvation Army Gill Home in Goulburn was a very scary and imposing building the day I was dropped off there in 1971... The shock was immeasurable, from suburban Canberra to this place.*

Children were often placed into institutional 'care' with little information about their destination. Some remembered their parents taking them, and that they were dressed in their best clothes to go on 'an outing'. Others were brought to the institutions by police. In the CLAN survey, it was revealed the 32 percent of the participants had entered 'care' after being removed from their family home by police.

Once at the institution, the procedures that followed were often traumatising for children. Hygiene procedures involved cutting or shearing of hair, delousing, removal of clothes and provision of new clothes from the institution. Many had their names replaced by numbers, or by a new name.<sup>22</sup> Many had their personal possessions removed and never returned:

*She confiscated all of my clothes, all my belongings, then used a pair of large black shears to cut off my shoulder length hair. There was no care taken to style the hair, it was HACKED...<sup>23</sup>*

In some correctional institutions, submission was sought from the start. At the Hay Institute, new girls were shown to a freshly painted cell and were told to scrub off all the paint with a wire brush.<sup>24</sup>

There were often intrusive personal examinations performed on arrival at the Homes, and these were often indistinguishable from sexual assault.

After the treatment experienced in their first few days of life within the institutional system, Care Leavers/Forgotten Australians were often then left to a life of routine cruelty in these unfamiliar surroundings which provided little comfort to them during their time there.

Along with the removal of personal belongings, there was often a loss of personal space and privacy. Children commonly slept in group dormitories, sometimes holding thirty beds. Many felt that they were in a form of prison, as they observed locks, and gates, high walls, and barbed wire<sup>25</sup>. Many also experienced feelings of loneliness and of being unloved in their environment. This can be seen in the example of 'Diana', who, as a child, lived in Sydney's Scarba House:

*We were made to go to bed straight after dinner and forbidden to talk. The lights were turned off and I cried every night, with no-one to comfort*

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<sup>22</sup> Senate Community Affairs References Committee.

<sup>23</sup> Senate Community Affairs References Committee, p. 87.

<sup>24</sup> Penglase.

<sup>25</sup> Penglase.

*me...Breakfast consisted of cold porridge and brown sugar and we were given cold baths without any warm water, despite the weather.*<sup>26</sup>

There were some institutions which offered children happier memories. A former resident of a Catholic orphanage in Victoria reflected on her time there. She is quoted in Catholic welfare organisation MacKillop Family Services' submission to the Senate Inquiry:

*Walking around the home brought back so many memories for me, something I had forgotten about, it was good to see the old classrooms, the dormitories but especially the yard where we spent so much time playing and having fun.*

#### 4.2 Clothes

Clothes which were issued to children in institutional 'care' were often donated and communal, therefore children did not always get clothes fitted to their size, and the fabrics were uncomfortable. This clothing tended to identify these children as Home children, marking them as different. A personal account states:

*I was issued with regulation clothing, a number (43), horrible long dresses made of rough material, clumpy shoes and disgusting bloomers and singlets. I was not even given a bra.*<sup>27</sup>

#### 4.3 Routines

Children's daily lives within institutional 'care' revolved around strict routines. This is reflected in some of the personal accounts which have been recorded. Leonie Sheedy<sup>28</sup>, explains:

*We were on automatic pilot. At 6am every morning, the nun entered the room clapping and telling us: Everyone up, strip your beds, down on your knees. From then until the end of the day, everything was regulated. We were like robots. We had no watches. Our lives were run by bells and rules. We were told when to get up, when to eat, when to clean our shoes, when to catch the bus.*

There is evidence in the submissions made to the Senate Inquiry that it was regular practice to divide children's days with the use of bells. It was sometimes the case that children were also required to march to activities, and to the shower.<sup>29</sup>

#### 4.4 Psychological experiences

A common outcome of time spent in 'care' is that many children were deprived of love and affection as well as individual time and attention. In the Forgotten Australians report<sup>30</sup>, it is stated that:

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<sup>26</sup> Squires, K & Slater, L, *Living at Scarba Home for Children: A history of the Scarba Welfare House for Children (1917-1986) in the context of child welfare practice in New South Wales*, Paddington, The Benevolent Society, 2006.

<sup>27</sup> Senate Community Affairs References Committee.

<sup>28</sup> Sheedy, L, 'Try to put yourselves in our skin: The experiences of wardies and homies', *International Journal of Narrative Therapy and Community Work*, vol. 1, pp. 65-91, 2005, p. 68.

<sup>29</sup> Senate Community Affairs References Committee, p. 95.

<sup>30</sup> Senate Community Affairs References Committee.

*Growing up and developing as a person without receiving love and affection has possibly been the single most influential and tragic legacy of life in institutional care for every care leaver.*

This highlights the importance of these experiences for children and their development. This notion is still a relatively new one. It was the psychologists Bowlby and Ainsworth who first developed the idea that attachment to parents is a crucial element to children's development. They also explained the significant impact any disruption to this attachment can have on children both at the time, and in their later lives.<sup>31</sup> Previous theories had suggested that giving children too much attention could lead to negative behaviours and outcomes. Instead, children should be provided with strict routines and should be ignored if they were crying.<sup>32</sup> These methods of raising children sound very similar to those used within many of the institutions.

Alongside this, suppression of identity and individuality was also part of life within the institutions. As adults, Care Leavers/Forgotten Australians remember the denial of their identity. Many children had their names changed, or replaced with numbers; some experienced no celebration or acknowledgement of birthdays. There are also examples of children being punished for asking questions, or for looking someone in the eye.

#### 4.5 Abuse

A tragic reality is that many children experienced some form of abuse during their time in 'care'. There are numerous accounts of verbal abuse being directed at children on a regular basis. A former resident of the St Catherine's orphanage told the Senate Inquiry:

*The emotional abuse I received was demeaning and humiliating, it undermined my confidence and self-worth. The continual taunting of being told that I was nothing, that I was stupid and that I would be just like my mother who came from the gutter.*<sup>33</sup>

As with any form of abuse, verbal abuse can have a lasting and long-term impact on the lives of those subjected to it. It has been found that the lasting impact of verbal abuse for Care Leavers/Forgotten Australians can be particularly seen in the lives of girls who were placed in 'care'. Girls were often told that they were immoral, that they were sexually active and promiscuous. This constant framing of their identity is sometimes reflected in their later work practices.<sup>34</sup> The women, who participated in a study by Coy<sup>35</sup>, said that their experiences in 'care' had reinforced their existing sense of dislocation. They said that they had internalised existing discourses of 'worthlessness and deviancy'.<sup>36</sup> Histories of abuse contributed to a lack of a sense of ownership over their bodies, making sex work seem 'normalised'.<sup>37</sup>

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<sup>31</sup> Bowlby, J, *Attachment and loss*, Penguin, London, 1984.

<sup>32</sup> Bretherton, I, in 'The origins of attachment theory' eds John Bowlby and Mary Ainsworth, *Developmental Psychology*, vol. 28, pp. 759-775, 1992.

<sup>33</sup> Senate Community Affairs References Committee.

<sup>34</sup> Coy, M, 'Young women, local authority and selling sex: Findings from research', *British Journal of Social Work*, vol. 38, pp. 1408-1424, 2008.

<sup>35</sup> Coy.

<sup>36</sup> Coy.

<sup>37</sup> Coy.

Alongside verbal abuse, many children experienced sexual abuse. In the CLAN survey (2008), forty-four percent of respondents admitted to having been molested in care. Of these, 64 percent had been molested by a staff member working at the institution. Other perpetrators were religious figures who were not staff, other children (nearly 40 percent) or people who had taken the children on holiday placements (20 percent of people who were abused).

Children sometimes spoke up about the abuse; however they were unlikely to be listened to and were more often than not told that no one would believe them, or they were threatened with some form of punishment.<sup>38</sup> Any inquiries which occurred were limited to internal investigations of the abuser.<sup>39</sup> In a Royal Commission Inquiry into child abuse within Australian churches, senior church authorities admitted they had known about cases of abuse, but that they had decided not to report them to the police.<sup>40</sup>

A large number of Care Leavers/Forgotten Australians are reported to have experienced what is known as multi-type maltreatment, which refers to the overlapping of different forms of abuse.<sup>41</sup> Those who have experienced multi-type maltreatment as children have displayed significantly higher levels of trauma and self-depreciation as adults, than those who had experienced fewer forms of maltreatment.

#### 4.6 Punishments within institutions

Children living in institutions and out-of-home 'care' experienced punishments for what were often the most trivial of reasons. If a child spoke during meal time, did not stand still whilst being spoken to, answered back, answered incorrectly or was left-handed, then they were likely to experience severe punishment.<sup>42</sup> Forms of punishment included: beatings; extra chores; withdrawal of privileges; food rationing; isolation<sup>43</sup>; being made to stand for hours in the cold as a punishment for bed-wetting; and being made to eat regurgitated food as punishment for vomiting.<sup>44</sup>

Some personal accounts of the punishments experienced can be found in the SCARC report:<sup>45</sup>

*The punishment inflicted was to have her hair shaved off, and she (a young girl of 7 or 8) was compelled to wear a sugar bag as a dress all day, for a period of time...She even wore it to school, which was a public school some distance*

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<sup>38</sup> Alliance for Forgotten Australians, *Forgotten Australians: Supporting survivors of childhood institutional care in Australia*, Australia, 2008.

<sup>39</sup> Goddard, C, 'Nearly the end of the beginning of a never-ending story', *Children Australia*, vol. 32, pp. 41-44, 1998.

<sup>40</sup> Hawkins, RMF & F Briggs, 'The institutionalised abuse of children in Australia: Past and present', *Early Child Development and Care*, vol. 133, pp. 41-55, 1997.

<sup>41</sup> Higgins, DJ & MP McCabe, 'Multi-type maltreatment and the long-term adjustment of adults', *Child Abuse Review*, vol. 9, pp. 6-18, 2000.

<sup>42</sup> Senate Community Affairs References Committee.

<sup>43</sup> Senate Community Affairs References Committee.

<sup>44</sup> Penglase.

<sup>45</sup> Senate Community Affairs References Committee, p. 329.

*from the institution, and the children had to walk along public streets to get to this school. It would be difficult to imagine the trauma, that this child was compelled to suffer, or the effect it would have on her in later life.*

*Any glancing sideways or looking up was met with what Ben said was the standard punishment that occurred at Tamworth Boys Home. This was the loss of a meal or the loss of all meals over a period of 24 to 48 hours. The punishment for boys who habitually broke the rule was being made to wear a cardboard cereal box that had two holes cut for eyes. The boy had to keep wearing the box until it fell to pieces. Ben recalls that later a set of leather blinkers was made, similar to those that a horse would use, and the boy had to wear these for a set number of days.<sup>46</sup>*

Much of the maltreatment reported by Care Leavers/Forgotten Australians represented substantial breaches of regulations which existed at the time the offenses were committed.

#### 4.7 The impact of institutional care on families

Many of the children in institutional 'care' had families, whether this was parents, siblings, or extended family. These relationships often became fractured once a child entered into 'care'. There were strict limitations on parent visits, and siblings in 'care' were often separated from one another. This fragmentation has had lasting implications in the lives of Care Leavers/Forgotten Australians.

There was some variation in the treatment of family relationships across different institutions, and the approaches did change over time. In the early days of institutional 'care', parents were often discouraged from visiting their children at all.<sup>47</sup> Many never saw their parents again.

*I never had the opportunity to say goodbye to either of my parents. They were taken out of my life and circumstances never returned them.<sup>48</sup>*

*Not to have seen my mother again after we were taken away and not to have been able to find my brothers has been quite traumatic for me, especially when I got little information so late in life only to be slapped down again when I found that both my brothers and my mother had all died.<sup>49</sup>*

By the 1980s, the institutional system began to recognise the importance of family relationships for children and tried to maintain these where possible.<sup>50</sup>

#### 4.8 Health and hygiene in institutional care

There was an emphasis on the physical condition of children in institutional 'care'. Penglase<sup>51</sup> suggests that this preoccupation with hygiene betrayed underlying attitudes toward working class children as being a source of contagion. The processes for keeping the children hygienic

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<sup>46</sup> Senate Community Affairs References Committee, p. 97, Sub 414.

<sup>47</sup> Penglase.

<sup>48</sup> Senate Community Affairs References Committee., p. 105, Sub 341.

<sup>49</sup> Senate Community Affairs References Committee, p. 105, Sub 184.

<sup>50</sup> Australian Institute of Family Studies.

<sup>51</sup> Penglase.

reinforced feelings of violation and depersonalisation, as children had their hair cut off, and were often deloused in kerosene or even DDT (a synthetic insecticide).<sup>52</sup> These processes did not consider the privacy of the children, and many females were humiliated in the basic request for sanitary pads, where they would have to ask staff, and on occasion would be required to produce a used sanitary pad before they would be given a new one.<sup>53</sup>

SCARC<sup>54</sup> found that medical trials were sometimes carried out on children in institutions. An example of the horrifying consequences of these experiments occurred in one Catholic home, where babies were given a Herpes Simplex vaccination which failed to work, and left these babies with the disease. The institutions often did not gain consent from parents for their children to participate in such trials.

There was a wide use of drugs, such as sedatives used across institutions to control children.<sup>55</sup> The Forde Inquiry into institutional 'care' in Queensland found that several facilities had treated the inmates' behavioural issues using psychiatric methods, which include treatment with anti-convulsants, sedatives and tranquilisers.<sup>56</sup> These drugs were often administered by those with no medical training.<sup>57</sup>

There have often been long-term health impacts for Care Leavers/Forgotten Australians, as health care within the institutions may not have been maintained at an adequate level, e.g. dental care.

#### 4.9 Education and institutional care

*Education in the homes was abysmal; when I entered the state school system I was so far behind my age group I was ridiculed and taunted by both teachers and fellow students; leaving me feeling different, dumb and excluded. I have carried those feelings through most of my adult life<sup>58</sup>*

According to the results of the CLAN survey<sup>59</sup>, 54 percent of the participants reported having left 'care' without having achieved the first certificate level of education. Including those who obtained education after leaving 'care', 25 percent of respondents completed primary school, a similar number completed secondary school with no certificate, 17 percent attended a TAFE, 13 percent gained a secondary education (first certificate), seven percent a Bachelor qualification, and four percent a secondary education with final certificate. The number who went on to postgraduate studies and completed a PhD ranges from four percent to half a percent.

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<sup>52</sup> Penglase.

<sup>53</sup> Senate Community Affairs References Committee.

<sup>54</sup> Senate Community Affairs References Committee.

<sup>55</sup> Senate Community Affairs References Committee.

<sup>56</sup> Forde, L., *Report of the commission of inquiry into abuse of children in Queensland institutions*, The Inquiry, Brisbane, 1999.

<sup>57</sup> Senate Community Affairs References Committee.

<sup>58</sup> Senate Community Affairs References Committee, p. 109, Sub 321.

<sup>59</sup> Care Leavers Australia Network.

These results have been included as they show both the low level of education provided to children within 'care', as well as the lasting impact this has had on these children into their adult lives in achieving higher levels of education.

Staff from public education departments were employed by state institutions to educate children, whilst in the religious institutions the nuns or brothers took on the role of educator. Non-government groups used outside teachers or sent the children to the local schools.<sup>60</sup> Many of the children who were in institutional 'care' and attended a separate school were victimised for being 'homies'. Their clothes marked them as different from others, and some of their learnt behaviour from the institutions did the same. These were not the only impacts. It was often difficult for children in institutional 'care' to maintain their friendships with those who were not, as they could not attend sleepovers and excursions.

#### 4.10 Work in institutional care

The SCARC Report found that many children in non-government institutions had to carry a heavy load of chores and work during their time in 'care'. For the institutions this was often a way of saving money, and in some cases they even made a profit using the children for work in commercial farms and laundries. The profits of this labour were an addition to the funding often received by the institutions. This money was not passed on to children or to their families.<sup>61</sup>

*The home resembled a workhouse, we were made to work every day and all day in dreadful conditions. The home laundered sheets for the local hospital. From early morning to late evening we laundered or ironed dirty soiled hospital sheets. Some of the home girls were intellectually disabled. They were forced to wash soiled sheets in large machines like coppers... The only time we were allowed to break was for meals... I remember the hunger, the work, and the attitude of contempt from the staff. They made us feel worthless... I was 15 years old when I went to the Salvation Army home. We had not committed any crime. But we were locked away like criminals.<sup>62</sup>*

The CLAN survey<sup>63</sup>, found that most of the participants had to do work or chores while in 'care'. Forty-five percent of them did between three and five hours of chores, as well as schoolwork, per day. These working hours were against the Australian laws concerning the treatment of children at the time.<sup>64</sup> The completion of chores and work tasks would often take precedence over education and other learning.

There was a distinction between the work done by the boys and the girls within the institutions. The girls were often used to help look after the younger children, and to do domestic chores, whilst the boys would be trained in manual labour.<sup>65</sup>

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<sup>60</sup> Senate Community Affairs References Committee.

<sup>61</sup> Senate Community Affairs References Committee, p. 111, Sub 172.

<sup>62</sup> Senate Community Affairs References Committee, p. 111, Sub 172.

<sup>63</sup> Care Leavers Australia Network.

<sup>64</sup> Senate Community Affairs References Committee.

<sup>65</sup> Senate Community Affairs References Committee.

This work was not limited to children in institutional 'care'. Those who were fostered out often experienced similar expectations.<sup>66</sup>

#### 4.11 Transitioning from care to independence

Once it was deemed time for children to leave institutional 'care' and to become independent they faced a sudden, lonely, and difficult adjustment into the world outside of institutional life. Many Care Leavers/Forgotten Australians left 'care' unprepared for their future lives. Of those who participated in the CLAN survey<sup>67</sup>, 39 percent of those who left 'care' at the age of thirteen had spent the first night alone or with strangers. This shows both the lack of post-institutional support, and the lack of social connections available to these children outside of institutional 'care'.<sup>68</sup>

*How could the welfare allow young girls and boys to go out into the world so institutionalised. We were like little children not knowing how to cope with all the changes. No wonder so many ended back in institutions and gaol there was no preparation for us. I feel the welfare thought that was all we deserved, and would end up there anyway, as we were all no good.<sup>69</sup>*

### **5. Life after institutional care**

*No person can come out of these experiences unscathed and many of the former 'girls' from the home have had horrible lives. I saw more than one as Street Walkers and was told about attempts at suicide and destructive relationships. Other have learned to rely on alcohol and more recently other drugs. None have had 'normal' relationships where they realised their potential both emotionally and intellectually.<sup>70</sup>*

For the 500,000 plus children who grew up in institutional and out-of-home 'care' in Australia, the impact of this life on them did not end when they left 'care'. Many still face the life-long impacts of their experiences.

Some children had already experienced family lives which were dysfunctional and which may have had a negative impact on them before they went into 'care'. For others, their entrance into the 'care' system was the beginning of a series of events which would stay with them throughout their life.

Adjusting to life in the outside world was often difficult for many people who grew up in institutions. For many, childhood disadvantage multiplied in later life. This can be seen in the results of the CLAN survey<sup>71</sup>, which shows that a large number of participants continue to experience difficulties after leaving institutions.

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<sup>66</sup> Senate Community Affairs References Committee

<sup>67</sup> Care Leavers Australia Network.

<sup>68</sup> Care Leavers Australia Network.

<sup>69</sup> Senate Community Affairs References Committee, Sub 407.

<sup>70</sup> Senate Community Affairs References Committee, p. 146, Sub 311.

<sup>71</sup> Care Leavers Australia Network.



Common themes which were highlighted in the Tasmanian Inquiry find that Care Leavers/Forgotten Australian had left 'care' and gone on to live socially isolated lives which were often characterised by "broken relationships, welfare dependency, substance abuse, prison terms, depression, low self-esteem under-employment and low educational attainment".<sup>72</sup>

These ongoing effects are not only felt by Care Leavers/Forgotten Australians, but also by their families, friends and community, as well as organisations and practitioners.

*The consequences are not only limited to me. My wife and two daughters have to put up with my problems as well and their lives are affected by my behaviour. I am currently on anti-depressants in order to help me cope with the trauma I suffer daily as a consequence of my treatment. I suffer from post-traumatic stress disorder which manifests itself in a disorder known as dissociation. I suffer depression, anxiety, anti-social attitudes, nightmares, fear of people, lack of confidence, lack of social skills and a lack of identity. I have undergone counselling for much of my adult life just so I could cope with living day to day. I cannot hold a job for long: I cannot form friendships and have been unable to complete the several educational courses I have started over the last thirty years. I am currently in such a state that I rarely leave the house for fear of my reaction to any stimuli.<sup>73</sup>*

Some Care Leavers/Forgotten Australians have positioned themselves as deviant survivors of life in 'care':

*The days of low self-esteem, of painful memories and nightmares are decreasing. The happy times are beginning to outweigh the sad. The experiences I had 'in care' are forever imprinted on my mind, on my body, and in my heart. But I want to finish by saying some things to those who abused me. You did not win! You never touched the real me... You did not crush my spirit.<sup>74</sup>*

### 5.1 Housing and homelessness

Many Care Leavers/Forgotten Australians left their time in 'care' with nowhere to call home. Homelessness has continued to affect some, as the CLAN survey<sup>75</sup> found, 17 percent of women participants reported having been homeless at some point in their lives. Others have lived much of their lives in the public housing system. Homelessness interacts with other barriers experienced by Care Leavers/Forgotten Australians, such as their ability to find and maintain work, their health, wellbeing and social connectedness.

### 5.2 Life skills and managing money

Care Leavers/Forgotten Australians often left 'care' with few life skills and had to quickly learn the skills associated with managing finances. This was often difficult for people who had rarely, if ever, had the opportunity to handle money whilst they were growing up.

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<sup>72</sup> Ombudsman Tasmania, *Listen to the children: Review of claims of abuse from adults in state care as children*, O'Grady Review, Ombudsman Tasmania, Hobart, 2004, p. 36.

<sup>73</sup> Senate Community Affairs References Committee, p. 146, Sub 20.

<sup>74</sup> Senate Community Affairs References Committee.

<sup>75</sup> Care Leavers Australia Network.

Research by Branigan et al.<sup>76</sup> found that Care Leavers/Forgotten Australians who had grown up in Catholic orphanages had a range of different experiences with money as adults. Some found pride in learning to cope financially, whilst others finances were a continuing source of stress. Care Leavers/Forgotten Australians faced structural barriers building up their credit rating. An example of this comes from one of the participants, who found that he could only get a loan because the orphanage had agreed to guarantee it, and this was a seemingly uncommon gesture. For those Australians who did not grow up in institutional care, many, although not all, could gain guarantees from their parents for their first loan and therefore build a credit rating.

### 5.3 Family and interpersonal relationships

*How do you know how to be a parent if you have never been parented? How do you know love, if you have never been loved? How do you know how a normal family functions if you have never been in one? These handicaps have been far more pervasive and devastating to my life than the experience of being sexually abused.<sup>77</sup>*

Growing up in an institution often left people with poorly prepared for family life as adults. Some Care Leavers/Forgotten Australians interviewed by Branigan et al.<sup>78</sup> reported feeling unsure of the identity of a family, i.e., what families meant to others, and how to be a part of a family, as well as questions around how to parent.

There are often conflicting feelings toward parents of Care Leavers/Forgotten Australians. Were they people in hard circumstances doing what they thought was best for their children, or were there other intentions behind their decision? These questions can cause confusion for Care Leavers/Forgotten Australians. Relationships with siblings were often fractured by the separation of children upon entering institutional care. These relationships were often severed for life.<sup>79</sup>

Care Leavers/Forgotten Australians who form supportive relationships in adult life often have more positive experiences of the relationship and find some comfort for their past. On the other hand, the negative impact of institutional care on interpersonal relationships can be seen in the statistics from the CLAN survey.<sup>80</sup> Over half of the participants said that they had put up with an abusive relationship, whilst a third feared sex for 'sexual reasons'. 47 percent said they had difficulty with intimacy.

Time in institutional care led some Care Leavers/Forgotten Australians to make plans for the perfect family of their own.

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<sup>76</sup> Branigan, E & J Malone et al., *Beyond the home gates: Life after growing up in Catholic institutions. A report to MackKillop family services*, RMIT University, South Melbourne, MacKillop Family Services, 2008.

<sup>77</sup> Senate Community Affairs References Committee, p. 145, Sub 214.

<sup>78</sup> Branigan & Malone.

<sup>79</sup> Branigan & Malone.

<sup>80</sup> Care Leavers Australia Network.

According to Branigan et al.<sup>81</sup> parenting was found to be very important to many participants. They have found that having their own children had brought them a sense of pride, self-esteem, identity, and helped to develop their capacity to love. Along with these positive experiences often ran a fear of repeating the types of parenting they had experienced as children. None of the participants said that they had their own children placed in 'care'. A number of Care Leavers/Forgotten Australians who testified to the Tasmanian Inquiry<sup>82</sup> said they felt unable to express love and affection for their own children. Many female Care Leavers/Forgotten Australians had children at a young age. 41 percent of those who participated in the CLAN survey<sup>83</sup> had a teenage pregnancy.

#### 5.4 Sex work

Worldwide studies show that a disproportionate number of sex workers had lived in out-of-home care as children.<sup>84</sup> The SCARC<sup>85</sup> report notes that many people who become drug-addicted or enter into the sex industry are survivors of childhood abuse and neglect. A quote from the Historical Abuse Network states that "a lot of our people have ended up in the sex industry because they had no other choices. They had no people skills, no life skills, no education - nothing".

Children in 'care' were sometimes told that they would not make anything of their life and that they would end up as prostitutes, or in gaol. Growing up hearing this, and leaving 'care' without support and important life skills, or the opportunity to learn them, some found this as their only choice.

*...it was the effects of what was created after that too that kept building upon what had been put there with abuse that kept me entrenched in acting out and going from one addiction to another. Drugs, alcohol and substances and then turn myself to prostitution until my body could not stand the treatment I was holding onto and all the emotion I was carrying as a direct result of those days in my childhood.<sup>86</sup>*

*I pretty much glided through life for the next few years drinking heavily with no support. I went from job to job, house to house and at times living on the streets. At 17 I turned to heroin. I so had to numb the pain. I couldn't afford my habit and didn't have the courage to do crime so I turned to prostitution. Please keep in mind I'm 17 and still a State Ward and still supposedly under the care of DOC's... I am now 37 years old and have suffered Post Traumatic Stress Disorder, Borderline Personality Disorder, Adjustment Disorder, Panic Attacks and Depression. I have tried many times from the age of 15 to commit suicide and by the grace of God I am still here today. Because of my drug use I now have Hep C and suffer very bad Chronic Fatigue Syndrome. I will be on medication for a long time and will be in counselling for a long time too. I am*

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<sup>81</sup> Branigan & Malone.

<sup>82</sup> Ombudsman Tasmania.

<sup>83</sup> Care Leavers Australia Network.

<sup>84</sup> Mendes, pp. 332-339; Coy, pp. 1408-1424.

<sup>85</sup> Senate Community Affairs References Committee.

<sup>86</sup> Senate Community Affairs References Committee, p. 165, Sub 386.

*unable to work and I have no schooling. I accept my role in all this but feel very strongly that not only did my parent's fail me but DOC's did too.*<sup>87</sup>

### 5.5 Education

Educational opportunities differed across institutions. For those who did not receive an adequate level of education whilst in out-of-home care, there have been implications for their ability to further their education, to gain employment, and therefore their ability to find housing, and to maintain their health, wellbeing and social connectedness. Therefore, education has, in many cases had lasting impacts on the lives of these people.

### 5.6 Work

Care Leavers/Forgotten Australians who participated in research with Branigan et al.<sup>88</sup>, had experienced a wide range of employment experiences as adults. Many said that they had been employed for much of their adult lives, often in stable and rewarding jobs. Others had different experiences and often linked their experiences to their time in 'care'.

The CLAN survey<sup>89</sup> found that 44 percent of participants had difficulty working with others. 65 percent reported flashbacks which made working difficult.

### 5.7 Re-institutionalisation

Results from the CLAN survey<sup>90</sup> found that one third of participants had been in trouble with the law. Of the 382 respondents, 45 men and 29 women had been to jail (19 percent of respondents).

Care Leavers/Forgotten Australians are over represented in prison populations.<sup>91</sup> McFarlane found evidence of a strong link between the effects of growing up in institutional care, and prison time later in life. A 1975 study of NSW prisoners (A Thousand Prisoners), found that at least 41.2 percent of prisoners had been institutionalised as children. There is other evidence to back up this pattern.

### 5.8 Identity

Identity is an important aspect of the lives of Care Leavers/Forgotten Australians. As has been explained throughout the review so far, many children in out-of-home care have experienced a denial of their identity. Some had their names changed, or replaced by numbers, others lost contact with parents, siblings, belongings, and therefore their links with their past. Many were denied a sense of identity within 'care' with rules such as not looking people in the eye, not asking questions, and not being allowed to state their point of view.

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<sup>87</sup> Senate Community Affairs References Committee, p. 165-166, Sub 332.

<sup>88</sup> Branigan & Malone.

<sup>89</sup> Care Leavers Australia Network.

<sup>90</sup> Care Leavers Australia Network.

<sup>91</sup> McFarlane, K, *From care to crime - Children in state care and the development of Criminality*, Second Australia New Zealand Critical Criminology Conference 19-20 June, Sydney, 2008.

In the Tasmanian Inquiry an important element of identity which was felt to be lacking by the Care Leavers/Forgotten Australians involved was a lack of physical reminders of childhood. Many did not have photographs of their parents, or records of achievements, and reasons for being in care.<sup>92</sup> Many also lost contact with siblings, and some have lost contact possibly forever.

Finding and accessing records is viewed by many Care Leavers/Forgotten Australians as an important step to putting together some of the pieces of their identity puzzle. However, records are often incomplete or unavailable as they were not considered important by those writing them.<sup>93</sup> There have been some recent initiatives through the National Library of Australia and other organisations to provide access to the records and files which are available so that some information can be retrieved about the past.

## 6. Health and wellbeing

### 6.1 Physical health and wellbeing

*The health care needs of those of us who remain as survivors of this infamous institution are overwhelming. The majority of our people suffer from varying degrees of mental illness...Post-Traumatic Stress Disorder appears to be one thing we all have in common. Depression and anxiety related illnesses such as panic attacks and sleep disorders are common as are some phobic disorders. Poor anger management skills and violent outbursts are a feature of the social and emotional problems experienced by our people. The men especially have largely been unable to address the issues relating to their anger and this is often displayed in their relationships. Hence a high incidence of domestic violence...*<sup>94</sup>

Health, is usually defined with reference to the World Health Organisation (WHO) definition: "Health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity".<sup>95</sup>

Whilst Penglase<sup>96</sup> acknowledges the lack of love and individual encouragement experienced by children in institutional care, most of the health impacts are felt by those who experienced abuse or neglect, for example poor nutrition, inadequate access to health care, or physical and sexual abuse. This will not be the case for all Care Leavers/Forgotten Australians.

Whilst individual responses differ, exposure to traumatic events is often associated with adverse effects on physical health in the long-term.<sup>97</sup> Survivors of childhood abuse often suffer

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<sup>92</sup> Ombudsman Tasmania.

<sup>93</sup> Penglase, J.

<sup>94</sup> Senate Community Affairs References Committee, p. 153, Sub 58.

<sup>95</sup> World Health Organisation, Preamble to the Constitution of the World Health Organization as adopted by the International Health Conference, New York, 19-22 June, 1946; signed on 22 July 1946 by the representatives of 61 States (Official Records of the World Health Organization, no. 2, p. 100) and entered into force on 7 April 1948, 2010:2.

<sup>96</sup> Penglase.

<sup>97</sup> Schnurr, PP, A Spiro et al., 'Physical symptoms trajectories following trauma exposure: longitudinal findings from the normative aging study', *The Journal of Nervous Mental Disease*, vol. 186, pp. 522-528, 1988.

ongoing health problems. They are more likely to need surgery, to suffer from chronic pain, heart disease, cancer, stroke, respiratory problems such as bronchitis, diabetes, hepatitis and fractures.<sup>98</sup>

Branigan, et al.<sup>99</sup>, found that many Care Leavers/Forgotten Australians have ongoing trouble with food and eating, including weight fluctuations and eating disorders. Care Leavers/Forgotten Australians attribute the issues to food routines in institutions, for example, forced consumption of food, and the withholding of treats. They have also discussed the fact that they had little or no guidance on life skills related to food and cooking.

In addition to these health concerns, Penglase<sup>100</sup>, states that Care Leavers/Forgotten Australians commonly experience speech difficulties (particularly stuttering) and are more likely to suffer chronic, debilitating illnesses at relatively young ages.

In the SCARC report<sup>101</sup>, many Care Leavers/Forgotten Australians reported suffering from disabilities or chronic physical health problems as a result of the abuse they were victim to, or through a lack of medical attention during their childhood.

Expectations in 'care' which taught children not to complain and not to ask for help can make it difficult for Care Leavers/Forgotten Australians to reach out in order to seek advice on their health. It is suggested that women Care Leavers/Forgotten Australians may be especially marginalised. Within the construction of society women are often the carers of their family members, and may feel that they will be unsupported if they were to need time off for medical reasons.<sup>102</sup>

A major issue for Care Leavers/Forgotten Australians in accessing health care and other services is both a lack of trust in these services as well as feeling that the available services do not understand their needs.

## 6.2 Mental health and wellbeing

*All my life I have carried guilt and felt ashamed because of what has happened. Being told that I was ugly, black and unwanted has left me one big hang-up. People sat on their backsides while children were being physically, sexually and emotionally abused. I still suffer with extreme anxiety and stress. The nightmares have eased now, but every now and then I have a flashback about the orphanage and a wave of nausea hits me - the feeling of wanting to vomit is really strong and I usually do. The Doctors tell me this is post-traumatic-stress disorder.*<sup>103</sup>

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<sup>98</sup> Kendall-Tackett, K, 'The health effects of childhood abuse: Four pathways by which abuse can influence health', *Child Abuse and Neglect*, vol. 26, pp. 715-729, 2002.

<sup>99</sup> Branigan & Malone.

<sup>100</sup> Penglase.

<sup>101</sup> Senate Community Affairs References Committee.

<sup>102</sup> Doyal.

<sup>103</sup> Senate Community Affairs References Committee (SCARC), p. 154, Sub 172.

There is a substantial body of research to show that people who have experienced trauma or abuse as children often experience mental health issues as adults. Post-Traumatic Stress Disorder, depression, sleep disorders, low self-esteem, disassociation, panic attacks were among the most prevalent mental health outcomes for Care Leavers/Forgotten Australians as stated in the CLAN survey (2008). According to this survey, 64 percent of participants had experienced depression, 61 percent low self-esteem, and 59 percent sleep disorders.

The mental health outcomes from time spent in institutionalised 'care' during childhood are vast and varied. As with all outcomes for these people in their adult lives, there is the issue of compounding disadvantage, where Care Leavers/Forgotten Australians often face not one, but many coinciding issues as a result of their time in 'care'.

## **7. Conclusion**

This literature review explored the literature about experiences of Care Leavers/Forgotten Australians, and the impacts of these experiences on them in their adult lives. In light of the findings, the Womens Centre for Health Matters will take further steps to raise awareness of the issues affecting the Care Leavers/Forgotten Australians today, particularly issues affecting women Forgotten Australian's health and wellbeing in the ACT.

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