1999

Parliament of Tasmania

JOINT SELECT COMMITTEE

Adoption and Related Services 1950 - 1988

Members of the Committee

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Mr Hidding
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Executive Summary

In undertaking this Inquiry members of the Committee were aware that groups such as Adoption Jigsaw Inc and Origins had been greatly concerned with past adoption practices over many years.

Legislation passed in 1998 had finally broken the barrier of protection by anonymity that had prevented relinquishing mothers and their offspring from seeking relevant information that hopefully would lead to identification, contact and re-union. Many contacts had been made, not always with successful outcomes, but for others great joy and the rebuilding of relationships, which often included adoptive parents, occurred.

At least one case brought before the Committee involved the shattering of dreams. A relinquishing mother who had kept the quiet celebration of her baby's birth date for 18 years discovered through means of this legislation that her baby had died at 7 months of age. She had scrutinised every child of comparative age over those years in every public place where children gathered in the hope of spotting a family resemblance, and had searched newspapers for possible engagements or marriage notices of a young person bearing the name given at birth. Like so many others, this mother had kept alive the memory of the baby carried in her womb, barely, if at all, glimpsed at birth, but hoped for daily and mourned in secret.

It was the determination of Origins and others that their stories be told, the past uncovered and the common threads of grief, loss and also of courage and dignity be placed on the record. As they recounted the painful events of past decades, either in person or through written submission, the picture emerged of a social order against whose standards they had erred and which seemed light years away from those of present time.

It has been the need to express their sense of lifelong injury from the standards and values of a society that placed female virginity before marriage as being of higher value than the bond between mother and baby, or the kinship of grandchild and grandparents. This has led to the demand that the stories of these mothers and their 'taken' babies be told and by doing so an understanding of their pain can be reached.

The respondents, whose common experience was that of a sense of loss, were understandably moved by the recounting of their private grief to a Parliamentary Committee.

Nevertheless the formality of the hearing, with the solemnity of swearing the oath of true testimony, the Hansard recording and the demeanor of the Committee members, seemed to help these women who brought with them their sad little bundles of clippings and photocopies of documents gleaned under FOI and their trust that they would be heard with respect.

Too often the information contained in these records was scant, the details out of keeping with the vivid recollection of events of thirty or forty years ago. Many respondents denied ever signing Adoption Consent forms. On occasions the authenticity of signatures on documents was refuted. Allegations of signing under duress, or whilst suffering the effects of over-medication were numerous – such allegations difficult to disprove or verify. One set of forms, however, did show a marked difference between the styles of signature purported to be that of the relinquishing mother and impressed upon the Committee the possibility of interference by others, such as family, in the adoption process.

It became clear to the Committee that for many women, their experience of giving birth, particularly prior to the *Adoption of Children Act 1968*, the social and environmental circumstances which prevailed and against which they had no defence, nor defender, have left deep and unhealed psychological wounds. Although a few of these women were later able to marry the fathers of their babies, at the time of the birth, on the evidence presented, these young people's wishes were set aside and ignored. An easy thing to do when the legal age of majority was 21.

Almost all of the respondents had been less than 20 years at the time of giving birth. Mostly they had been in mid to late teens with a few younger than 16 years.

With scant acknowledgement, nor it seems understanding of either their fears or feelings as their young bodies underwent the hormonal changes of gestation, they were either sent or chose to go to 'homes' to await the births of babies that were unwanted within their own families but were in high demand from 'authorities' to place with willing and childless couples.

With the birth of their babies, young, fearful, inexperienced teenagers were told to put the experience behind them – that they 'would get over it'.

For many, the birth itself was a terrifying ordeal. From much of the evidence however, it seems that little comfort was to be had from the clinical process they encountered. The level of their own ignorance about the physical and emotional demands of labour and delivery had left them ill-equipped to deal with the refusal by their medical attendants to see or hold the child from whom they were immediately separated. It has also been asserted that several mothers who delivered in their teens believe that subsequent inability to conceive resulted from inadequate medical treatment at the time.

The reality, however for the respondents, has been that they did not 'get over it'.

Aged 19 at the time of relinquishing her baby, one mother had spent 26 years, "every day of my life wondering". She spoke of "the hurt and pain and emptiness" and of "the lifelong suffering of having to give someone up". It was devastating after these years to finally discover that her baby had been taken

out of Australia soon after adoption and that there was no likelihood of any reunion.

Feelings of lack of self-worth were a common emotional thread when the mothers recounted their experiences. At 17 years a young mother had "never felt so alone and worthless" as she battled against two stern employees of a government department who refused to wait for her parents to return from interstate to assist her and also refused her the grace of 30 days in which she could change her mind about adoption. "How could she do such a thing?" "What could she offer a child? "Cause heartache to the new parents?" and if she wanted her baby back, to find her way to Hobart (from the North of the State) and "take something to put the baby in". This pressure was too great for a young girl to withstand even though she had every confidence that her parents would be supportive. The fact that she had still been suffering effects from the general anaesthetic given at the birth when she was propped up and her hand guided to sign the Adoption Consent form did not seem to signify that her mind may have been unclear when the 'consent' was gained – or that the ethics of such actions were questionable.

A respondent who had worked as a Child Welfare Officer during the 1960s and 1970s testified to the 'societal pressures' of the time. In the language of those times "… it was deemed not a proper thing to be having a child out of wedlock … I think one had to be very brave to keep a child in those times, to go against the mainstream…" Particularly so if the nearest family members were adamant that their daughter's 'shame' must be concealed and so every step was taken to ensure secrecy and concealment. This sense of 'impropriety' evident in mainstream thinking when dealing with unwed mothers appears to have also been present amongst the medical staff of hospitals and maternity wards and was attested to by a group of women whose babies were delivered at the Salvation Army Hostel, Elim.

At the end of the 20th Century it is difficult indeed to recreate the thinking and to understand the social dictates which prevailed during the time period that made up the Inquiry's terms of reference. Prior to the Whitlam government's introduction of monetary support for single mothers there was little opportunity for young unmarried women to keep their babies without material and psychological assistance from their immediate families.

The fact that damage was likely to occur to mothers who lost a baby to adoption was attested to by one respondent, a consulting psychiatrist who sent a written submission from New South Wales.

This submission included advice that "a variety of appropriate and practical measures would need to be put in place to assist persons depending on the nature of the damage leading to 'distress' and the type of distress associated with the individual's response to such damage…"[1] A variety of the damage that may occur is then listed.

[1] Rickarby, Dr. G.A., Consultant Psychiatrist – Submission to the Joint Select Committee on Adoption and Related Services 1950-1988, p. 1.

Included in the list of effects are major depression, alcohol, drug dependency and prescription drug disorders as well as personality-damage which is manifested in a number of ways. Most telling is the “personality damage associated with the isolation of the birth experience and loss of the baby where this is a secret and there is no significant other who is there to share the feelings and unresolved issues associated with the loss".[2]

Suppression of grief may also be a consequence, particularly for those who were instructed to put the experience behind them and ‘get over it’, and whose family members refused to acknowledge that a baby had indeed been born.

Respondents spoke about the secrecy surrounding their pregnancies. A young woman’s disappearance from her home and familiar surroundings was explained as having ‘gone to work on the mainland’ or ‘visiting relatives in another part of the State’.

This conspiracy of silence was re-inforced by the management procedures that were in place, prior to 1971, at the Elim Salvation Army Hostel where many of the respondents resided to await the births of their babies. The sense of isolation, from family, friends or significant others were enhanced by the discouragement of visitors and excursions outside the Hostel.

All pre-natal checks were made by the visiting medical practitioners and Salvation Army registered nursing personnel staffed the hospital. Contact with the Department of Social Welfare was through a Child Welfare Officer whose tasks were to counsel and discuss with the mother-to-be future options for herself and the child.

A number of respondents, both through personal or written submissions were highly critical of their treatment at Elim, which they presented as bleak and fairly austere.

Criticism was also levelled at a Child Welfare Officer who the respondents believed pushed them towards adoption and failed to fully explain their rights with regard to the withdrawal of consent. This officer, however, had a differing point of view with regard to her role and her attitude. Her appointment as CWO began in 1967, one year before the passage of the 1968 Act, which was a turning point in adoption procedures. She spoke of the need to be diplomatic in order to ‘keep the doors open’ at Elim.

This officer’s concern, which appears to have been shared by her supervisors, was to see as much of the girls as possible rather than the one obligatory interview that may have been allowed. “I felt that I may not have been allowed to come back… I wanted to have that ease of access to the young women”.

[2] Rickarby, Dr G.A., op.cit., p. 2.

Her recollections were not of individual cases but of a general situation, in what she believed was "a very harsh environment for [the girls] and I think it was quite judgmental in terms of their behaviour. I think there was a moralistic view".

Centacare Tasmania Family Services were also of the opinion that "a range of traumatising results of relinquishment"[3] were likely to occur where so few supports had been available. "Many relinquishing mothers have spoken out about medical, nursing and social work practices which they experienced at a particularly vulnerable time in their lives. Many of these practices were part of a hospital culture which reflected the dominant ideology of the day – that the expression of female sexuality and the production of children were only permitted and recognised within marriage".[4]

Those relinquishing mothers whose babies were delivered at the Gore Street or Queen Alexandra Maternity Hospitals also remember attitudes that were disapproving and forbidding from most hospital staff. Where warmth and compassion had been shown, it was generally from a junior nurse, who, if detected conversing with the patient on other than purely routine matters was rebuked by a superior.

Some mothers spoke of their distress at not seeing their baby after the delivery; the birth was accomplished with a sheet blocking any sight of the baby; nor being told the gender of the child. Searching for the baby in the hospital nursery also proved unsuccessful.

One very sad case involved an 18-year-old girl who was living in a stable relationship with the father of their child and awaiting the legal age of majority so they could marry. Despite her protestations that her child was not for adoption and refusing to sign a Consent for Adoption form, her baby was indeed adopted without the young couple's wish or consent.

When finally she was able to obtain a copy of the records of the birth and adoption, she failed to believe that the signature on the consent form was indeed hers. The young couple did marry in due course but were denied their child who in turn was denied her own parents and her younger siblings.

This setting aside of the wishes and rights of the mother and father did indeed reflect the "dominant culture of the day". It appears, however, that this culture was not embraced by the leadership of the Department of Social Welfare although it may be presumed that some of its employees would have brought into their work the attitudes and bias indicative of mainstream society.

An enlightened leadership team in the Department during the 1960s, led by Director Gordon Smith, his Deputy, Bernard Hill and others, including Child Welfare Supervisor, Ms Joan Brown, acted upon the belief expressed in 1966

[3] Centacare Tasmania Family Services – Submission to the Joint Select Committee into Adoption and Related Services 1950-1988, p. 2.
[4] Ibid.

by Mr Smith that "the bond between a child and his parents is of greatest importance to be disturbed as a last resort".[5]

Although Mr Smith's remarks may have been particularly aimed at dysfunctional families, it was also obvious from his actions that he believed that unmarried mothers should be given the opportunity to keep their child if it was possible to do so.

During the mid 1960s limited financial assistance, counselling and advocacy was introduced by the Department to assist single mothers to keep their child. In the Director's view, it was immoral that a mother be forced to give up her baby because of economic circumstances.

Following a Commonwealth-State agreement in 1968 assistance was placed on a firmer basis while the introduction of the Commonwealth Government's Supporting Mothers' Benefit made the option of adoption less likely to occur.

The evidence of relinquishing mothers, however, indicates a general unawareness of possible financial help and was perhaps indicative of their emotional state that this information, if given, did not register. Or perhaps, as a number claimed, that the Child Welfare Officer who dealt with them pursued the idea of adoption as the only solution to their situation.

The Department also had its battles with authorities. Mr Smith's view concerning the rights of parents regarding a child before adoption, such as the mother being able to see her child, conflicted with the opinions of influential and respected medical practitioners who, prior to the passage of the 1968 Act, had every legal right to arrange privately, the adoption of babies.

In a memorandum dated 25 September 1969 from Ms Joan Brown, Child Welfare Supervisor, it is stated that "where once the maternity hospitals adopted the fixed rule that no mother should see her baby and often conveyed the impression that she was not allowed to do so, they now accept that the mother has a moral and legal right to see her baby if she wishes … In some cases it is desirable that a mother does not see her baby and in others it is desirable that she does … the right of decision lies with the mother after she has considered all the factors involved".[6]

The incumbent Minister for Health, Dr N.D. Abbott, appears to have disagreed with these sentiments. In an extract from his letter to the Chief Secretary dated 8 October 1969 (15/1/1 No 5f6), the point of view expressed is,

> "Whatever one feels, there is a need some mothers express, and agreed to by their own mothers, to keep the infant, and in

[5] Daniels, Dennis, former Director of Social Welfare – Submission to the Joint Select Committee into Adoption and Related Services, p. 3.
[6] Department of Health and Human Services - Submission, p. 7.

> this I think they should be strongly discouraged; rather should they be encouraged to adopt-out the babe."[7]

It is obvious that the 1970s brought, if slowly in some circles, a new approach to, and new thinking about the rights of women and of their maternity. Most significantly, the numbers of pregnant girls entering Elim were also reducing as were the number of babies available for adoption.

Elim itself began to change. The rigidity of thinking which had been manifested in the 'cloistering' of its residents and the strict discipline imposed gave way to a warmer, more compassionate approach. With the appointment of a young West Australian Salvation Army Officer in 1971 as matron, new ideas and a new management style was introduced not, it would seem, without some resistance from 'the old hands'.

One ex-employee described the former years as 'an era of shame', another as 'not so happy', but the new order was to ensure that the girls were treated 'like one's own family', were given pre-natal classes, encouraged to discuss at length and openly their situations and most importantly, bring in as visitors, their boyfriends.

"There were quite a few marriages" and as records show, many letters of appreciation to Matron Archer reflecting on the 'happy times' and 'the kindness and friendship' that she had shown.

The Committee found many moments during the weeks of hearings of evidence when each of us, witnesses and committee members, sat in silence or felt a tightness in our throats.

We are grateful for the courage shown by the witnesses and respondents in sharing their experiences either through personal telling, in public or privately, or in their written submissions. The stories are, without exception, ones of grief and loss, some never told before, others shared with people who understood because of their own experiences. Despite the passage of years, or because of the lengthening time since relinquishing their babies, the grief is undiminished; the loss is as keenly felt.

These stories are, however, the previously hitherto untold experiences that are part of Women's History. They should not be discounted, nor set-aside but are worthy of collection and publication in some form or other. It is hoped that this will occur.

Perhaps the Australian Association of Social Workers Ltd on 12 June 1997 has already made the wisest conclusion to this report. This is their statement:

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[7] Department of Health and Human Services - Submission.

"The Australian Association of Social Workers Ltd (AASW) expresses its extreme regret at the lifelong pain experienced by many women who have relinquished their children for adoption.

In doing this, we recognise that decisions taken in the past, although based on the best knowledge of the time, and made with the best of intentions, may nevertheless have been fundamentally flawed.

Many individuals and professions, social workers included, were in the past involved in the process that led mothers to give up their children for adoption. With the wisdom of hindsight, and with an awareness of the knowledge, resource, and support now available, we believe that in the same situations today, the same individuals and professionals would give very different advice. This in no way diminishes the pain felt by the mothers and children who were separated at birth".[8]

[8] Statement about Adoption by the Australian Association of Social Workers Ltd – 12 June 1997.

Summary of Findings

(1) Evidence presented to the Committee indicates that the past practices in the administration and delivery of adoption and related services in Tasmania has had a significant personal effect on the witnesses and respondents to this Committee. The services offered to birth parents from 1950 to 1988, particularly those relating to the taking of consents, were undertaken at a time when societal views and pressures were very different from today.

In hindsight, it is believed that if knowledge of the emotional effects on people was available during the period concerned, then parents may not have pushed for adoption to take place and birthmothers may not have, willingly or unwillingly, relinquished their children. Witnesses and respondents, who include some adopted children, would not therefore be experiencing the pain and suffering which continues to influence their lives.

(2) On the basis of conflicting or insufficient evidence, the Committee could not make any definitive finding as to unethical and/or unlawful practices that denied birth parents access to non-adoption alternatives for their child.

That is not to say such practices did not occur. Due to a lack of records and the death of some potential witnesses, it is not possible to come to a conclusion that any practices were unethical given the background of community standards and departmental procedures of the time.

Summary of Recommendations

The Committee recommends:

- That independent counselling services be offered, with no charge, to all people concerned with adoptions during the period 1950-1988. The opportunity for counselling should be advertised widely, inviting people to access these services.

- That the search fee for documents relating to adoptions be waived.

- That there is a need for the medical history of birth families to be readily available for adopted children and the adoptive families.

- That there should be a greater level of follow-up scrutiny of children being fostered and adopted.

- That the adoption papers stipulate that upon the death of an adopted child, the birth parents must be contacted immediately.

- That the respondents to this Inquiry be encouraged and supported to publish their stories together as an important historical document.

- That Section 19 (1) of the *Adoption Act 1988* be amended, as a single Act for one witness with unique circumstances, by deleting the words “but the court shall not make an order for the adoption of a child who is, or has been, married”

Chapter 1 – Introduction

1.1 TERMS OF REFERENCE

Both houses of the Tasmanian Parliament on 22 April 1999 ordered that a Joint Select Committee be appointed with power to send for persons and papers, with leave to sit during any adjournment of either House exceeding 14 days, and with leave to adjourn from place to place, and with leave to report from time to time, to inquire into and report upon –

(1) The past and continuing effects of professional practices in the administration and delivery of adoption and related services, particularly those services relating to the taking of consents, offered to birth parents in Tasmania from 1950 to 1988.

(2) Whether the practices referred to in part (1) involved unethical and/or unlawful practices or practices that denied birth parents access to non-adoption alternatives for their child.

(3) If so, what appropriate and practical measures might be put in place to assist persons experiencing distress due to such practices?

1.2 THE REASON FOR ESTABLISHING THE COMMITTEE

Part of the impetus for this inquiry stems from concerns raised in a report on adoption practices in Tasmania prepared by independent consultant Ann Cunningham in 1997. Strong concerns had also been raised by groups such as Origins and Loose ends representing the birth mothers that claim that they were coerced into giving up their children for adoption.

The main purpose of this inquiry was to provide those birth mothers that believe they were not treated fairly or appropriately in adoption practices between 1950 and 1988 with an opportunity to put their case forward.

1.3 PROCEEDINGS

The Committee actively sought submissions to the inquiry through a series of advertisements in the three regional Tasmanian newspapers and by direct invitation to organisations throughout Australia interested in adoption practices.

The Committee received 59 written submissions and heard evidence from 40 witnesses at 6 hearings.

Chapter 2 – History of Background

Modern Western societies recognise that children have distinct psychological and social needs that must be nurtured if they are to develop into fully functioning adults. Childhood is accorded a special status and children are seen as requiring protection and care, preferably in an appropriate family environment.

This was not always the case, and the depiction in medieval art of children as 'miniature adults'[9] is sometimes cited as evidence that 'childhood as a state separate from adulthood is a comparatively recent development'[10]. It is probably safe to assert that, until the development of a new humanitarianism in the nineteenth century, children were regarded primarily as chattels to be treated and disposed of to the advantage of adults rather than as persons and personalities in their own right.

Though adoption had been practiced since Greek and Roman times, in early Hindu cultures and by the Chinese for centuries, its primary purpose was to ensure the continuation of family lines, generally by way of providing a male heir.

The English experience after the Norman Conquest reveals practices such as baby-farming, poorhouse incarceration, apprenticeship and various other systems of child labour in relation to destitute, neglected and illegitimate children and unwanted step children.

The humanitarian movement of the nineteenth century, influenced by the writings of Kant, Fichte, Hegel, and Emerson in the United States of America, contributed to a gradual social consciousness of the welfare and well being of children. The works of Charles Dickens reflect this shift and very likely contributed to it.

The first adoption legislation to be passed is attributable either to the American states of Texas or Massachusetts. In any case, much of the American adoption legislation passed around the time of the Civil War was modelled on the 1851 Massachusetts statute.

In Australia the first State to introduce adoption law was Western Australia. The statute was enacted in 1896 and its significance lay in the fact that the interests and welfare of children to be adopted were at last recognised in the common law. New Zealand was the next jurisdiction to pass adoption legislation in 1908, followed by Tasmania in 1920. The first English adoption laws were introduced in 1926 and by 1930 all Australian States had introduced adoption legislation[11].

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[9] Chapman, P., Sr., 'Sixty-five Years of Adoption Practice in Tasmania', Current Issues – New Trends, Proceedings of the First Tasmanian Conference on Adoptions, Hobart, November 1985, p. 5.
[10] Ibid.
[11] Ibid, p. 6.

Chapter 3 – Public Policy and the Social Environment During 1950 - 1988

The Adoption of Children Act 1920

Though adoption had been practised in various forms in many cultures since ancient times, legislating for it began only in the nineteenth century.

The model Massachusetts adoption statute of 1857 established a number of principles which came to be regarded as essential components of the adoption process in other jurisdictions, including Australia. Under the Massachusetts model, adoption necessitated:

- the written consent of the child's natural parent to the adoption;
- a joint petition by the adoptive mother and father to initiated adoption proceedings;
- a judicial decree to effect the adoption on the basis that the adoption was fit and proper; and
- total and permanent severance of the parent-child relationship[12].

Tasmania was the second State and the first State after Federation to legislate for adoption. The Adoption of Children Act was enacted on 29 October 1920. Foster-care arrangements under the boarding-out scheme referred to above were not legalised and the new adoption act sought to provide some legal stability for the relationship between the fostered child and his substitute family.

The social climate in which the adoption legislation was introduced was turbulent. Hobart suffered severe housing and labour shortages after the First World War and the cost of living was rising. The Tasmanian fruit industry was in difficulties and the 44-hour week was being hotly debated.

Probably the two most significant provisions of the legislation were that:

- before making an order for adoption the magistrate had to be satisfied that the welfare and interests of the child would be promoted by the adoption [s. 5(c)(iii)]; and

[12] Inter-departmental Committee on Adoption Legislation Review, Report, Tasmania, October 1986, p.1.

- adoption automatically legitimised the child, thus removing what had been and remained a great social stigma until relatively recently [s. 8(2)][13].

The act also:

- required that the consent of the natural parent(s) be given for the adoption, except in the case of wards of the State. During debate on the bill, an attempt to amend it to require the consent of natural parents where possible in the case of State wards, excluding deserted children failed. The Attorney-General did not support the amendment on the basis that if the parents were sufficiently motivated to object to a prospective adoptive parent, the department would give this due consideration;

- allowed identities to be known to all parties to the adoption. Non-disclosure of identities was established through later adoption legislation ;

- provided for single as well as married people to adopt;

- required that the consent of a child over twelve years of age to the adoption order be obtained;

- provided that adoptive parents could receive a premium or other consideration on application to the magistrate; and

- provided the magistrate making the adoption order with the power to reverse that order.

During debate on the bill, parliamentarians saw the new legislation as applying primarily to the adoption of neglected and abandoned children and that their welfare should be safeguarded. Amendments were made to the original bill providing that magistrates could not make an adoption order objected to by a natural parent and that a natural parent could not have an adoption order reversed and take back the child when he became old enough to earn an income.

The Act formalised adoption procedures and adoptions were registered with the Registry of Births, Deaths and Marriages. The original birth certificate was annotated and a new registration contained the details of adoptive parents. Adopting parents applied to the court for an adoption order and had to satisfy the magistrate of their good reputation and fitness and ability to bring up a child.

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[13] Section 8(2) of the act stated:
'Where such order of adoption has been made, the adopting parent shall for all purposes, civil, criminal, or otherwise, be deemed in law to be the parent of such adopted child, and be subject to all liabilities affecting such child as if such child had been born to such adopting parent in lawful wedlock; and such order of adoption shall thereby terminate all the rights and legal responsibilities and incidents existing between the child and his natural parents, except the right of the child to take property as heir or next-of-kin of his natural parents directly or by right of representation.'

A 1943 amendment conferred the powers previously exercised by the police magistrate on the Registrar-General in Hobart and the Registrar of Births, Deaths and Marriages for the Launceston district. This was apparently done to bring some order to the way applications were dealt with. From this time the Registrar-General maintained a list of all applicants and allocations occurred in order of application. The power to make adoption orders was restored to the police magistrates in 1960.

In 1960 provision was made for applicants who wished to keep their identity confidential. This was done by utilising a system of allocating serial numbers. Until then information as to identity was freely available and could be accessed from council records.

Single Mothers pre and post 1920

Pregnancy outside marriage and illegitimacy were profound social stigmas in Australian society until fairly recently. Mothers and children who found themselves in this condition could expect to live in relative poverty, but until the early years of this century most unmarried mothers could still expect to keep their babies.

Prior to the Adoption of Children Act 1920 single mothers were given some support to do so. Accommodation assistance and allowances were minimal and women were expected to work to support their children. Of course it may be argued that the poverty in which most single mothers and their children lived was regarded by many as a just punishment for transgressions committed against respectable society. No doubt this was indeed a widely held view at the time, if not one expressed in quite these terms.

Nevertheless the availability of some government relief is some evidence of a more humanitarian spirit even if it was seen primarily as charity towards the largely undeserving. There was less sympathy in a more rigidly constructed and conducted society towards those seen to have engaged in conduct with foreseeable and avoidable consequences.

Victorian sentimentality idealised the good and gentle mother as it did the innocent child and the bond between them. This complemented the belief that the influence of undeserving and corrupt parents would taint their children further than they had already been affected simply by having such parents in the first place and that only removal and strict corrective procedures could alleviate their plight. However there was also a tension between this ideal and the latter belief in that the mother-child bond was deemed, at least by the more liberal proponents of Victorian welfare, worthy enough of preservation, albeit not to an extravagant extent.

In her work on colonial welfare services in Tasmania, Joan Brown provides an insight into how single mothers and their children fared prior to the introduction of the 1920 adoption legislation:

'A Government Lying-in Home had opened in Cascades in 1888 and a Ladies Visiting Committee was appointed to take an interest in the girls. Some of the girls stayed in the New Town Charitable Institution until their confinement and others were discharged there with their babies until other arrangements could be made. Most kept their babies and were helped to find accommodation or employment. The home itself moved to New Town and remained there until the end of the century though numbers dropped from 22 in 1896 to 3 in 1900 … Hope Cottage, a private venture would only accept first pregnancies and The Anchorage too had a somewhat punitive approach. The latter reported that the confinement was to take place at Cascades "as a wholesome discipline for those who err". They were not re-admitted until the Government Institution ceased to keep them, so those things should not be made too easy for them. The girl was to remain with the baby for twelve months and then would be placed in employment with her child and the hope was that in caring for the child her "womanly dignity" would be restored.'[14]

A number of rescue homes existed in Tasmania prior to 1920[15]:

- Van Diemen's Land Asylum, 1848-51, for 'fallen' women;

- Lying-in Home, for unmarried mothers. The home operated from 1888 to 1895 at Cascades and from 1895 –1925 as the New Town Charitable Institution;

- Home of Mercy, a Church of England home for unmarried mothers and prostitutes was founded in 1890. It was later absorbed into the Clarendon children's Homes.

- Magdalen Home, a Roman Catholic home for girls and young women of twelve years of age upwards was founded in 1893. It later became Mount St Canice; and

- Elim Maternity Hospital, a Salvation Army home for unmarried mothers was founded in 1897 and the last recorded birth there was in 1973.

The Salvation Army also established a hostel in Launceston known as Rocklyn which was destroyed in a boiler explosion in the 1960s in which all its records were believed lost. The Karadi Home in Launceston, originally established by the private Queen Victoria maternity hospital as a home for expectant mothers from King and Flinders islands, was subsequently used as a hostel for single mothers.[16]

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[14] Brown, J. C., Social Services in Tasmania 1803-1900, Tasmanian Historical Research Association, Hobart, 1972 in Chapman, P., Sr., 'Sixty-five Years of Adoption Practice in Tasmania', Current Issues – New Trends, Proceedings of the First Tasmanian Conference on Adoptions, Hobart, November 1985, p. 12-13.

[15] Brown, J. C., Social Services in Tasmania 1803-1900, Tasmanian Historical Research Association, Hobart, 1972, p.173.

[16] Cunningham, A., Background Paper for the Minister of Community and Health Services on Issues Relating to Historical Adoption Practices in Tasmania, 4 December 1996, p. 9.

Social Change 1920-1960s

By the 1950s very few children born to single mothers remained in the care of their natural mothers. The Adoption of Children Act 1920 was one influence in bringing about this situation. More significant were the extent and range of economic and social changes in Australia, particularly after 1939.

The Great Depression of the 1920s saw many Australians plunged into chronic unemployment and poverty. Federal Child Endowment was introduced in 1941. The Second World War, in its turn left few families untouched, as well as bringing in a change in social behaviour as Australian women came into contact with American and British troops. Moreover, by participating in the war effort, many women experienced full-time paid work for the first time and a measure of economic independence from men hitherto unknown to them.

With the allied victory came a new mood of optimism as well as affluence as returned soldiers were assured of work. The baby boom was a feature of the times, and adoption agencies began to find it difficult to meet the demand for adoptive parents. Theories of child development and parenting were developing and the field of social work as we know it also began to emerge[17].

With the prosperity of the 1950s came increased mobility of the population between States, creating problems with differences in the legislation of the Australian jurisdictions relating to marriage, divorce and custody of children. The Federal Government had centralised a good deal of power and decision making during the war and this continued post war. The Matrimonial Causes Act 1959 brought marriage and divorce within the province of the Commonwealth and consideration was given to doing the same with adoption. In the event, State and Federal attorneys-general agreed on model adoption legislation[18], which provided the basis for uniform adoption legislation throughout Australia, including the Tasmanian Adoption of Children Act 1968[19].

Adoption prior to the 1968 Adoption Legislation

A 1953 report of the joint UN-WHO Meeting of Experts on the Mental Health Aspects of Adoption stated that:

> "adoption is regarded as the most complete means whereby family relationships and family lives are restored to a child in need of a family. When constituted of mother, father, and children, the family shows itself to be the normal and enduring setting for the upbringing of a child … The goal of adoption is the

[17] Chapman, P., Sr., 'Sixty-five Years of Adoption Practice in Tasmania', Current Issues – New Trends, Proceedings of the First Tasmanian Conference on Adoptions, Hobart, November 1985, p. 14.
[18] This model legislation was based on the Adoption of Children Ordinance of the Australian Capital Territory.
[19] Chapman, P., Sr., 'Sixty-five Years of Adoption Practice in Tasmania', Current Issues – New Trends, Proceedings of the First Tasmanian Conference on Adoptions, Hobart, November 1985, p. 14.

> incorporation of the child within the new family and providing him with all that a family means to its children."[20]

This report emphasised the present and future needs of the child and the adoptive parents and those of his natural mother as well. Its authors believed that, where it was appropriate for the natural mother to keep her child, financial assistance to enable her to do so adequately should be provided. In determining the best interests of the child, consideration was also given to the social climate in which the mother chose to keep the child and the attitudes she and the child might encounter.

The mother's relationship with her own family and whether she had a stable personality and was capable of bringing up her child in spite of the difficulties involved were also thought to be important factors in determining whether a child would be best served by remaining with the mother. References were made to the morality of the mother's behaviour and it was stated that in some communities retention of the child by its natural mother would constitute a 'severe social handicap' for the child[21].

In her 1996 report on adoption practices in Tasmania Anne Cunningham comments that much of this UN/WHO report reflects the social climate of the 1950s and that such attitudes were still prevalent in the 1960s and early 1970s[22].

Ms Cunningham goes on to say:

> "The unmarried mother faced considerable hurdles if she decided to bring up her baby on her own and without the support of her family. This was often the case given the stigma then attached to the status of an illegitimate child. I have been informed by many of the relinquishing mothers of statements made to them by their own mothers to the effect that they could not expect to return to the family with their illegitimate child. Often the decision to adopt was made by the parent of the pregnant daughter. Without that support, the benefit of social welfare payments, housing allowance or child care to enable the mother to return to work, an unmarried mother had little option but to relinquish her child for adoption, although reluctantly. There is little doubt that the anguish and grief suffered by a mother who was forced to relinquish her child merely because of the lack of support services was widely recognised. Not by all however and the birth mothers often felt that their treatment was harsh and judgmental particularly by hospital staff and those holding positions of authority."[23]

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[20] Joint UN/WHO meeting of Experts on the Mental Health Aspects of Adoption, Final Report, September 1953 in Cunningham, A., Background Paper for the Minister of Community and Health Services on Issues Relating to Historical Adoption Practices in Tasmania, 4 December 1996, p. 11-12.
[21] Ibid, p. 12.
[22] Ibid.
[23] Ibid, p. 13.

The loose structure of adoption procedures under the Adoption of Children Act 1920 contributed to abuses and questionable practices. The Act laid down no time within which the natural mother was to sign her consent to the adoption of her baby and a practice of rapid adoption grew up whereby a married woman whose baby died at birth was given the child of an unmarried woman and returned from the hospital with that baby[24]. An infertile married couple might also have obtained the child of an unmarried mother through a doctor whom both they and the natural mother had consulted. Such a couple would simply be given the baby. 'Baby farmers' persuaded unmarried mothers to place their babies with them and would thereby become eligible for the foster-care allowance.

The Adoption of Children Act 1968

During the 1960s adoption legislation was enacted in all States and Territories based on the model adoption bill adopted by the attorneys-general of the Australian jurisdictions. The fundamental purpose of this move was to ensure that an adoption order made in one Australian jurisdiction would be recognised as having the same meaning, effect and consequences in every other Australian jurisdiction[25].

The Tasmanian Adoption of Children Act 1968 was based on this model legislation. It regulated adoption procedures and largely eliminated the abuses and undesirable practices that had grown up under the 1920 act.

Prior to the 1968 legislation people who wished to adopt a child in Tasmania could register with the Registrar of Births, Deaths and Marriages. On the making of an adoption order, the adoptive parents received a copy of that order on which would be found the child's original surname and Christian name, if s/he had been given one. Prospective adoptive parents were not subject to any assessment, often there was virtually no waiting time before they received a child and there was no follow up once the adoption was completed.

The Adoption of Children Act 1968 included many new provisions. Some of the more significant included:

- enacting the principle that the welfare and interests of the child must be the paramount consideration in approving adoptions (s. 11);

- making privately arranged adoptions illegal;

- transferring responsibility for adoptions to the Department of Social Welfare and authorised adoption agencies. Thus private adoption agencies entered the field, the first one being the Catholic Welfare Bureau, now Centacare. Henceforth an application for adoption was to be made by

[24] Joint UN/WHO meeting of Experts on the Mental Health Aspects of Adoption, op. cit., p. 15.
[25] Inter-departmental Committee on Adoption Legislation Review, Report, Tasmania, October 1986, p. 2.

the agency. It was no longer possible for children to be placed by the parent(s) or an intermediary such as a clergyman or medical practitioner;

- transferring guardianship of the child to the Director of Social Welfare once consent to adoption was either given or dispensed with;

- the introduction of strict confidentiality provisions to ensure permanent concealment of the identities of parties to adoptions. This was a significant departure from the 1920 legislation. Moreover the confidentiality provisions were applied retrospectively;

- provision for new birth certificates to disguise the fact of adoption;

- the introduction of tighter administrative criteria relating to adoption procedures;

- requiring that the consent of the natural mother generally not be taken within seven days of the birth of her baby and allowing her to revoke that consent within thirty days of signing. Though the relinquishing parent could not place conditions upon her consent as to who should adopt her child, if she expressed a wish, say in relation to religious upbringing or disclosure of her identity to the adoptive parent(s), this was to be given due consideration by the agency;

- provision that an adoption order could be discharged on the basis that the order or any consent was obtained by fraud, duress or other improper means, or for another exceptional reason;

Regulations made under the Act:

- set down the conditions for the operation of private adoption agencies;

- required the maintenance of lists of approved adoptive parents;

- provided the form for an instrument of consent and other forms required under the act. The duties of executors and witnesses were also covered;

- included provision on the consent form for acknowledgment by the natural parent(s) that the effect of the order was to permanently and totally deprive them of parental rights in relation to the relinquished child. The consent form also provided for an expression of the wishes of the natural parent(s) in relation to religious upbringing and contained a statement that consent could be revoked within thirty days of signing;

- required witnesses to a consent form to certify that they had explained the effect of consent, given ample opportunity for the form to be read, informed the person consenting about the revocation provisions and were satisfied that the person signing understood the effect of doing so;

- requiring the natural parent(s) to sign a request form to make arrangements for adoption which included provisions in relation to the guardianship of the child pending the making of an adoption order.

The legislation did not however set down any criteria in relation to the selection of suitable adoptive parents. Tasmania, like most other States, provided only that an applicant be of 'good repute' and 'a fit and proper person to fulfil the responsibilities of a parent' [s. 15(1)(c)]. A written report from the Director of Social Welfare or an officer of a private adoption agency was also required and adoptive parents had to undergo a medical examination, a report of which was also provided to the court.

One critic of the new legislation emphasised the 'domination of the agencies in adoption policy and practice'[26] and not only on the basis that the initiative for adoption had been largely transferred from the participants to the agencies. The requirement that the natural parent must now consent to adoption by any person was said to give the agency a free hand in placing children. Further, the agency obtained a monopoly over adoption because private placement was made an offence and because the application for adoption had to be made by the agency, general access to the courts was excluded and the courts' potential in developing policy was restricted[27].

Whilst it was recognised that the legislation was –

> "undoubtedly the result of a commitment to children's right … the new system also represents a considerable triumph for the social workers, whose claims to determine the best interests of the children seems to have prevailed in this area against the traditional legal preference for the biological parents' rights to determine the fate of their children. There is no doubt that the older, freer system led to some abuses and unfortunate placements, but there seems no real evidence that the new system actually results in more successful adoptions, however likely this may seem."[28]

The 1968 legislation appeared, with hindsight, to confirm the institutionalisation of the practice of adoption which had been occurring since the 1950s and to reinforce the inability of single mothers to contemplate keeping their children in the face of unsupportive community attitudes.

The new legislation certainly did little to assist relinquishing mothers to come to terms with the loss of their children, although regulations under the Act and administrative guidelines issued to child welfare officers did describe the procedures to be followed in taking consents and emphasised the need for

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[26] Chamberlain, R., et al, Children and Families in Australia, in Chapman, P., Sr., 'Sixty-five Years of Adoption Practice in Tasmania', Current Issues – New Trends, Proceedings of the First Tasmanian Conference on Adoptions, Hobart, November 1985, p. 15.
[27] Chamberlain, R., op. cit.
[28] Ibid, p. 16.

providing appropriate information and acting within the legislation. Ultimately women were left alone to resolve their grief and guilt. If there were alternatives to giving up a child for adoption and relinquishing mothers were not aware of them, it is probably true to say that it would have been difficult to obtain such information when society at the time simply did not recognise, let alone support, alternatives to adoption.

Kellmer Pringle summed up the societal attitudes, prevailing even in 1974:

> "Available research evidence shows that adoption is one of the soundest, most lasting – and incidentally cheapest – ways of meeting the needs of certain children who are socially deprived and in need of a normal home life! In fact, it is the most satisfactory form of permanent care yet devised by western society for children whose own parents cannot undertake it."[29]

Social Revolution 1960s-1990s

The decade of the 1960s is often referred to as a time of social and sexual revolution, epitomised by the phrase – 'sex, drugs and rock'n'roll'. Nostalgic reflection centres on the 'hippy' phenomenon, with its connotations of sexual and spiritual liberation, accompanied by a new freedom of self-expression and opportunities for self-realisation. The hallmark of the times was feeling good about oneself and questioning hitherto accepted social values and practices. Protest against the old order was almost a requisite among the under-thirty age group and alternative lifestyles were often characterised by the desire to achieve self-sufficiency whilst communing with nature. It was a time for youth and gurus. Women's Liberation was born – or at least its more recent incarnation – and the personal became political.

All this is not to trivialise the very real shifts in awareness that took place during the 1960s and extended into the 1970s and beyond. Attitude to the self, the environment and to society could never be quite the same again. In the new context of personal, ethnic and minority rights, contraception and abortion issues were high-profile subjects of public discussion and campaigning by advocates of women's rights.

Adoption could not, and did not remain unaffected. Public attitudes not only to sex outside marriage but to pregnancy and childbirth outside marriage began to change. More readily available contraception and abortion gave women choices about whether and how to exercise their fertility. A significant development in Australia was the introduction of the supporting parents' benefit in 1973. This gave single mothers the financial support necessary to keep their babies without the support of a man or their families if necessary.

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[29] Pringle, K., 'The Needs of Children' in Cunningham, A., Background Paper for the Minister of Community and Health Services on Issues Relating to Historical Adoption Practices in Tasmania, 4 December 1996, p. 29.

Nevertheless at the first Australian conference on adoption held in February 1976, there was no reference to the rights and issues for birth mothers, though this has changed by the time of the second conference held in May 1978[30]. Participants acknowledged the pain and guilt experienced by relinquishing parents and the difficulties inherent in resolving such feelings. At this time no Australian study had been done to ascertain the views of relinquishing parents in relation to access to adoption records, but overseas studies had shown that most natural parents would agree to a reunion if this was sought by the child[31].

At the third national conference held in May 1982, papers specifically addressed the issue of relinquishment in terms of the mother's experience:

> "The most long lasting aspects of grief I have encountered in my work with relinquishing parents appear to be the powerlessness and rejection leading to the decision to adopt and for those at some distance from those events, the continuing social and legal denial of the interest and concern for the children they relinquished. The legal "death" is unmatched by a death feeling; indeed the social context in which women find their reality demands that contradiction be maintained."[32]

By the mid 1970s there were far fewer children available for adoption than there had been ten years earlier. Attributing factors include the availability of the Commonwealth's supporting parents benefit, more readily available contraception and abortion, changes in social attitudes to unmarried mothers and the removal of the concept of illegitimacy by the Status of Children Act 1974. Perhaps it also shows that when single mothers felt they had a real choice they preferred not to relinquish their babies.

The Adoption Act 1988

As described above, since the enactment of uniform adoption legislation in the form of the Tasmanian Adoption of Children Act 1968 profound social changes had influenced the nature of adoption in this State and throughout Australia. By the late 1980s the demand for children for adoption had far outstripped the numbers available locally. This led to increased interest and demand for adoptions of children in other countries.

Other developments[33] included:

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[30] Cunningham, A., Background Paper for the Minister of Community and Health Services on Issues Relating to Historical Adoption Practices in Tasmania, 4 December 1996, p. 29.
[31] Ibid, p. 29.
[32] England, K., 'The Relinquishment Process' in Cunningham, A., Background Paper for the Minister of Community and Health Services on Issues Relating to Historical Adoption Practices in Tasmania, 4 December 1996, p. 30.
[33] Otlowski, M., 'The Changing Face of Adoption Law in Tasmania', Vol. 3, No. 2, (1989) Australian Journal of Family Law, p. 162-3.

- The drop in numbers of children available for adoption was not reflected in the number of adoption orders made in favour of step-parents which now represented a greater proportion of total adoptions.

- The demands of natural fathers were receiving greater attention, particularly in relation to consent.

- A significant increase in attention to the rights and needs of parties to adoption, especially in relation to access to information. More people in Tasmania and other Australian jurisdictions were applying to government departments for information enabling them to contact parents or children from whom they had been separated. Jigsaw was one self-help organisation that sprang up to meet the needs of these people. Such organisations have lobbied for the rights of parties to adoption to access information, thereby increasing public awareness of and shaping attitudes to adoption practices

As a result of the sorts of pressures described above, pressure for reform of adoption laws increased and Australian legislatures began to amend their legislation, thus departing from the purposes of uniformity that impelled the legislation of the 1960s.

In Tasmania a review of the adoption legislation was conducted by an Inter-departmental Committee on Adoption Legislation. Its terms of reference were:

- to review Tasmania's existing adoption legislation;

- to consider recent reports and proposed changes to legislation in other States;

- to call for and consider submissions from individuals and organisations; and

- to make recommendations for changes to Tasmania's legislation.

The committee of review's report was released in October 1986 and contained 92 recommendations which were eventually embodied in a new adoption act.

The committee gave particular attention to the comprehensive Victorian review of adoption legislation and practice which was appointed in 1978 and published its report in 1983. That report resulted in 'radically new'[34] Victorian legislation in 1985 and the Tasmanian committee referred to the significance of these new provisions on adoption policy and practice, not only in Victoria but also elsewhere in Australia. The Tasmanian committee of review was supportive of many of the Victorian changes.

[34] Inter-departmental Committee on Adoption Legislation Review, Report, Tasmania, October 1986. p. 3.

The inter-departmental committee was firm in its view that 'adoption is about finding parents who can meet the needs of children, not about finding children to meet the needs of would-be parents'[35]and that the fundamental principle of any adoption legislation should be that 'the welfare and interests of the child shall be the paramount consideration at all time'[36].

The committee attributed the drop in numbers of children available for adoption since the early 1970s to factors including:

- the availability of the supporting parents benefit;
- more effective contraceptive measures;
- somewhat easier access to medical abortion;
- the reduced stigma surrounding ex-nuptial birth.
- more supportive community attitudes to single parents;
- family and peer group pressures; and
- the influence of the feminist movement and values.

It also noted:

- the increased waiting times for receiving adoptees;

- increased interest in overseas adoptions;

- the preponderance of step-parent adoptions;

- the increasing response of adoption agencies to the special needs of children hitherto excluded from adoption due to handicap or other difficulties;

- the increased demand for identifying information. The committee recommended that adult adoptees should have retrospective access to such information and be given copies of their original birth certificates;

- the increased public awareness and interest in relation to adoption issues since the mid 1970s; and

- the effect of self-help organisations representing people affected by adoption.

The Tasmanian Adoption Act 1988 was passed in November of that year. Its most significant provisions are described below. [37]

[35] Inter-departmental Committee on Adoption Legislation Review, op.cit., p.3.
[36] Ibid, p. 4.
[37] Otlowski, M., 'The Changing Face of Adoption Law in Tasmania', Vol. 3, No. 2, (1989) Australian Journal of Family Law, p. 168.

Access to information

These provisions were described by the Minister for Community Welfare in his second reading speech on the bill as the most important from the Government's point of view[38]. The access to information provisions under Part VI of the Act have made it easier for people to obtain information – a significant departure from the secrecy under the 1968 Act to openness in the new legislation.

The Act provides that:

- an adult adoptee (ie one who is eighteen years old or more) may apply to the agency to obtain information about himself/herself which may identify the natural parents or relatives. Information which may identify the whereabouts of the natural parent or natural relative may not be disclosed unless the agency has the written agreement of that person or the person is dead (s. 82);

- an adoptee under eighteen years of age must have the written agreement of each adoptive parent or evidence of their death before s/he may receive identifying information (s. 81);

- a natural parent under the age of eighteen may receive information that could identify the adoptive parents or the whereabouts of the child where the agency has considered the wishes of the child and obtained written agreement from or evidence of the death of each adoptive parent. The agency has discretion in this area (s. 83);

- when an adoptee reaches the age of eighteen, a natural parent is able to apply for information about the child but may not be successful if the information sought could identify the adoptive parents or the whereabouts of the child unless written consent has been provided to do so (s. 84);

- a natural relative may apply for information about an adoptee but the right to receive such information is subject to agency discretion similar to that which applies in the case of a natural parent applying for such information (s. 85);

- an adoptive parent may apply for information about their adopted child but, where such information may reveal the identity of the natural parent of relative, the information will be released only if the agency has obtained written agreement from or evidence of the death of the natural parent or relative and the (adult) adoptee has been notified of the intention to provide the information (s. 86).

[38] Otlowski, M., op. cit.

Step-parent and relative adoptions

The 1968 legislation provided for adoptions by step-parents and relatives. Although the proportion of these adoptions had increased greatly by the end of the 1980s, there was a growing consensus of opinion that adoption by step-parents was not generally appropriate because there was no evidence of long-term benefit to the child and, indeed, negative implications were recognised.

Under the 1968 Tasmanian Adoption Act step-parent adoptions could only take place where the natural parent was jointly adopting, thus distorting the natural relationship. Adoption by relatives is seen to sever an existing relationship by law only and not in fact and could be harmful if it is used to conceal the natural relationship[39]. Fundamentally, adoption by step-parents or relatives does not serve the purpose of adoption, which is to provide a permanent home for a child who cannot be cared for by the biological family. Victorian legislation enacted in 1984 had given preference to guardianship and custody over adoption in such cases, except where the best interests of the child dictated otherwise and this is basically the position under the 1988 Tasmanian Adoption Act.

Sections 20 and 21 of the 1988 Tasmanian Act essentially provide that the court should not issue an adoption order in favour of a step-parent or relative.

Consent of the ex-nuptial father to adoption

These provisions represent a major change. Under the 1968 Act the father of a child born outside marriage had no absolute legal rights. He could be joined as a party opposing the making of an adoption order but this was at the discretion of the court. Alternatively he could apply for guardianship or custody of his child. Where the mother and father of the child were married however, the Act required the consent of both parents to an adoption.

Since the considerable rise in ex-nuptial births began in the 1970s, the role, rights and needs of natural fathers have received increasing consideration and have been increasingly legislated for. It is no longer seen as desirable or necessary that the father-child relationship should be terminated without the opportunity for the father to assume responsibility for his own child.

Section 29(3) of the 1988 Tasmanian Act sets out in detail the circumstances where the father's consent to adoption is required. The essence of these provisions is that where paternity is established either directly or indirectly the father of an ex-nuptial child has the right to refuse his consent to the adoption of the child.

[39] Inter-departmental Committee on Adoption Legislation Review, Report, Tasmania, October 1986, . p. 78.

Consent generally

The 1988 Act also introduced reforms in relation to providing and dispensing with consents generally to an adoption.

Under section 31, a relinquishing parent must receive counselling from an approved person. At least 24 hours before counselling takes place the parent must be provided with written information about the effect of the adoption order, alternatives to adoption and revocation of consent.

Section 23 alters the requirements relating to the consent of children to an adoption. The 1968 Act required the consent of a child aged twelve years or older unless there were special reasons relating to the child's welfare that the adoption order should be made without that consent. The new provisions required only that an order shall not be made unless the court was 'satisfied that, so far as practicable, the wishes and feelings of the child have been ascertained and due consideration given to them, having regard to the age and understanding of the child'.

The grounds for dispensing with the consent to adoption of a person whose consent would normally be required are set out under section 37. These include:

- not being able to find the person concerned after reasonable inquiry;
- certified psychiatric or medical unfitness;
- abandonment, neglect or ill-treatment of the child by the person;
- serious ill-treatment to the extent that the child would be unlikely to accept or be accepted by the person within the family;
- failing to discharge the obligations of a parent for not less than one year;
- physical or mental disability impairing the person's ability to meet the child's needs;
- the child being unlikely for any reason to accept or be accepted into a family relationship with the person; or
- any other special circumstances relating to the interests and welfare of the child whereby consent may properly be dispensed with.

Under section 38 the head of the agency must give written notice of the following to a person who has given consent to an adoption:

- the placement of the child with the prospective adoptive parents. If that placement becomes no longer possible, consenting persons must also be informed;

- the termination of such placement;
- the renunciation of the Director of guardianship of the child;
- the making of an adoption order;
- the death of a child who has died before an order is made. As far as practicable each parent who has given consent must be notified;

Except in the case of renunciation of guardianship, a consenting person may elect not to be given notice of any of the above.

A relinquishing parent may, under section 45, visit the child during the time during which consent may be revoked; however the Director may give written directions restricting the circumstances of visits.

Subsidised adoptions for special needs children

It has always been difficult to place special needs children in adoptive families, even though it has long been recognised that they derive many advantages over being retained in institutional or even foster care. The presence in a family of a child with particular behavioural, physical or intellectual problems, whether s/he is the natural child of the parents or adopted, has enormous consequences for that family. It is not an easy matter to locate adoptive parents with either the personal qualities or the financial means to undertake the care of such a child.

In order to encourage more adoptions of special needs children, the Director is empowered to make grants or provide financial or other assistance in relation to the adoption of such children.

Eligibility criteria for adoptive parents

These were tightened under the 1988 Act. Henceforth under section 20 an applying couple had to be married for at least three years before being considered as adoptive parents, though this three-year period could include a period living together in a stable de facto relationship immediately before the marriage.

A single person may be granted an adoption order where the court is satisfied that exceptional circumstances exist which pertain to the child's interests and welfare.

Under section 22 adoptive parents must be no less than eighteen years older than the child, unless circumstances relating to the child's needs make it desirable to make an order for adoption in the absence of this requirement.

Specific eligibility criteria for adoptive parents were significantly expanded under section 24. The Adoption Regulations 1992 include the following requirements for adoptive parents:

- the capacity to provide the necessary standard of care to protect the safety, welfare and physical health of the child until adulthood;

- good character and suitable to be entrusted with the care and welfare of a child;

- motivation for adoption indicates awareness of the needs of the child and expectations for the child likely to enhance his future;

- emotional and personal capacity to be stable, loving and concerned parents;

- understanding of the needs and rights of the child's natural parents;

- having regard to other children already in their car, capacity to accommodate and promote the interests and welfare of the child;

- capacity and commitment to assist the child to acquire knowledge and information about his adoptive status; and

- where the child is not a citizen or of different ethnic or cultural background, understanding of and interest in that culture and the capacity and commitment to facilitate positive links with that culture.

Inter-country adoptions

The increasing shortage of children available for adoption locally stimulated interest in the adoption of children from overseas. Australian adoption however, including the 1968 Tasmanian Act, contained no specific provisions for the operation of such adoptions.

The Joint Committee on Intercountry Adoptions was established by the Commonwealth in 1985. Its purpose was to 'determine strategies for the efficient management of intercountry adoption services with a view to enhancing a co-ordinated Commonwealth, State and Territory approach to the service'[40]. The Tasmanian Inter-departmental Committee on Adoption Legislation endorsed the recommendations of this committee contained in its report, recommending that they be accepted and, where appropriate, incorporated into the new Tasmanian adoption legislation.

Provisions in line with recommendations of the inter-departmental committee of review were included in sections 46-48 and Part IV of the 1988 Act.

[40] Otlowski, M., 'The Changing Face of Adoption Law in Tasmania', Vol. 3, No. 2, (1989) Australian Journal of Family Law, p. 182.

Adoption information service and register

Under section 89 of the Act, the Adoption Information Service was established to advise people about the provisions of the act, make arrangements for counselling in relation to applications under the Act, receive applications for adoption information and facilitate the provision of information to people on the Adoption Information Register.

The Adoption Information Register was established to record the names and addresses of those adoptees, natural parents and relatives of adoptees and adoptive parents provide application to be included on the register. The wishes of a person in relation to the dissemination of information to or meeting others on the register are also recorded.

Regulations under the Act provided for the approval of adoption agencies, assessment of prospective adoptive parents and consent procedures and forms.

The salient provisions in relation to consent under S.R. 25 provide for the requirement that written information given to relinquishing parents must include the following:

- the nature and effect of adoption and the effect of signing the consent form;
- the alternatives to adoption and the availability of services and support;
- the right of the relinquishing parent to express certain wishes and to be notified of certain matters in relation to adoption arrangements;
- the right of the parent to have reasonable access to the child during the revocation period;
- the right of the parent to obtain a copy of the child's birth certificate before the adoption order is made;
- the legislative provisions in relation to revocation of consent;
- the provisions of the act with regard to the Adoption Information Register.

The consent form was changed in 1995 and provides for the inclusion of the following information:

- reasons for consent to the adoption;
- authorisation of medical treatment and examination;
- expression of wishes in relation to religious convictions and ethnic background of the adoptive parents;

- expression of desire as to whether the identity of the relinquishing parent may be made known;

- expression of wishes about access to or information about the child after the adoption order is made;

- expression of wishes as to notification about certain matters outlined in section 38 of the act and the address for such notification;

- revocation of consent within thirty days;

- acknowledgment that the Director will assume guardianship of the child until the adoption order is made;

- acknowledgment that consent is given voluntarily and understanding of the legal effect of the making of the adoption order.

Chapter 4 – The Adoption Process 1950-1988

4.1 Family circumstances

Witnesses interviewed came from a wide range of family circumstances. Some were from large families who saw another baby as impossible to deal with. Others were from families who felt disgraced by their daughter's pregnancy and did everything possible to hide the fact and withdraw her from the community.

Some respondents were from the welfare system of the day, often alienated from their families and with very little departmental support.

4.2 Family reaction

The Committee received evidence from many mothers of varying ages, who had relinquished their children to adoption for differing reasons. It was noted however that the majority were young unmarried girls who had little family or financial support. These attitudes were indicative of the social attitudes of the time.

In the 1950s and 1960s 'Victorian' attitudes still prevailed and an unmarried mother-to-be was 'definitely not correct'. Families reacted adversely to the news of their daughter's, granddaughter's or sister's pregnancy and she was generally shunned from the family circle.

Social attitudes underwent change in the early 70s and on into the 80s and thus single mothers-to-be were counselled and assisted with financial and other support systems.

A very consistent theme was established throughout evidence to the Committee that the mother of the pregnant young girl played a major part in decisions, actions and the cover-ups involved in the whole process.

It was interesting to note the comments from the representatives of Origins when asked; "Do you think on a scale of culpability that the system or your family was more responsible for the outcome"? One representative said "my family, my mother" and the other said "the system".

One witness who gave birth to her child when she was sixteen was told by her mother that she could not keep the baby "because no man wants a woman with children". Another witness was eighteen years old when she gave birth to her baby. Consideration was never given to her keeping her child and it was stated that "we think it's best you just adopt your child out".

These comments from family, and society generally, were common with the theme being to adopt the child - 'you'll forget about it - get on with your life'.

Evidence was presented, however, of a couple of occasions where the parent(s) of a young girl were supportive but the social workers or agencies had made adoption sound more attractive. In one case in particular, the mother of the pregnant girl was strongly opposed to her daughter having the baby adopted and offered support and did everything she could to convince her to keep the child, without success.

4.3 Where unmarried women went for their confinement, and why?

Some of the young mothers were sent away by their family to have their children, either to other parts of the State or even interstate. Others secretly left their family homes unable to confront their parents with the news of their pregnancy. Keeping in mind the social environment during the period, the fear of disgracing the family or being thrown out of the family environment, was a strong consideration.

Most of the witnesses and respondents had delivered their children at the Salvation Army hostel "Elim", the Gore Street Hospital , or the Queen Alexandra Hospital.

4.4 When the issue of adoption was first raised

In most cases it is evident that the issue of adoption was first raised by family members prior to confinement. In others, adoption was discussed at the hospital or home.

Of the thirty plus birth mothers who made submissions, most adoptions were organised by a family member after a family conference to decide the best thing to do. At this time in society many naturally saw adoption as the best outcome for both the child and the mother because of the stigma attached and a desire of parents to allow their daughter to enjoy a normal life.

For some the fear of what the community would say held more weight than their daughter's wishes. Others, because of the financial position of the family, saw no capacity to 'add another mouth'.

Other young mothers had gone to a maternity hospital or Home to deliver their babies and expected to take them home. The first suggestion of adoption for these birth mothers was via the hospital or adoption agency. One witness explained how the Matron had spent many days talking to her about adopting her child and telling her that a wonderful wealthy family was waiting for her baby who could give the child greater opportunities than she would be able to provide. When this mother suggested that she could get a job and that her parents

would help look after her child, she was told that she was "a very selfish girl to only think of [herself] and not the baby". It was also pointed out that if she really wanted what was best for the child she would choose adoption.

4.5 When adoption was decided

Some women believe that the Child Welfare Officer had a role to play in convincing them to have their baby adopted and even to the point of covering documentation they signed authorising the adoption process.

The Committee found no evidence to support these claims. Extracts from Departmental manuals and instructions make it quite clear that mothers should be asked to consider all alternatives and should be informed of help available. One former Child Welfare Officer described her role as "facilitating people to make up their own minds about what they did".

Nothing in the Department's evidence, either written or verbal, suggests anything but an enlightened approach at a time when community attitudes were still judgemental, condemning and unforgiving. The evidence provided suggests that Child Welfare Officers during the period concerned fulfilled their duties with care and within the policies adopted at the time.

Collusion between family and hospitals appears to have been evident and whilst many young women saw the authority as the scapegoat, it is in many instances easier to lay blame solely at the faceless rather than the familiar.

4.6 Use of drugs during and after birth

Some witnesses have suggested that drugs were used during and after the birth to 'sedate' them, to allow the adoption process to be fulfilled without conflict. One mother was given Valium and cannot remember what happened to her during the five days she was in hospital. Other drugs used include Stilboestrol, to suppress lactation, and Pethidine.

Dr Jon Mulligan from the Department of Health and Human Services acknowledged that on anecdotal evidence "substantial doses of narcotics for the purposes of pain relief were a pretty standard part of obstetric practice in those days". [41] He added -

> "Most of the drugs that might be considered to be tranquillising at the moment were pretty unsophisticated, so to the extent that people may have been given drugs because they were upset or dealing with the painful and discomforting aftermath of confinement, then they may

[41] Department of Health and Human Services Submission, p. 7.

> well have been given drugs that are not as sophisticated and therefore have more side effects, which might include being overly sedating".[42]

4.7 Signing of consents

Some birthmothers giving evidence to the Committee believed that they were forced to sign consent forms whilst they were influenced by medical dosage, often in a short time span after birth and often with information on the forms covered. Some witnesses were not aware of having signed a Consent for Adoption at all. In some of the evidence viewed by the Committee, it was not clear that the signatures on these documents were actually performed by the birthmother concerned.

Evidence was given of incorrect information on "Particulars Regarding Parents" documents. In one case the father's name had been left off, even though he had been named, and in another case a name had been added as the father when no name had been given.

In one case a Form VI Consent to Order of Adoption indicated a 'male' child had been born but on a Form V Adoption of Children Act 1920 a 'female' child is registered. Both of these forms were witnessed by the same Justice of the Peace on the same day. This highlights the difficulty of a birthmother who believes she had a daughter only to be confronted years later by a young man as her son. Undoubtedly this mother's inability to accept the situation has been created by the incompetence of those who completed the paperwork.

4.8 Birth father's role in the adoption process

Evidence was received from only one birth father in this inquiry. This respondent came forward to make the point that he was informed 16 years after a failed relationship that he was the father of a child and that child wanted to discuss this with him. His expressed views could not be taken to be particularly representative of views of birth fathers; however, his emotion at this belated news was obvious.

When questioned on the matter of the birth fathers, many birth mothers said that they never revealed their pregnancies to the male involved and would take that secret to their graves.

Some other witnesses revealed that they had to resort to pretending that there was no way the father could be named, and rather than naming the male involved, preferred to undergo the embarrassment of appearing to have had multiple sexual partners, or that the sexual partner's name was not known to them at the time.

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[42] Department of Health and Human Services, op. cit.

The Consent to Adopt form however required that the birth mother fill out the details of the birth father as far as she could; height, weight, hair colour, complexion, for example. Evidence was given by a number of witnesses that they do not remember giving the details of the father that actually appeared on the form (that was made available to them under FOI many years later). They assumed that someone else, probably their own mother, for example, had provided the information, sometimes even enough to easily identify the birth father with some research.

4.9 Practices during confinement

Respondents giving evidence revealed that until the latter period of this Inquiry that unmarried mothers were dealt with quite differently throughout their confinement and delivery, than married mothers. Evidence was also received that even in the mid-seventies separate wards were maintained on maternity floors for unmarried women.

At the other end of the scale, in the 60s, institutionalised segregation, secrecy, judgemental behaviour and other dealings, which reflected the social situation at the time was referred to by many witnesses. “You made your bed, you’ve got to lie in it” – was a statement that was heard by the committee on a number of occasions.

Some health care workers giving evidence to the Committee indicated that from the early seventies onwards much of this culture dissipated and more appropriate relationships existed between patient and the workers. Enough similar evidence was presented however, that would suggest that the 60s were not a good time to be an unmarried mother in hospital.

Practices in maternity hospitals varied as to the arrangements for contact between the newborn child and the birthmother. Depending on the hospital, the religious organisation involved or even the doctor, some mothers never held their child, while others were given a short time together. Other mothers indicated that they looked after their babies for a period of time before adoption procedures were initiated.

One witness who delivered her baby at Elim advised the Committee that no one was allowed to breast feed their babies because it was “dirty to breast feed”. Another, who lived at Elim for some time, said that she could only see her baby once a week and that arrangements for the adoption were not made until much later.

Another respondent gave evidence that she was made to breast feed her baby at Gore Street as “a punishment for being a bad girl”.

A witness who delivered her baby at the Queen Alexandra Hospital was told her baby was sick and that she could not see it. After five days in hospital, sedated with Valium, the young mother went home

and had to leave her sick child. Although she always believed she would be taking the baby home, a day and a half later she returned to the hospital to be told that her baby had been adopted.

In any event, whether the mother bonded with the baby or not, without exception, every mother gave evidence of a very painful and lasting feeling of loss and deprivation after separating from their baby – even through to present times. Even reunion with the child 20 years later, in many cases, did not ease the pain, sometimes referred to as guilt, that mothers felt.

4.10 Revocation of consent to adopt

The Adoption of Children Act 1968 required that the consent of the birth mother was generally not to be taken within seven days of the birth of the baby and allowed her to revoke that consent within thirty days of signing.

Some consistent evidence indicated that the birth mother's right to change her mind was not always clearly explained. Some mothers contend that they were never told of the revocation period. This, given the circumstances of a first birth, drugs during labour and the general social pressure to 'deal with the problem' is understandable – it may well have been forgotten in the avalanche of distressing events.

It would be of course a consistent circumstance if health workers or social workers in the 1960s did appear to gloss over the revocation opportunity as an unconscionable option for a young person 'in trouble'.

Under close questioning, relevant health workers who gave evidence, all remembered the revocation provisions and were adamant that they always discharged their legal and moral responsibilities in conveying all options to birth mothers.

4.11 Adoptive parents and birth mothers

"Your child will have a much better life, they are a Christian couple have a good income and can provide very well for your child".

Statements such as this were commonly used to encourage mothers to relinquish a child or to comfort mothers who had made the decision. Whether the statement was true or not is not the issue, it is a subjective matter and in relative terms is difficult to prove either way.

Evidence was received from a number of relinquishing mothers that the eventual revelation as to the identity of the adoptive parents was a disappointment. The relinquishing mother may well have built an unreasonable and highly coloured view in her mind of what the adoptive parents of her child were like and what kind of life the child might have had.

Evidence of one birth mother revealed that she had married the father of her first child after relinquishing the child. They went on to have three more children who all went through tertiary education and had, by any standards, a 'good life'. They were dismayed recently when the identities of the child and the adoptive parents were disclosed to find that the child had been raised as a single child in a low-income family and had not had any tertiary education at all.

Other relinquishing mothers were disappointed that their child turned out to be troubled in their own family relationships.

In general however, the variation of outcomes for adopted children probably reflects the general social demographics in Australia.

4.12 Feedback to birth parents during the adoptee's childhood

In general, adoption agencies seemed to have taken the view that once the child was relinquished the birth parents had no particular right to any information regarding the child during its childhood. Indeed, no evidence was given that any player in the adoption process ever contemplated that the recently passed laws which allow reunion, would ever be possible in the future.

This culture resulted in a circumstance where, from evidence received by a birth mother that her daughter had died at 7 months, some 18 years prior to eventual disclosure of identity. That news devastated the birth mother and gave the Committee an insight into the strength of the bond between mother and her child, regardless of distance or knowledge of identity.

The mother had imagined her child, growing year by year, quietly celebrating her birthdays and pictured her as a healthy 18-year-old person. To learn that her child had never existed past 7 months of life must have been tragic news in more ways than one. The confusion over how to focus her grief was understood by the Committee.

On questioning health officials who gave evidence, it was revealed that no provisions existed at the time, nor currently, on the death of an adoptee that the relinquishing parent(s) are informed. It is the opinion of the Committee that the system should have a method where the Registrar of Births, Deaths and Marriages be required to determine whether any person's recorded death was an adoptee under Tasmanian laws and if so, advise the birth parents if they can be located.

On the questioning of Centacare, a non-government adoption agency at the time, and still an adoption agency, evidence was given that assured the Committee that Centacare would never allow such a circumstance to occur. This clearly exposes a divergence of

performance by the government and non-government sectors and the government will need to address this.

4.13 Change of adoption laws

As mentioned earlier, the change in adoption laws in 1988 was brought about by a review conducted by an Inter-departmental Committee on Adoption Legislation. The Adoption Amendment Act 1998 incorporated a clause relating to "contact veto". This change was largely brought about by pressure from the adoption support group, Jigsaw, a group that many witnesses referred to as being helpful in their lives.

The laws were changed to reflect the reality that a large proportion of relinquishing parents and adoptees had a deep desire to be reunited in some form, at some time in their lives. The fact that these reunions are seen as disruptive and emotionally upsetting by adopting parents is generally recognised by the Committee, but the Committee believes that following all the evidence received, the recently passed Acts are very necessary.

4.14 Reunions

Reaction of adoptive child

Not only the birthmothers felt anguish at separation from their child, but amongst adoptive children who spoke to the Committee there was an overwhelming sense of something missing from their lives. As most children had become aware, by one means or another, that they were adopted children, and regardless of the many loving relationships which were formed with their parents, there was also the feeling that, 'yes' there was something lacking during their lives and was firmly connected with their true identity. 'Who are we really? To whom did we really belong? Why had there been this separation?'

Evidence was received from a number of adopted children relating to the circumstances of their reunion and their feelings at the time. One witness explained to the Committee the questions that need to be answered, when you are told you are adopted. "I just wanted to know the truth…exactly why, for one".

Evidence from many birthmothers was consistent with this view, with the most usual reaction from adopted children being an angry "why did you give me up"? This revealed feelings that the child felt unloved by his/her natural mother and that this was a major issue for them.

The lack of knowledge about family medical history and a possible predisposition towards a condition such as Diabetes or Cancer, was also cited by several witnesses as a matter of concern. When birth parents were unknown, so was the genealogy of a long line of antecedents.

Another felt strongly about the possibility of forming close relationships with a sibling or close blood relative, the chances of doing so she believed were enhanced in a State such as Tasmania with its small and stable population.

Reaction of Birth Parent(s)

As discussed earlier, the evidence received from birthmothers indicated that they had developed a stylised picture of their child and of the adoptive parents, and the reunion was considered somewhat traumatic. Further evidence showed that, while many reunions were progressing with a relationship having to build slowly between mother and child, many others had struck trouble one way or another and had very limited contact with each other.

One issue for both parties is the discovery of siblings and of grandchildren and these matters cause complicating factors in the orderly progress of the re-establishment of a relationship.

Reaction of Adoptive Parents

Very little evidence came forward from adoptive parents and any information received as to their reactions was from other perspectives.

One adoptive mother came forward, however, with the express purpose of putting a view she claimed represented the views of many adoptive parents. Those views reflected the upset and disruption to the life of a tight family unit who always imagined that there would be no reunion. This witness spoke of the feeling that these reunions were only happening because of pressure from birthmothers and that the adopted child would be better off without the reunion. She felt that birthmothers had “made their beds and had to lie in them” and should get on with their lives. It did not escape the Committee that these views were the very things that were expressed to the birthmother when she first relinquished her child.

The Committee became aware, however, of the traumatic nature for all involved in the reunion process.

4.15 Role of other interested people in the adoption process

Evidence was received from a mother of a young girl who found herself pregnant and undergoing pressure to adopt her child. This witness had agreed to support her daughter through her pregnancy and in bringing up the child. After an interview with a social worker however, her daughter changed her mind and said that she was going to have the baby adopted.

It is obvious that the pain and suffering also extends to the birth grandparents in the adoption process. “We are hurting, not just for ourselves, but also for our daughters, who felt shame at the time, and who knows what misery now”.

Chapter 5 – Adoption of Older Children

The Committee heard evidence of a small number of circumstances where older children were relinquished for adoption.

One witness was adopted at the age of fourteen by her aunt and uncle and taken away from her mother and siblings to live interstate. She believes that the system is to blame in her case and that her adoption should not have been allowed to happen. This case also highlights the socio-economic climate at the time.

At the time of the adoption in 1960 society was different. "I wasn't a child, I was fourteen, but in those days, forty years ago, you didn't say anything. You didn't ask questions". The witness was taken into the Births, Deaths and Marriages Office without anyone discussing the adoption with her. The officer at the desk asked her if she agreed to the adoption – and of course in those days you agreed.

The pain and anger at being taken from her birth mother is still evident today. "I feel extraordinarily angry still. If I did what I feel inside, I'd most probably go berserk…that's how much anger I still have inside me".

Another witness indicated to the Committee that her child had been adopted by her mother at a young age. She stated that because she needed her mother to look after her child while she went to work, her mother was able to force her to agree to the adoption and sign the papers.

In giving verbal evidence to the Committee, this birth mother stated that at no time was she told of any options that she had by the officer at the Births Deaths and Marriages Office. A copy of the birth certificate, with the name of the birth parents and the birth name of the child, would help to alleviate some of the pain caused through this adoption.

Chapter 6 – Matters relating to Wards of the State and the Adoption Issue

The Committee heard evidence from a few witnesses who had been wards of the State prior to relinquishing their own children to adoption. In most cases it appears that there was limited supervision or review of the foster homes involved.

One witness was three when she became a ward of the State and placed in foster care. Soon after this time it is evident that she was sexually, emotionally and violently abused by the foster family. Although her parents were later able to have their other children returned, for some reason this young girl was not returned to her birth parents.

Regular checks were carried out by the Department of Child Welfare in the early years, however, over a later period of four years there is no record of any maintenance reports being completed. Despite demands from the Director at the time for reports to be provided, the files reveal no records of this occurring.

Another witness giving evidence to the Committee became a ward of the State from an early age. Although her siblings were placed with foster parents she remained in a Children's Home. The treatment at this home was also harsh and it appears little effort was made to care for the children in a kind and normal manner.

After becoming pregnant this witness was sent to Elim in the early 1950s, where she stayed for almost three years. She stated that right from the start she was pressured to have her child adopted because she "would not be any good as a mother …" During the time at Elim she was only allowed to have her child one day a week and the rest of the time she was kept busy in the laundry. After twelve months of living at Elim she was convinced that she would leave with her child when she could get a job.

It appears there is some doubt as to the legitimacy of the signature on the adoption form in this case. The witness stated that the staff had tried to get her to sign adoption papers before and she had refused, and that there is no way that she would have signed them. When she confronted them about how the adoption occurred, she was told her child was interstate and "that would teach [her] a lesson".

Chapter 7 – Discussions with Health Workers

Evidence presented to the Committee suggests that there were no written procedures for medical staff for the handling of adoptions in hospitals and that this was consistent across Tasmania, and possibly Australia. Nursing staff were made aware that a baby was available baby for adoption prior to the delivery. After the delivery, the baby was taken immediately and the mother was not allowed to see the child.

Nurses working in the hospitals, unless they were working for the adoption agency, were not supposed to be involved in taking consents or signing the papers or talking to the women about their options. It is the feeling among some nurses however that the mothers were placed under pressure to consent to adoption by the adoption agencies and in some cases, medical staff.

It was stated that there is a legal requirement for records to be kept for seven years, but that most hospitals would not dispose of any medical records unless there was a fire. In the case of children, there is a legal requirement that records be kept for 27 years.

In evidence provided by the Tasmanian Branch of the Australian Medical Association (AMA), it is stated that the "normal procedures carried out by doctors in relation to women during childbirth through the period from 1950-1988 predominantly involved routine ante natal care with appropriate blood tests to monitor the progressive health of mother and unborn baby".[43] It is further stated that this procedure did not differ in any way if the mother was unmarried.

A number of general practitioners provided regular consultations to cater for general health matters for the residents at Elim. These doctors would attend as requested.

The Tasmanian Branch of the AMA has no recollection of Elim ever being a training school for nurses in midwifery and that such training was confined to the Queen Alex Maternity Hospital and Calvary Hospital.

[43] The Tasmanian Branch of the Australian Medical Association, Letter dated 14 September 1999 addressed to the Chairperson, Joint House Select Committee of Inquiry Adoption and Related Services.

Chapter 8 – Discussions with Social Workers

The Committee heard evidence from a former Child Welfare Officer who worked for the Department of Social Welfare between 1967 and 1978. The only qualifications required to be a Child Welfare Officer at that time was a driver's licence and a car. "Most people were probably teachers, nurses or had been in people-related fields".

It is evident that there was a policy and practices manual with specific instructions to be followed by all Child Welfare Officers and that this manual was the guiding document. A former Director of Social Welfare wrote in 1966 that "the bond between a child and his parents is of great importance, to be disturbed only as a last resort. Paradoxically this bond is often strongest in families where parents have been particularly irresponsible in caring for their children".[44]

In cases where a mother was seen to be neglectful and the case had gone before the court, "then the department was asked to investigate and provide a report to the court on the circumstances; and that would also involve finding out what the potential was for the child to be returned to the care of the parent or the family…"[45]

As discussed earlier, there was no recognition of the need for single parents to have an income until the early 1970s. There was 'outdoor relief', which was funded by the State, that was available to women who had been deserted by their husbands, but it was difficult for people who had not been married to get that income.

It is evident that this lack of financial support, along with family and societal pressures, made it very difficult for a young unmarried mother to keep her child. As a former Child Welfare Officer said, "I think one had to be very brave to keep a child in those times, to go against the mainstream".[46]

Another former Child Welfare Officer, who joined the Department in 1966, stated that she believed that adoptions were carried out by hospitals, lawyers, magistrates and others. She commented that as society moved forward, more detailed information became available and that registration documents were more comprehensive from the 1970s.

The evidence provided indicates that, prior to 1968, birth certificates were completed but did not include a record of the father's name, and no effort was made to record medical reports or family history.

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[44] Daniels, Dennis, op. cit, p. 3.
[45] Bannerman, Toosey – Transcript of Evidence, 15 July 1999, p. 8.
[46] Ibid., p. 13.

The witness indicated that, at Elim, mothers were required to care for their own babies until such time as they were placed with adoptive parents. At the time this contact between mother and baby was not seen as beneficial, however, in the present times this would be viewed as an opportunity of establishing a bonding process.

The former Child Welfare Officer believed that financial support for Elim was a problem in the 1960s and that families were expected to provide financial support, or the girls found part-time work whilst waiting for the birth of their babies. Elim was considered a tough environment, and the girls were expected to help with the daily running and care of the home.

Although the witness was not aware of any judgmental attitudes by the Department at this time, the keeping of babies by young unmarried mothers was heavily frowned upon by society and many families.

After new legislation was passed in 1968, every adoption which occurred within Tasmania required the applicants to be well scrutinised before approval was recommended to the Court by the Department, Centacare or private agency. Privately arranged adoptions were not permitted.

Representatives of the Australian Association of Social Workers gave evidence to the Committee, both written and verbal. The Committee was advised that there was no social work education in Tasmania until 1974, so that any social workers employed prior to that time were trained in other parts of Australia and chose to come to Tasmania.

The Association's submission mainly referred to practices post 1974 in which it strongly denies that the practice of any of its members engaged in the delivery of adoption services could be described as unethical or unlawful. It was pointed out that the level of supervision within the Department of Community Welfare was strict and that,

> "adoption stood out in the Welfare Department as a particular area where special efforts were made to ensure that the workers who were involved in adoption were trained, experienced, mature and subject to a level of supervision that other workers in other programs did not receive".[47]

It was suggested that this special attention given to adoption services sometimes created tension within the Department when compared to particular standards that were either not given or not required in other programs.

This is evidenced by a witness who had been a ward of the State for four years without a report being done by a Child Welfare Officer or social worker.

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[47] Australian Association of Social Workers (Tasmanian Branch) – Transcript of Evidence, 15 July 1999, p. 4.

The Departmental file shows directives from the Director to carry out reports, and yet no reports were made.

It was also interesting to note that the people involved in the adoption area had greater access to training and opportunities to attend conferences. This appears to be as a result of the enlightened leadership of the Director at that time.

At the Australian Association of Social Workers Adoption Conference held in June 1997 a statement on adoption, which is detailed in the Executive Summary, was given.

The Tasmanian Branch of the AASW stands by this statement and acknowledges "the continuing pain experienced by some people who have been involved in the relinquishing process".[48] It was further stated however that

> "past practice was based on the best available knowledge at the time with the best of intentions, that we did not or could not have foreseen with the knowledge that was available at the time, the level of grief that has continued to be experienced…"[49]

It is evident that with hindsight and changed knowledge the approach to many situations faced by social workers during the 1960s would now be quite different.

[48] Australian Association of Social Workers (Tasmanian Branch), op. cit., p. 13.
[49] Ibid.

Chapter 9 – Evidence given by former Senior Management

A former Director of Social Welfare from 1977, in giving evidence to the Committee, indicated that past adoption practices need to be considered in the context of the social and economic conditions at the time. He believed that the appointment of Mr GC Smith as Director of Social Welfare in 1954 brought the "State social welfare and child welfare systems into a new era".

> "It is important to note that in the 1960s Smith introduced an allowance for single mothers. This was to enable them to care for their children until the child reached school age. This support included counselling and advocacy. … **It was his view that it was immoral that a mother should have to give up her child because of her economic circumstances."**

The witness indicated that this illustrates that the "Department's emphasis was on assisting the mother or family to care for their children rather than removing them". An extract from a departmental manual and instructions in relation to the 1920 Adoption Act states, in relation to the counselling of an unmarried mother, that:

> "In particular she should be asked to consider possible alternatives to adoption, and should be informed of what assistance may be available to help her keep her child. …it is essential that the CWO is painstaking before accepting the request of the mother to the Department to place the child for adoption".

The 1968 Act was given emphasis by the Director in the Manual of Procedures 1970. An extract from this Manual states that:

> "The policy of the Department is that while in many cases adoption of the child may be the best course, the mother of the child should have a choice, should be informed about any alternatives, and assisted to work out her own decision. The CWO should help the mother to see the problem in realistic terms, but should not persuade her in either direction".

The former Director believed it must be a concern to the Department and its officers to face complaints from relinquishing mothers, particularly from 1969 onwards. "…the Department has endeavoured to the best of its ability, and at some cost to provide an ethical, professional and sensitive service to what it recognises as an important human service".

Chapter 10 – Evidence of Adoption Agents

Centacare

Centacare, formerly called the Catholic Family Welfare Bureau, began professional adoption services in 1960 at which time the Registrar General was the official state adoption administrator.

In the submission provided by Centacare it is stated that,

> "Centacare in its practice did not accept and arrange a Consent to Adoption until after the birth parent had left hospital. Depending on the time of contact by the birth parent with the agency, Centacare arranged regular counselling sessions which included a review of the future decision whether to see and nurse her new born. Hospital and Medical practice at that time was to disallow the relinquishing parent to see or contact the infant".[50]

The submission further recognises that this policy was influenced by a Joint United Nations/World Health Organisation paper on the Mental Health Aspects of Adoption.

The evidence suggests that extensive counselling was made available to birth parent/s and that follow-up counselling and support was offered. Anecdotal evidence provided by birthmothers to Centacare indicates the following issues were of concern:

1. "At the time of relinquishment they felt that they had no other choices, family did not support them but pushed them towards adoption and society condemned them.
2. Strong anger remains towards family and the social system.
3. Clear memory of the time of confinement and post delivery period is often blurred and confused.
4. Most mothers who delivered in hospital were denied access to their child.
5. Most recall signing consents. The few who did not were able to see their consent forms. So far there has been no case where a consent form has not been available.
6. There has been no evidence about misinformation about their child being stillborn.
7. Few mothers understood the revocation of consent process.
8. A significant number of mothers believe that relinquishment was the appropriate choice for their lives at that time. Those

[50] Submission to the Joint Select Committee into Adoption and Related Services by Centacare Tasmania Family Services (No. 39).

who have had reunions with their child comment that their choice was validated".[51]

The Salvation Army

In written and verbal evidence provided by the Divisional Commander of The Salvation Army, it is stated that in the 1960s "there was a great aversion to unmarried mothers and an unloving attitude of mothers to their own daughters".[52] He added that The Salvation Army was "sympathetic to the difficulties faced by young unmarried mothers at a time when they did not always receive support from their families, and society generally treated them harshly".[53]

The Salvation Army felt that it was inappropriate to comment on the following matters:

- "whether adoptions were taken for granted at Elim
- whether alternatives to adoption were explored with the mothers
- whether fathers should have been contacted after the births
- discrepancies in official documentation
- the process of obtaining consent for adoption"[54]

In giving verbal evidence to the Committee, it was stated that because of the passage of time and the fact that some people may have died, that The Salvation Army has "no records available with a lot of the things that might have happened there".[55]

At a later meeting with the Divisional Commander of The Salvation Army, some records were made available. A copy of The Salvation Army history record from 1897 to 1997 and some statistical information and correspondence were provided.

The information contained in the history book relates to the day to day events at Elim. The statistical information and correspondence, however, is only from 1 January 1971 to 31 January 1971. The following are examples of the information recorded:

A consulting obstetrician "visits Elim every Thursday for clinic. Dr is notified of admission of patient and if case is uneventful then again when all is finished and mother and babe satisfactory".

"All cheques are kept in the office directly from the daily mail and then on each alternate Tuesday morning the girls sign their cheque and make payment.

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[51] Centacare Submission, p. 3.
[52] Statement to the Joint Select Committee on Adoption and Related Services 1950-1988 by Major Peter Callander, Divisional Commander for the Tasmania Division of The Salvation Army, p. 1.
[53] Ibid.
[54] Ibid., p. 2.
[55] Transcript of Evidence – 15 July 1999

The charges for Hostel are:

Per Week

Girls –	16-18	$7.00
	18-21	$10.00
	Over 21	$12.00"

"If the lass is placing the babe for adoption, as soon as possible after the babe is born the child is placed on to the family group of her M.B.F. so that it is then possible for the hospital to claim $18.00 per day per baby. IF the lass is keeping her babe THEN there is only need to sign one form".

"It has been the custom for the natural father or the current male friend to be able to visit the lass when he desires. It is always suitable to ask the parents to give their consent but even so sometimes I have found it necessary to have a talk with the parents to encourage an arrangement for the two to meet as they will only go behind the parents and staff and see each other anyway".

Department of Health and Human Services

The submission from the Department of Health and Human Services provided background material which was taken from administrative files and annual reports to Parliament. There are no details however, relating to adoption practices prior to 1960, as the records for this period are limited.

The Department estimated that between 1920 and 1998 11,338 adoptions orders were made in Tasmania and that 11,074 were made prior to 1 July 1989. Almost all of the children in these adoptions were born to unmarried women. "Children with health problems or who were considered likely to develop problems as a result of problems in the natural family background were likely to be placed in foster care. Many of these children were subsequently adopted by their foster parents. The practice of placing 'defective' children for adoption was strongly opposed by some members of the medical profession until well into the nineteen-seventies".[56]

Approximately 20% of all adoptions until the end of the 1980s, occurred within the birth family, either by relatives or step-parents. Some children were adopted as infants and others as older children. The total number of adoptions after the early 1970s reduces significantly and very few children are now relinquished for adoption.

The *Adoption of Children Act 1920* "gave a legal framework to practices existing for many years… In the early years orphaned, destitute and neglected children were considered a significant social problem; these

[56] Submission from the Department of Health and Human Services, Child, Youth and Family Support Division, to the Joint Select Committee into Adoption and Related Practices, 1950-1988 – June 1999, p. 3.

children and children born outside marriage were regarded as unfortunate and needy. Families prepared to take in such 'unwanted' children were regarded as performing a charitable act. Despite major changes in social attitudes, this perception still colours the present view of adoption".[57]

The Department's submission states that it is difficult to establish who was involved in private adoption arrangements during the 1950s and much of the 1960s. "It is likely that arrangements during this time depended on the standards and beliefs of individuals. It has been suggested that particular medical practitioners were active in arranging adoptions in some parts of the State. Some charitable and religious groups provided accommodation for unmarried, pregnant women and may have been instrumental in adoption arrangements prior to 1969, although the extent of this involvement is unclear. Records of births at the maternity home "Elim" in Hobart, show that, although many children were adopted, many also went home with their mothers".[58]

In the evidence presented in relation to consents for adoption, prior to the introduction of the *Adoption of Children Act 1968*, it was not considered unusual for adoption orders to be made within a few weeks, or within a very few days, of the birth of the child. One reason given was to enable the birth parent(s) to return home as soon as possible. There was also a perceived need to place the child with the adoptive family as early as possible.

The Department's evidence suggests that the Department of Social Welfare's annual reports to Parliament from 1961 indicate some "concern felt by the Department in relation to practices associated with private adoption arrangements. These included: consent being signed before a mother had time to recover from the birth, inappropriate placement of children and instances of pressure placed on some mothers to relinquish children by hospital staff".[59]

It is evident that the Department initiated many practices that were later included in the *Adoption of Children Act 1968*. "The policy and administrative guidelines available show consistently expressed respect of the right of parents considering adoption and concern that they are able to choose a course appropriate for themselves and their child".[60]

It is difficult to determine what policies and practices were undertaken in hospitals prior to the late 1980s. Before this time individual hospitals and maternity homes were not under central control and the policy and practice within these hospitals was determined by the medical superintendent or Board of Management. The Department of Social Welfare however referred privately arranged adoptions to lawyers.

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[57] Department of Health and Human Services, op. cit., p. 4.
[58] Ibid., p. 5.
[59] Ibid., p. 6.
[60] Ibid., p. 7.

The major features of the *Adoption of Children Act 1968* are outlined in Appendix "A". At the time of the commencement of this Act, the training of Child Welfare Officers within the Department "stressed the importance of allowing a birth parent to reach the decision appropriate for her and her child in the particular circumstances".[61]

Although counselling during pregnancy was offered, not all women considering adoption were in contact with the Department during this time. "Where a mother had decided to offer her child for adoption and had informed hospital staff of this intention, the Matron would notify the Department after the birth. Mothers who planned adoption but changed their minds after the birth, or signed consents but revoked, were offered assistance from the Department. During the nineteen-seventies this included financial assistance until they became eligible for Supporting Mother's Benefit".[62]

The Department believes that the fall in the number of children relinquished for adoption indicates the impact of the introduction of the Commonwealth Supporting Mother's Benefit in July 1973, as well as the availability of contraception and a greater acceptance of unmarried parents.

Evidence presented by the Department suggests that "almost all birth mothers with whom the Adoption Information Service has had contact are fully aware of how limited their options were and that there were no easy or pain-free choices. These women have undergone much pain and distress, often concealed because of the shame and intense social disapproval associated with extra-marital pregnancy. For some the child's birth has never been spoken of even within the mother's immediate family".[63]

The Department advised that counselling services are provided to people seeking information about a past adoption.

[61] Department of Health and Human Services, op. cit., p. 9.
[62] Ibid., pp. 9-10.
[63] Ibid., p. 11.

Chapter 11 - Current Adoption Practices in Tasmania

1. Social Condition 1960s-1980s

Increasingly relaxed sexual mores had contributed to the numbers of babies available for adoption during the 1960s. Similar liberalising forces that were contributing to the so-called sexual revolution of the time were also contributing to a growing minority-rights culture. The increasingly liberal social and economic climate in Australia from the early 1970s onwards not only made it easier for more women to retain babies born outside marriage. By the end of the 1980s all parties to an adoption were increasingly perceived as having ongoing interests and entitlements in the adoption process.

It is in not surprising that, in this environment, the spirit of the new adoption legislation of 1988 was one of increased openness and accessibility – open adoption compared with the closed-book approach of the 1968 Act - particularly in terms of consent to an adoption and disclosure of information. Later amendments reflected the increasing interest in overseas adoptions as fewer Australian-born children became available for adoption.

2. Decreasing Adoption Numbers 1920-1999

It was recently estimated that the number of adoption orders made in this State in relation to Australian-born children between 1920 and 1998 was 11,338. Of these about 11 074 were made before 1 July 1989. Between 1 July 1988 and 30 June 1999 145 Australian-born children had been placed for adoption in Tasmania, an average of 11 a year [64].

The table below indicates the number of adoptions in Tasmania from 1969-70 to 1997-98.

Year	Number of Adoptions
1969-70	243
1970-71	289
1971-72	303
1972-73	268
1973-74	268
1974-75	243
1975-76	211
1976-77	185
1977-78	164
1978-79	173
1979-80	148

[64] Department of Health and Human Services, Child, Youth and Family Support Division - Submission to the Joint Select Committee into Adoption and Related Practices, 1950-1988, June 1999, p. 3.

Year	Number of Adoptions
1980-81	140
1981-82	119
1982-83	117
1983-84	87
1984-85	97
1985-86	n.a.
1986-87	n.a.
1987-88	120
1988-89	85
1989-90	71
1990-91	61
1991-92	58
1992-93	23
1993-94	37
1994-95	12
1995-96	17
1996-97	30
1997-98	19

As the number of local children available for adoption has continued to decrease, so the number of overseas adoptions has increased, with 147 intercountry adoptions taking place in Tasmania between 1 July 1998 and June 1999. Overseas adoptions have exceeded local adoptions since 1995[65].

3. Significance of the Adoption Act 1988

In 1985 the Minister for Community Welfare and the Elderly appointed an inter-departmental committee to review Tasmania's adoption legislation. Many of the recommendations contained in that committee's 1986 report were adopted in the subsequent legislation.

Part VI of the Adoption Act 1988 commenced on 1 July 1988 and contained perhaps the most significant provisions in the legislation. In making access to information about past adoptions available, the need and entitlement of adopted people to knowledge about their origins and identity were recognised as were the needs and entitlements of birth parents in relation to information about their relinquished children. It was now possible for adult adoptees born or adopted in Tasmania, their natural parents and relatives and for adoptive parents to access information from the adoption record. Help and counselling were made available for those who wished to communicate with relatives from whom they had been separated by adoption.

The Adoption Information Service was established under the Act to deal with adoption information. Since that time the service has received about 2 500 requests for information. About 70 per cent have been from adult adoptees

[65] Department of Health and Human Services, op. cit.

and 20 per cent from birth mothers, with adoptive parents and natural relatives making up the remainder[66].

The rest of the Act commenced in May 1992 when the Adoption Regulations were also proclaimed.

The current legislation sets out very clearly the required adoption procedures in Tasmania, whether in relation to the Department of Health and Community Services or any other adoption agency. Under section 8 the 'welfare and interests of the child or adopted person shall be regarded as the paramount consideration at all times'. Adoption is regarded as primarily a service for children, not to meet the needs of adults. If those needs can also be met, that is an advantage, but never a driving consideration at any stage of the adoption process.

The steps in the current adoption process are set out in Appendix "A".

[66] Department of Health and Human Services, op.cit., p. 11.

Steps in the Adoption Process APPENDIX "A"

1. Initial inquiry and procedures

The Department of Health and Community Services and the Catholic Private Adoption Agency (CPAA) associated with Centacare Family Services are the two agencies able to arrange adoptions of Australian-born children in Tasmania. The department also assists people with overseas adoptions and, where appropriate, may assist people who wish to adopt relatives or step-children.

The 1988 Act makes provision for approved adoption agencies under Part II, Division 1 (ss. 9-17).

Contact with an adoption agency is often made by a distressed parent in difficult circumstances. An initial inquiry may occur at any time before or after the child's birth. A parent may apply directly to the department or Centacare, or through a third person, often the hospital where the birth takes place.

Inquiries about adoption are handled by an approved adoption counsellor/worker from the adoption agency. In the case of a child born in hospital the counsellor visits the mother before she is discharged, a custody authorisation is obtained from her and a time for initial counselling is arranged if this has not already occurred. Although initial counselling sometimes takes place after the birth of the child, this is not preferred agency practice. Where no contact has been possible before the birth at least two interviews must be conducted before consents are signed.

When the birth parents have decided upon adoption, the adoption worker takes details of the child and the social background for the purpose of completing the required form and arranges for the child's medical examination. The report is sent to the Adoptions Unit in the case of the Department of Health and Community Welfare.

While both the birth mother and child remain in the hospital the mother has the right to name, see and nurse the child and care for the child herself if she wishes.

The child generally remains in the hospital until the mother is discharged and short-term foster care is arranged by the adoption worker. The worker liaises with the hospital and foster carer and eventually transfers the child to the foster family. The child will usually remain in foster care until the mandatory thirty-day period for revocation of consent to adoption expires, after which the child goes into the care of the adoptive parents. During this time the birth parents may arrange for regular visits with the child through the adoption worker. Absolute confidentiality as to the identity and circumstances of the birth parents is applied and, should the carer be aware of these, the responsibility not to disclose such knowledge is stressed. Generally these details are not available to carers.

The adoption worker maintains contact with the birth parents and later liaises with the worker dealing with the adoptive parents.

2. Consideration of alternatives to adoption

Initial counselling, provided by the approved adoption worker, is offered to parents who feel they may not be able to keep their child, not only in relation to adoption but also other options that may be available to them. It is preferable to begin counselling before the child is born. Its purpose is to assist parents to make a fully informed decision about their child's future care and, ideally, both the mother and father should be involved.

Alternative care arrangements might include:

- the parent bringing up the child herself with support available in the community – supporting parents benefit, child-care services, housing assistance, parenting and self-help support, assistance from grandparents and so on;

- temporary care until the parent's circumstances have stabilised and supports are in place such that she can bring up the child herself. This type of care is generally provided by a foster family but may be undertaken in an approved children's home or family group home, particularly where other siblings are involved. This type of care is usually limited to a few weeks and the parent remains the guardian of the child; and

- permanent care by someone else by means of a custody or guardianship order made by a court, whereby only some of her legal rights as a parent are transferred. Guardianship provides for the long-term welfare of the child and includes decisions about such matters as education and religious upbringing and custody concerns the day-to-day care of the child. Such court orders set out the respective rights and duties of the parents and care givers and, except in exceptional circumstances, require the consent of the parents.

Where the Family Court makes a guardianship and custody order, the parents continue in their legal parental relationship with the child and may have access to the child. A guardianship and custody order does not alter the child's birth certificate or inheritance rights, although the name may be changed. Some ongoing financial responsibility on the part of the parent may also be involved.

Where the parent remains the child's guardian and the caregiver has custody, the birth parent retains legal parental status and is responsible for decisions about the child's long-term welfare. The caregiver is responsible for day-to-day decisions about the care of the child. Access may be given to birth parents and they may retain some financial responsibility for the child.

Where a child is already a ward of State, the Director for Community Welfare has the guardianship of the child who may therefore already be in some type of care.

3. Consent to Adoption *(ss. 29-38, regs 22-26)*

(i) Valid consent, freely given

Relinquishing parents, including the birth father where possible, are required to provide a general consent to adoption. This means that they must consent to adoption by any person approved and selected by the principal officer of the adoption agency. Except in the case of relatives or step-parents it is not possible to consent to adoption by a particular person.

Consent to adoption must be freely and validly given. A consent cannot be signed before the birth of the child or until nine days afterwards. After signing a consent the birth parent(s) have thirty days in which to change their mind about proceeding with the adoption. This is known as the revocation period. Birth parents often need a period of support and counselling after the end of the revocation period. The counsellor also maintains contact where birth parents have asked for notification of the child's placement with the adoptive parents, the making of the adoption order or the death of the child before the order is made.

Where an adoption consent is signed outside Tasmania, counselling and the provision of information are not mandatory. Adoption agencies, however, are advised to ensure that the rights of birth parents are protected and that they are provided with the same opportunity to make an informed decision as they would if signing a consent form in Tasmania.

A consent to adoption signed according to the law of another Australian jurisdiction is valid for the purpose of adoption in Tasmania.

(ii) Required information

The adoption counsellor must provide written information on the alternatives to and procedures involved in relinquishing the child for adoption to all parents – mothers and, where possible, fathers - at least 24 hours before the consent is signed. Much of this information is, in the case of the department, in the form of a booklet[67].

The worker must do more than simply provide the relevant information. The worker must ensure that the relinquishing parent understands the information provided, adoption procedures and the effect of an adoption order as well as his or her rights in relation to the child and information about the child up to and after consent is given. In addition parents must be informed about the Adoption Information Service and Registers established under the Act for

[67] Community and Health Services, Information about Adoption for Parents Considering Consenting to Adoption, Tasmania, October 1996.

information and contact between adoptees and other parties to adoption. Consents taken in the absence of the prescribed counselling and information are not valid.

Counselling also includes discussion about arrangements for exchange of information with the adoptive parents in relation to identity and the child's progress and development. This may result in the formulation of a written adoption plan which can be submitted to the court making the adoption order. Although such a plan does not amount to a legally enforceable contract, it is useful as a record of any agreement reached and copies are generally provided to the birth and adoptive parents and a copy kept on the agency's file for reference in case of later disputes. Where appropriate, identities may be exchanged and direct contact initiated between the birth and adoptive parents, but the exchange of non-identifying information with the agency acting as the intermediary is more common.

When witnessing the birth parent's signature on the consent form the adoption counsellor notes the date(s) on which counselling was provided.

(iii) Required documents

In the case of the department, the signed consent form and other required documents are sent as soon as possible after the signing of consent to the Senior Program Officer at the Adoptions Unit, together with a covering memo. The required forms are:

- mother's consent;
- father's consent when required;
- mother's statement as to the child's paternity;
- child custody authorisation. This must be provided while the relinquishing parent still retains guardianship of the child – that is, before all the necessary consents are received – so that the agency can arrange for temporary care until the end of the period available for revocation of consent. Thereafter this authorisation ceases to have effect and guardianship is transferred to the Director[68]. A child custody authorisation may be renewed at six-month intervals up to a total period of twelve months;
- child's particulars. This form must contain the child's details, those of the birth parents and the reasons for adoption. Further information may be attached or provided by way of memorandum. The information provided here forms the basis of what is provided to prospective adoptive parents

[68] Where a child is severely mentally or physically disabled it is not always possible to find suitable adoptive parents for a child. Where this occurs the Director may not accept guardianship and alternatives to adoption may need to be discussed with the birth parents, including temporary care or wardship under the *Child Welfare Act 1960*.

and to the adoptee if, in the future, the adoptee applies for information under Part VI of the Act; and

- any other relevant documents, including a covering memorandum where required.

A medical examination, arranged by the adoption worker, is conducted by a medical practitioner after the child is three days old and preferably before the child leaves hospital. Part A of the relevant report form is completed before the child is six months old and Part B when the child is more than six months old. The medical report is provided to adoptive parents to assist them to make an informed choice about the adoption and to make available a record equivalent to that available to natural parents. Adoption arrangements cannot be made without a medical examination of the child.

(iv) Required consents

The consent of the birth mother to adoption is always required. The consent of the father is required if the birth parents were married to one another when the child was conceived or between the time of conception and birth.

If the birth parents were not married to one another the consent of the father is required if he has established legal paternity by one or more of the following means:

- by entering his name on the child's birth certificate at any time up to thirty days after the mother signs her consent to the adoption;

- by filing a declaration or an acknowledgment of paternity under the *Status of Children Act 1974* with the Registrar-General within that thirty-day period;

- by filing a copy of an order under section 26 or 27 of the *Maintenance Act 1967* with the Registrar-General within that thirty-day period;

- by lodging with the Director for Community Welfare or principal officer of the agency arranging the adoption, before the end of that thirty-day period, evidence that an order has been made outside Tasmania that he is the father of the child; that he is or has at any time been liable for the child's maintenance under an order of the Family Court of Australia; or that he has at any time been granted access to, custody of or guardianship of the child by the Family Court of Australia.

If a child has been adopted previously the consent of the adoptive parents is required. Parental consent to adoption is not required where the adoptee is eighteen years old or more. The consent of an adoptee under eighteen years old is not required for adoption to proceed, though the child's wishes will be taken into account by the court making the adoption order. The paramount considerations are the interests and the welfare of the child.

Because the birth father's consent to adoption is now required wherever possible, birth mothers of children born outside marriage considering adoption are asked to complete and sign a form disclosing the identity of the child's father and stating whether he has declared or acknowledged paternity. The father's identity is not subject to disclosure except to the adult adoptee if that person subsequently applies for information through the Adoption Information Service and Registers.

Where the mother refuses to disclose the father's identity, she is asked to state her reasons on a 'Statement as to Paternity' form, advised of the father's rights under the Act and the future importance of such information if the child wants to establish his parentage under Part VI of the Act relating to access to information. Sensitive counselling in this area may be necessary, particularly where the woman's relationship with the child's father has been characterised by violence or other extreme difficulty.

Paternity statements are taken before consent is signed. Unless the father's identity is known it is not possible to ascertain whether or not his consent to the adoption is required. The Director for Community Welfare cannot undertake guardianship of the child or proceed with adoption arrangements unless the required consents have been provided or dispensed with. The court making an adoption order will also need to be satisfied that consent requirements have been met.

While the Adoptions Unit will check with the Registrar of Births whether a man has taken steps to acknowledge or declare paternity, the department is not required to try to contact the birth father if he has taken no such steps.

Where the father signs a general consent, the Director can undertake guardianship of the child immediately after receiving the consent of both parents. Where paternity is known but the father does none of the things detailed above to establish paternity, the Director may do so after the end of the thirty-day revocation period.

In cases where the father's consent is not legally required but he wishes to consent, he may take one of the above steps, most simply to have his name included on the birth certificate.

Where the father refuses his consent and proposes to care for the child himself, the mother must be informed by the adoption counsellor that the adoption cannot proceed. Where the father refuses his consent to adoption but is not willing to care for the child himself, there may be grounds for dispensing with his consent and proceeding with the adoption. The adoption counsellor prepares a report and recommendations and, on the approval of the Director, the application for dispensation and supporting report are treated as a matter of priority for submission to the court.

(v) Expressing wishes at the time of consent

(a) Religion, race, or ethnic background of adoptive parents

Relinquishing parents have the right to make known their wishes about the religion, race and ethnic background of prospective adoptive parents and are entitled to be involved in selecting adoptive parents from non-identifying profiles of available adoptive parents. A relinquishing parent may not wish to exercise this right but must be made aware of them by the adoption counsellor.

The adoption agencies give considerable weight to the wishes of the birth parents in regard to adoptive parents but the final decision as to placement lies with the Director or principal officer. It may simply not be possible to meet every aspect of the birth parent's wishes but profiles of potential adoptive parents provided by the agency will include the widest available choice in the preferred range. Prospective adoptive parents may, in any case, not accept the offer of a child, though this is rare.

(b) Information exchange and contact

At the time of signing consent birth parents are also given the opportunity to record whether they wish to have contact with the child after the adoption and whether and how often they wish to receive information about the child. It is here that the basis for an adoption plan mentioned above can be laid.

It is possible for birth parents to meet the selected adoptive parents prior to placement (this usually takes place after the expiration of the revocation period), subject to the agreement of all parties.

(c) Notification about certain events

Birth parents may also nominate whether they wish to be notified of the following:

- the end of the thirty-day period for revocation of consent;
- the child's placement with prospective adoptive parents;
- the making of an adoption order by the court;
- if the adoption placement is disrupted before the adoption order is made; and
- if the child dies before an adoption order is made.

Notification of the last two events is in writing, provided the relinquishing parent keeps the agency informed of a contact address. Where the child dies after the adoption order is made, it becomes difficult for the agency to assume any responsibility for notifying the birth parent unless it is itself first notified of that death. The death of an adoptee could occur years after the adoption or outside Tasmania.

(vi) Withdrawal of consent

Birth parents are given thirty days in which to change their minds about consenting to the adoption of their child. If consent is withdrawn birth parents resume guardianship and full parental responsibility for the child.

Consent must be withdrawn in writing, whether by way of the prescribed form that should be provided with the copy of the consent form or letter, and reach the Director (and the principal officer of the CPAA if Centacare is dealing with the adoption) before the end of the revocation period.

(vii) Witnessing consents

Two witnesses are required to the signing of a consent form. The first is the adoption counsellor who has provided the mandatory counselling and information. The second may be another approved counsellor or a departmental officer so authorised.

Witnesses must be satisfied that the person signing the consent understands:

- the nature and consequences of an adoption order;
- the effect of signing the consent; and
- is aware that consent may be revoked within thirty days of signing but cannot thereafter be withdrawn.

The relinquishing parent is provided with a copy of the consent form and a form for revocation. The date at which consent becomes irrevocable is included on the copy of the consent form. The adoption counsellor certifies that a copy of the consent form has been provided and makes sure the person understands what needs to be done if consent is to be withdrawn.

(viii) Dispensation with consent

A court may dispense with consent to adoption where the required consent cannot be provided:

- where a person whose consent is required cannot be located;
- where the person is incapable of giving consent;
- where the person is incapable of meeting the child's needs;
- where the person has deserted, abandoned, persistently neglected or ill treated the child; and
- where the child is unlikely to accept or be accepted into a family relationship with a person.

The adoption worker prepares a report containing the relevant details and recommendations. If approved by the Director an application to dispense with consent, accompanied by a report setting out the circumstances and grounds may be made to the court.

Effect of adoption order

Where adoption is considered the best option and the requisite parental consent has been given, the child is placed with the adoptive parents – usually not until after the end of the revocation period – and the adoption agency supervises the placement. It assists the relinquishing and adoptive parents to finalise any agreements as to contact and information exchange. After about six months, all being well, an application is made to the court for an adoption order, which is usually granted.

An adoption order is made in the Magistrates Court. The adoptive parents thereby acquire legal parental status and the natural parents no longer have any parental rights or responsibilities in relation to the child.

An adoption order is permanent and affects:

- the legal relationship between the birth parents and the child. The birth parents cease to be the legal parents of the child. Any arrangements agreed between them and the adoptive parents as to contact with the child or information about the child are not legally enforceable under the Act;

- the child's name. The court approves the names of the child contained in the application for adoption. These usually include the surname of the parents applying for the order and Christian names they have chosen which may not necessarily be names by which the child has been known. The wishes of an older child in this regard will be taken into account;

- the child's birth certificate. After adoption a new birth certificate is provided showing the child's new name. It includes the names of the adoptive parents but not the names of natural parents or any reference to adoption; and

- the child's inheritance rights. After adoption, the child becomes entitled to inherit from the adoptive parents as if the child was their natural child. The child may inherit from the birth parents only if specifically mentioned in their will or that of a relative. If an adoptee is a beneficiary under the will of a dead natural parent and the adoptee's name is not known, inquiries will be made of the relevant adoption agency to ascertain the name.

At any time before an adoption order is made, a birth parent can apply for a certified copy or extract of the child's birth certificate. An extract gives only the name, date and place of birth of the child. A certified copy provides additional details of the child's sex, birth parents, any siblings and the hospital.

Adoptive Parents

Increasingly open adoption practices mean that a great deal is expected of adoptive parents in terms of maintaining contact with and exchanging information with birth parents and natural relatives of their adopted child. Not only are the prescribed eligibility and suitability criteria stringent in the first instance, adoptive parents must be prepared to accept what could amount to considerable ongoing demands throughout their lives in terms of dealing more directly with possibly both parents and their families and other natural relatives. The situation may be further complicated with changes of partner by the birth parents.

The increased challenges for adoptive parents are probably reflected in the declining numbers of prospective adoptive parents.

1. Assessment of suitability

In Tasmania people who wish to adopt a child may record a written and signed expression of interest on a provisional register kept by the Department of Health and Community Welfare. Applicants are then required to attend an information seminar held in Launceston or Hobart. Those who confirm their interest must then provide medical reports and police record checks to establish their eligibility for assessment.

Eligible applicants sign a statement of understanding as to awareness of the conditions that apply to the application and pay the relevant registration and assessment fees. An authorised adoption worker then assesses their suitability to adopt. This normally occurs within twelve months of the registration of the application.

Applicants for an overseas adoption must attend a workshop presented by Tasmanian intercountry support groups in Launceston.

Prospective adoptive parents must be assessed and approved as suitable by the Director for Community Welfare or the principal officer of an approved adoption agency. Prospective adoptive parents must meet certain criteria before their application may be entered in the register for assessment.

- If a couple is applying jointly, they must be legally married to one another and have lived together for at least three years. This period may include living together in a stable de facto relationship just prior to their marriage.

- Applicants must have been resident or domiciled in Australia for not less than two years, currently resident in Tasmania and enrolled, or have applied for enrolment, on the State Electoral Roll.

- At least one applicant must be an Australian citizen, or a Tasmanian adoption will meet all the legal requirements of the country of citizenship and that country will confer full citizenship rights on an adopted child.

- Applicants must be in good mental and physical health and likely to remain so during the child's period of dependency.

- Applicants must not have been sentenced to imprisonment for a criminal offence within five years preceding the application and have never been sentenced to imprisonment for five years or more.

- Applicants must have no convictions for any offence against a child.

- Applicants must not be undertaking infertility treatments.

- Female applicants must not be pregnant.

Prescribed requirements at the time of placement

Prospective adoptive parents must be assessed as most able to meet the needs of a particular child and, where these are known, the wishes of the birth parents. The following criteria also apply at the time of placement:

- applicants are accepted as eligible, have been assessed and approved and continue to meet the eligibility criteria noted above;

- approval has been granted or confirmed within the two years preceding approval for placement of a child;

- a female applicant is not pregnant;

- where the applicants have no other children in their care, there is no more than 40 years' age difference between the adoptee and an applicant;

- where the applicants have another child in their care, there is no more than 45 years age difference between the child to be adopted and an applicant.

3. Application by single people

Where the court is satisfied that 'exceptional circumstances exist in relation to the welfare and interest of the child which make it desirable to do so, the court may make an adoption order in favour of one person'.[69]

Generally single people may adopt only:

- where there is a pre-existing parent-child relationship, as in the case of long-term care by a single foster parent;

- where the needs of the individual child are best met by placement with a single person rather than a couple;

[69] Adoption Act 1988, section 20(4).

- where no suitable couple is available.

4. Adoptions by step-parents and relatives

(i) Effect on the interests of the child

Where a child is born outside marriage and the father has never been identified, step-parents and natural relatives may be eligible to adopt. Such adoptions are handled only by the Department of Health and Human Services.

The purpose of legal adoption is to provide a family for children who are without a family or who cannot be cared for within their natural family. It is no longer considered desirable to create a different legal relationship between members of a family who are already in kinship relationships.

(ii) Alternatives to adoption

Step-parents or relatives may wish to clarify their rights and responsibilities to a child of their spouse and ensure that they receive equal treatment with other children may find their wishes served just as well by means other than adoption. There is no legal difficulty associated with an informal change of the child's surname from that which is on the birth certificate. Such a change will not alter the birth record. When the child is fifteen years old s/he may apply to the Registrar-General for his/her name currently in use to be entered on the birth record. This does not alter the child's legal status or provide an entirely new birth record, but it does formalise the new name.

Inheritance concerns may perhaps be addressed simply by making specific provision for the child in the will of a step-parent or relative.

A step-parent may also apply to the Family Court for residence and parenting orders jointly with his or her spouse. Such orders do not affect the child's birth record but recognise and clarify the rights and responsibilities of a step-parent.

Guardianship and custody orders confer authority to make decisions about both the long-term and day-to-day aspects of a child's well being and welfare.

(iii) Where paternity is established

It is widely recognised that a child is entitled to have a legal relationship with both his natural parents, whether or not they remain as a couple or acquire new partners. Allied to this is the child's right of access to a parent and other natural relatives, preservation of automatic inheritance rights and the right to retain his/her name and identity. Adoption by a step-parent frequently removes important relationships between children and other relatives. A child of a former marriage or de facto relationship often has a known family status and well-established relationships with grandparents, aunts, uncles and other siblings. Disruption to these can result in long-term disadvantages for the adopted child.

To make an adoption order in favour of a step-parent where paternity is established, the court needs to be satisfied that:

- the adoption will promote the welfare and interests of the child;

- the consent of the non-custodial natural father has been provided;

- leave to proceed with adoption has been granted by the Commonwealth Family Court. This does not imply that a Tasmanian court will make an adoption order.

- The parent and his or her spouse have applied to the Family Court for orders in relation to the child such as parenting and residence orders and can show that these are insufficient to meet the needs of the child; and

- special circumstances relating to the welfare and interests of the child justify the making of an adoption order.

Similar considerations apply in the case of natural relatives wishing to adopt.

(iv) Where paternity is not known or established

Where a child is born outside marriage and the natural father is not identified or has not taken steps to establish paternity, application for adoption by a step-parent may be made, provided it can be shown that this will promote the welfare and interests of the child. If the natural father does move to establish paternity within thirty days of the mother signing a consent to adoption by the step-father, adoption is only possible under the conditions listed above.

Adoption Information Service and Register

Part VI of the Adoption Act 1988 deals with access to adoption information by adoptees, birth parents, natural relatives and adoptive parents. The Act establishes an Information Adoption Service and Adoption Information Registers in the Department of Health and Community Welfare and the Catholic Private Adoption Agency.

These provisions were enacted in response to increasing understanding of the nature of the adoption process and its effects on parties to adoption. They recognise the needs and entitlements of the adoption parties to resolve painful issues related to identity and loss.

Registers must include the names and addresses of the parties to adoption and those of natural relatives who have applied in writing to the Director or principal officer of the private agency to be included. Their wishes in relation to the release of information or contact may be entered in the Register at any time. Contact vetoes in relation a particular person or persons must also be included. The principal officer of the private adoption agency must ensure

that copies of entries into the Register of that agency are forwarded to the department.

Information in a Register must not be disclosed to anyone not authorised to access it under the Act.

The Adoption Information Service provides counselling and information to the parties to an adoption and natural relatives. Before information can be provided to an applicant, they must attend an interview with an approved counsellor.

Adult adoptees can obtain a copy of their original birth certificate. Those under eighteen years of age need their adoptive parents' consent and the agreement of their birth parents as well.

Natural parents can obtain non-identifying information about the adopted child, but only if the adoptee agrees. If the child is under eighteen, the agreement of adoptive parents is required and the child's own wishes must be considered.

Adoptive parents can obtain information about the adopted person's background but the consent of the birth parents is required before identifying information can be disclosed.

Natural relatives may obtain non-identifying information but the release of identifying information is at the discretion of the Director or the principal officer and if the adult adoptee agrees. In the case of an adoptee who is under eighteen years of age, the adoptive parents' consent is required and the adoptee's wishes must be considered.

Intercountry Adoptions

1. Overview

Arrangements for intercountry adoptions are governed by the Adoption Act 1988 and national and international agreements including:

- the United Nations Convention on the Rights of the Child;
- the Hague Convention on the Protection of Children and Cooperation in Respect of Intercountry Adoption;
- the National Principles in Adoption endorsed by the Australian State and Territory Community Services Ministers.

Responsibility for intercountry adoptions lies with the Department of Health and Human Services. Private arrangements for the adoption of children from overseas are illegal. Before applying to an overseas jurisdiction to adopt a child, applicants must be assessed as eligible and suitable by the department. They must also meet the criteria of the adoption authorities overseas and be

accepted on to its waiting list. Approval in Tasmania does not guarantee approval in another country.

As at June 1998, the department was offering programs with Ethiopia, Fiji, Hong Kong, India, the Philippines, Romania, Sri Lanka and Thailand[70].

The department deals only with overseas governments or adoption agencies which meet the standards laid down particularly in the Hague Convention and where it has established agreements or working relationships. The Hague Convention requires local and intercountry adoptions to be governed by the same standards and principles. Children coming into Tasmania and relinquishing overseas parents are entitled to have their rights and interests protected just as they would be in the case of a local adoption.

Overseas countries making children available for adoption require detailed reports on a child's progress, sometimes into adulthood. Arrangements for overseas adult adoptees to obtain information about his natural origins and home country are proceeding.

2. Steps in intercountry adoption taken in Tasmania

- Initial inquiry and acceptance onto the register on the basis of eligibility.

- Assessment of suitability on the basis of criteria similar to those applying to people seeking to adopt locally. This phase includes interviews, self-assessment profiles by the prospective applicants and preparation for adoptive parenthood through dealing with issues raised by the child's adoptive status and attendance at a workshop for intercountry adoption. Assessment usually takes six months.

- Report and recommendations on suitability. This is used as the basis of the home study report sent to the overseas adoption authority or agency. It is also the basis of the report submitted to the court when applying for an adoption order.

  The assessment report contains: information obtained from three referees; details of the prospective adoptive family's background and circumstances; health and medical history; accounts of personality, appearance and way of life; details of the family's financial situation; religious affiliation; information on personal relationships; the motive for adoption; information on the ability to have biological children; description of parenting experience and expectations; account of attitudes to identity issues of the child; account of attitudes to relinquishing parents; description of parenting resources relating to particular needs; and views on the child desired for adoption.

[70] Adoption and Information Service, Department of Community and Health Services, Guidelines for Applicants, June 1998, p. 4.

Applicants may see and comment on the report.

- Assessment Review Panel

  The Director for Community Welfare may seek advice from the panel. Members have a range of expertise – financial, legal, medical, educational, social work, family support and administration.

  The review panel may seek to meet applicants before making a recommendation.

- Approval and non-approval. Notification is in writing. The Director makes the decision to approve or refuse approval.

  Approval is specific in terms of the number of children, age range and, where applicable, country of origin. It is subject to the continuing satisfactory circumstances of the applicant. Generally the adoptee will be the youngest child by about two years in the new family. Children over nine years of age cannot normally be adopted.

  Approvals remain current for two years, with annual reviews and are not automatically transferable from one country to another.

- Review and appeal on refusal to approve.

  Procedures are available to appeal a non-approval, first by way of internal review and then by the Adoption Review Committee if necessary.

3. Steps in intercountry adoption directed overseas

- The home study report and supporting documents are sent to the nominated country and the file sent by certified mail, courier or sometimes through diplomatic mail.

- Waiting times vary between countries, currently six months in some and up to thirty months in others.

- When a child is offered, prospective parents are normally expected to maintain the child from the time they accept the placement.

- On acceptance of the child, immigration procedures are begun.

- Prospective adoptive parents are expected to travel to collect the child from its home country. A stay of ten days to several weeks is necessary.

- Application for an adoption order is generally made when the child has been in Tasmania for about twelve months. An adoption worker makes several visits during this time.

- Progress reports are provided to the child's country of origin before and, frequently, for some time after the adoption order is made.

- A new birth certificate is available three to four weeks after the adoption order is made.

- A declaratory certificate of citizenship is available from the Department of Immigration and Multicultural Affairs.

- The overseas authority is notified of the adoption.

Catholic Private Adoption Agency

This is the only approved private adoption agency in Tasmania.

It does not operate in relation to intercountry adoptions or adoptions by relatives and step-parents.

It has certain obligations under the Act to report to the Director for Community Welfare.

Sealed court records of all its adoptions are retained by the department, not the CPAA.

It operates under the Act and regulations in the same way as the department does. The legislation is very precise and there is little room for interpretation by either agency.

The CPAA operates on possibly an even more open basis than the department in relation to contact and information exchange and provides ongoing support to birth parents, other natural relatives and adoptive parents. People tend to come back to the agency as their circumstances change. This long-term support role is a key role for the CPAA which aims to tackle the pain and secrecy issues of adoption and attempts to normalise relationships as far as possible.

The CPAA's experience is of fewer available adoptive parents and declining adoptions.

LIST OF WITNESSES ATTACHMENT 1

Antonelli, Mrs C

Australian Association of Social Workers (Tasmanian Branch)

Australian Nursing Federation

Bannerman, Ms T

Brooks, Ms P

Cannell, Mrs J

Centacare Tasmania Family Services

Chandler, Ms D

Cunningham, Ms A

Department of Health and Human Services

Hammond, Mr L

Loose Ends

Mundy, Ms E

Origins Tasmania

Origins Victoria

Potas, Ms W

Price, Ms C

Rivers, Ms H

Stagg, Mrs J

Tegg, Ms J

The Salvation Army

PLUS 19 PRIVATE WITNESSES

ATTACHMENT 2
WRITTEN SUBMISSIONS TAKEN INTO EVIDENCE

Antonelli, Ms C

Australian Association of Social Workers (Tasmanian Branch)

Benevolent Society of New South Wales

Betts, Ms M

Brooks, Ms P

Burke, Ms C

Cannell, Ms J

Centacare Tasmania Family Services

Chandler, Ms D

Daniels, Mr D

Department of Health and Human Services

Hammond, Mr L

Hardy, Ms B

Harris, Ms M

Harris, Ms T

Jones, Ms M

Loose Ends

Mundy, Ms E

Origins Queensland

Origins Tasmania

Origins Victoria

Potas, Ms W

Price, Ms C

Rickarby, Dr GA

Rivers, Ms H

Seymour, Ms D

Stagg, Mrs J

Tegg, Ms J

Tew, Mr M

The Salvation Army

Wellfare, Ms D

PLUS 28 PRIVATE WRITTEN SUBMISSIONS

ATTACHMENT 3
DOCUMENTS TAKEN INTO EVIDENCE

Interim Report on Inquiry into Adoption Practices – Parliament of New South Wales

"Poverty is not a Crime" – Joan C. Brown

Post Traumatic Stress Disorder in Birthmothers – Sue Wells

Background paper for the Minister of Community and Health Services – Ann Cunningham

Department of Social Welfare Manual (part) from 1966

Video – Lateline – from Origins, New South Wales

1976 First Australian Conference on Adoption – Papers – from Origins, New South Wales

The hospital and the unmarried mother regionalisation and rationalisation computer hospital services book reviews – from Origins, New South Wales

Submission by Origins Inc to the Australian Association of Welfare Workers National Conference 1965

Manual of Adoption Practices in New South Wales – from Origins, New South Wales

"Wake up little Suzie" by Dian Wellfare, Origins, New South Wales

"Civil Rights Crimes in Adoption" – presentation by Dian Wellfare, Origins, New South Wales

Submission by Dr. G.A. Rickarby to the New South Wales Parliament Standing Committee on Social Issues – from Origins, New South Wales

Child Welfare in New South Wales – from Origins, New South Wales

Adoption Services in New South Wales – Proceedings of a Seminar, 3 February 1967 – from Origins, New South Wales

The Mourning After – Origins Presentation researched by Wendy Jacobs and Compiled by Lily Arthur 1998 – from Origins, New South Wales

Violations of women's human rights : birth mothers and adoption by Cathleen Sherry – from Origins, New South Wales

Submission to The Tasmanian Adoption Inquiry 1999 –Diethystilboestrol – from Origins, New South Wales

Papers on Adoption – from Origins, New South Wales

Human Rights Commission – Discussion paper No. 5 – Rights of relinquishing mothers to access to information concerning their adopted children - from Origins, New South Wales

Commission of Inquiry into Abuse of Children in Queensland Institutions

Salvation Army Historical Record

Salvation Army Statistics and Correspondence - 1971