

Submission to Senate Community Affairs Committee: Inquiry into Suicide in Australia

Joint Submission by Care Leavers of Australia Network (CLAN) and Alliance of Forgotten Australians (AFA)

Suicide linked to the experience of childhood ‘care’

At least half a million Australian children grew up in the 500 Orphanages or Children’s Homes, detention centres and/or foster care in Australia during the twentieth century. In many instances these were decidedly unhealthy places for children, and many former inmates continue to suffer from debilitating physical and mental health problems stemming from their experiences in ‘care’. The Senate Committee Inquiry, *Forgotten Australians: A Report on Australians who experienced institutional or out-of-home care as children* (August 2004) reported:

...care leavers were not only subjected to emotional, physical and sexual abuse as children within institutions but their basic health needs were neglected. Care leavers suggested that many of their subsequent health problems were directly related to past neglect and/or abuse. The major health problems they report include depression, anxiety, post-traumatic stress disorders, drug and alcohol problems; and poor physical, dental and mental health. (para. 10.110)

The abundant evidence led the Senate Committee to conclude that:

For far too many the emotional problems and depression have resulted in contemplation of or actual suicide. Anecdotal evidence has shown an abnormally large percentage of suicides among care leavers. (p. xvi)

and

A great many reported knowing first hand or having been told of the suicide of friends or of those who had been in the same institution. (para. 6.24)

This anecdotal evidence came not only from personal submissions but also from reputable agencies dealing with people who grew up in ‘care’, such as VANISH and the Forde Foundation, and from other reports such as the Forde Report in Queensland.¹ It is commonplace for CLAN staff to receive calls from family members reporting occurrences of suicide in their family. Evidence from the Mullighan Inquiry in South Australia has again clearly demonstrated the high incidence of suicidal thoughts and actual suicide among people who were as children in the ‘care’ of the state, churches and charities.²

¹ Forde, L. (chair) *Abuse of Children in Queensland Institutions* (Forde Report), May 1999.

² Mullighan, E.P. QC, *Children in State Care Commission of Inquiry: allegations of Sexual abuse and death from criminal conduct*, Adelaide, 2008, chapter 5.

On Saturday after the national apology Leonie goes to the local butcher in the suburbs. I've known Mick (not his real name) for years, she says, and he knows about CLAN. Not a member. Mick tells me he heard this bloke on the radio talk about his father threatening that if he played up he would send him to a boys' Home.

I say, "It's funny how parents said those things without thinking of the effect it would have on kids." I ask him if that was ever said to him. "Yes it was," he replies.

He has watery eyes and I say, "Why do you think your Dad said that to you? Where did your Dad grow up?" Well you know the answer – in a Boys' Home.

Mick tells me he hasn't spoken to his Dad in 18 years. We talk about his Dad being in the Army. Did he have his father's war records? No, and he wasn't interested. Mick says he saw the damage his father did to his mother. Dad was one angry man. Mick's dad is 92 years old. He was in an orphanage in Tassie, after his parents died.

I said to Mick that I was not suggesting that he had to love his father but his father had suffered from his early loss of his parents and from the orphanage experience. Mick acknowledges that what he had endured as a child and a war veteran would have had a huge effect on his Dad. We talk some more.

To cut to the end of the story, his father had married four times and had 16 children. Three of them had committed suicide. When the phone rang, I left him with the CLAN flyer and tears in his eyes. His last words were, "Saved by the phone". Poor bugger, I thought.

In summarising the experience of children who grew up out-of-home 'care' the AFA identified some key issues that impinge on mental health and self-destructive behaviours.³ These include loss of family leading to deep and lasting feelings of separation and abandonment. This loss of family - usually including separation from siblings - caused grief, feelings of isolation, guilt, self-blame and confusion about identity. Many children found their identity was directly challenged and changed. Children's names were often changed to suit the institution, and personal records not maintained – or maintained in haphazard fashion. In many instances children were told untruthfully that their parents were dead or did not care about them. Parents were told that their children had been moved or had misbehaved and could not be visited. Many were separated from siblings and told that they had no siblings. To make matters worse, many children were told they were bad, worthless and in need of reshaping. For many, it was easier to change their behaviour and suppress their own personalities than to risk the punishments that came to 'bad' children.

³ Harrison, Eris, *Forgotten Australians: Supporting survivors of childhood institutional care in Australia*, Alliance for Forgotten Australians, Canberra, 2008.

The sustained brutality and harsh and cruel punishments for very small offences or perceived disobedience affected many of these children forever. Children were locked in a cupboard or a cell in solitary confinement or made to stand for many hours in one position. Bed-wetting was punished with beatings, cold showers and humiliations, e.g. parading naked past others. Some children were subjected to genital shocks with electrical diodes.

Large numbers of these children experienced sexual abuse and assault, most commonly from the 'carers' themselves, but also from visitors to the orphanage and from other children. Such abuse and assault was a profound betrayal of trust from which many survivors have never recovered.

In some institutions, children had drugs tested on them, sometimes for prolonged periods, and the after-effects can include lifelong physical or mental illness.

While AFA correctly concludes that many Forgotten Australians are survivors possessing great strengths, it is also right to conclude that many others retain childhood coping strategies that can make it difficult to deal with them now as mature adults.

The AFA publication⁴ identifies some of the lasting effects of these childhood experiences. Among the most significant are a lack of trust and security. Many Forgotten Australians learned to trust no-one and to live with the stigma of not having a family. In addition, the lack of love and nurturing hindered the development of normal, healthy life skills for many. Many did not learn important social skills such as expressing feelings appropriately, relating to others and developing trusting relationships. The AFA notes that many Forgotten Australians show a history of failed marriages and relationships, including friendships. Many have lived alone all their lives, and some have chosen not to have children. Finally, the lack of loving role models, combined with poor treatment at the hands of 'carers', have left many Forgotten Australians unable to love and care for their children. Abused themselves, many learned no other way of treating their own children, and intergenerational neglect and violence is perpetuated. Many of course do not abuse their children; nevertheless, they may have little capacity or knowledge to be effective parents because they have grown up without parental role models. It is widely agreed that Forgotten Australians experience a significantly high incidence of certain mental health problems including depression, anxiety, post-traumatic stress disorder, dissociation, psychosomatic illness, personality disorders and severe borderline personality disorder.⁵

Whether children who grew up in out-of-home 'care' were abused or not, the very fact of being institutionalised in loveless, impersonal and authoritarian places created an unnatural and heightened dependence and powerlessness which *per se* enforced 'feelings of negative self-worth and archetypal self hatred, which are templates for the emergence of self harmful behaviours'.⁶ After many years of tight rule-governed behaviour, many

⁴ Ibid.

⁵ AFA drew heavily on the work of Mammen, Gita, *After Abuse*, Melbourne ACER Press, 2006.

⁶ Personal communication, Leanda McKinnon, BA MA PhD, 24 November, 2009.

residents of children's homes were cut adrift as teenagers without any preparation for life beyond the institution. The absence of social support once the person left 'care', and the inability to initiate or maintain interpersonal relationships, has in many instances placed them in a much higher at risk category than the population at large.

The core argument of this submission is that the intensely negative experience of many children who grew up in out-of-home 'care' has had profound ongoing social and mental health consequences for many such people in their adult life, particularly their ability to establish meaningful and functional adult relationships. As a result, risk behaviours such as self-harming, substance abuse, seeking risky situations, sexual risk, suicidal thinking and actual suicide are more common among them than in the population at large.

Ted Mullighan Q.C. investigated a number of deaths both within (11 suicides) and after care in South Australia.⁷ Of the 86 children who died outside State care, 22 committed suicide. Three people committed suicide within a year of being released from State care. Mullighan did not try to make a definitive finding about the reason for these suicides, seeking instead to determine whether any criminal conduct occurred while the person was a child in State care and if this was linked to the suicide. Nevertheless, Mullighan clearly demonstrated that, among other things, the way children were treated in 'care' and afterwards was often improper, insensitive and even incompetent. Some of these deaths were avoidable.⁸

The lack of research into the health needs of care leavers in Australia was brought to the attention of the Senate *Forgotten Australians* Inquiry. This lack of research and the known cases of suicide among its members prompted CLAN to conduct a survey among its care leavers members in 2006 and 2007.⁹ Sadly, in the course of completing the survey, CLAN learned of the deaths by suicide of three of its members in 2007. One set his house and himself on fire in Sydney, another hanged himself in the backyard in Goulburn, and the third, aged 74, gassed himself in his car in Melbourne.

The initial 291 survey respondents represented an unusually high 58% return rate. Subsequently, in response to new member interest, CLAN continued to send out the questionnaire, and the figures in the final report represent 382 respondents - the initial sample of 291, plus a further 91 CLAN members who completed the survey in the period ending 2007.

Survey respondents had been in care in all states of Australia. People had been in Children's Homes run by orders of the Catholic Church, the Church of England, other Protestant churches (Methodist, Presbyterian, Baptist, the Salvation Army, etc), by state governments, by charitable organisations such as the Sydney and Melbourne City Missions, Barnardos, the NSW United Protestant Association, the Red Cross, and by non-

⁷ Mullighan, the Hon. E.P., QC, Commissioner, Children in State Care, Commission of Inquiry: Allegations of Sexual Abuse and Death from Criminal Conduct, Report to the South Australian Parliament, 2008.

⁸ *Ibid.*, p. 490.

⁹ Dr Joanna Penglase, *A terrible way to grow up: The experience of institutional care and its outcomes for care leavers in Australia*, CLAN, November 2008.

denominational community groups.

170 of the survey respondents were male and 212 were female. 201 people (53%) had been state wards and 164 (43%) had been 'voluntary' placements through non-government intervention, usually by a parent or other family members. The remainder either did not know what their status in care had been, or left the question blank.

The majority of the respondents to the survey were in care in the decades from the 1930s to the 1960s, and just over 43% were the children of parents (mostly fathers) who had served in the armed forces. These men received little or no support on their return from combat, and some of these children could perhaps now be seen as the unrecognised casualties of war, bearing the brunt of their fathers' inability to return to civilian life and the consequent breakdown of family life and the then seemingly inevitable entry of the children into 'care'.

The findings on suicide indicate that the CLAN sample is significantly different from that of the normal population in several ways. Obviously we can not know precisely how many care leavers have actually committed suicide, although CLAN and AFA members personally know former 'care' leavers who have taken their own lives – even some who were awaiting the outcome of their application for redress for sexual abuse in their childhood. However, indications from these findings, together with the anecdotal evidence given to the *Forgotten Australians* Inquiry, are that this suicide figure must be high. Nearly 65% of CLAN survey respondents (247) said they had had suicidal thoughts at some time in their lives – compared to 14% in the general population. Nearly 37% said they had actually attempted suicide, and over 40% said they know of other care leavers who have attempted or committed suicide.

We are not in a position to claim verified causal correlations, but we were concerned to note a clear correlation between sexual abuse in childhood and mental illness and suicidal behaviour. Of the 170 people in the CLAN survey who reported that they were sexually abused in care:

- 74% (125) reported they suffer depression
- 44% (74) reported suffering from Post Traumatic Stress Disorder (PTSD)
- 16% (27) reported they suffer from depression, BPD and PTSD; *and*
- 52% (88) reported suicide attempt(s).

While these are self-reporting figures and not clinically verified, they give rise to serious concern, especially when set alongside national benchmark data. The National Survey of Mental Health and Wellbeing 2007 found that 6% of the Australian population at large suffer post-traumatic stress disorder compared to the CLAN figure of 44%. The CLAN figure of 74% suffering depression contrasts starkly with just 4% of the population at large suffering depression.¹⁰

¹⁰ Department of Health and Ageing (2007) *National Mental Health Report 2007: Summary of Twelve Years of Reform in Australia's Mental Health Services under the National Mental Health Strategy 1993-2005*. Commonwealth of Australia, Canberra.

According to the 1997 National Survey of Mental Health and Wellbeing (ABS Cat No. 4326.0), only 0.3% of men and 0.5% of women (0.4% of the sample overall) reported that they had made a suicide attempt in the previous 12-month period. Similarly the National Survey authors estimate that 11.9% of men and 16.6% of women in the general population will think about suicide at some time in their lives. This is significantly lower than the rates of suicidal thoughts and attempted suicides reported in the CLAN survey.

So concerned has CLAN become about the number of cases coming to its attention that it has determined to conduct a further survey of members in 2010 with a view to consolidating and updating its data base and seeking to furnish further evidence of the need for intervention to relevant mental health authorities. It is expected that AFA will endorse and support any submission along these lines.

AFA itself recently lost one of its members to suicide, between the announcement of the national apology and its delivery. Our observation has been that any report or announcement about Forgotten Australians, whether it is positive or negative, has the effect of stirring up past memories and creating depression and anxiety. The apology, while very welcome and necessary, has been the cause of far greater contact by Forgotten Australians with support and service delivery organisations and even with AFA.

Forgotten Australians who commented on drafts of this submission told stories of families (their own or others') with a history of care and repeated instances of suicide. As removal of children and separation from family continues in current and future generations, we anticipate that the distress and damage caused will continue to lead to suicide and suicide attempts. More help is needed for these families who find themselves dealing with their own trauma, struggling to deal lovingly with family in an absence of loving role models in their own childhood and constantly being judged and condemned by child protection authorities.

Finally, as recently as this week, the Commonwealth Government acknowledged

...the effects on some adult survivors include life long risk and incidence of mental illnesses such as depression, anxiety, post-traumatic stress disorder, dissociation and personality disorders, being at higher risk of suicide, self-harm and substance abuse and other dangerous behaviours...¹¹

This acknowledgment is part of a rapidly growing awareness that the loss of loving family connections in childhood combined with betrayal of innocent trust added to appalling treatment in out-of-home 'care' is a potent recipe for lifelong psychological fragility and vulnerability.

¹¹ Australian Government Response to the Senate Community Affairs References Committee Report *Lost Innocents and Forgotten Australians Revisited Report on the progress with the implementation of the recommendations of the Lost Innocents and Forgotten Australians Reports, June 2009, November 2009, p. 2.*

Conclusion and recommendations

The Mullighan Inquiry in South Australia reported that:

The evidence received from adults about the long-term effects of child sexual abuse in care reinforces Relationships Australia's submission to the Inquiry, which referred to research literature being

... unequivocal in asserting that a significant proportion of people who are subjected to child sexual abuse will, as a result, experience short- or long-term social, emotional and psychological problems of a serious and disruptive nature.

*Those problems included a reduced capacity for trust, intimacy and sexuality; symptoms of post-traumatic stress disorder; high rates of depressive symptoms, anxiety disorders, substance abuse, somatic and eating disorders and self-harm, including suicide; reduced ability to parent and difficulty seeking help.*¹²

The CLAN statistics, the Mullighan findings and other anecdotal evidence clearly point to the importance of providing a range of targeted support services and monitoring the mental health progress of people who were sexually and otherwise abused as children.

Projects under the *National Suicide Prevention Strategy* target 'groups identified as being at greater risk of suicide'. The program cites groups such as Aboriginal and Torres Strait Islander people, men aged between 20 and 54, people with a mental illness and people living in rural and remote areas. The program also targets those bereaved by suicide who are known to be at higher risk of suicide themselves.¹³

*Care leavers are commonly found among many of these high-risk groups but ex-residents of children's institutions are not a specific target group under the Prevention Strategy – when the evidence strongly suggests they should be a specific target group.*¹⁴

We note with interest the Prime Minister's announcement that Forgotten Australians will be treated as a discrete identified group for the purposes of elderly people's accommodation services.¹⁵ We strongly recommend that the same principle be extended to mental health services and related areas.

¹² Mullighan, op. cit., p.xxi.

¹³ <http://www.health.gov.au/internet/mentalhealth/publishing.nsf/Content/national-suicide-prevention-strategy-1> (accessed 1 October 2009)

¹⁴ *Forgotten Australians Report*, para. 10.122.

¹⁵ The Hon. Kevin Rudd, P.M., Address on a National Apology for Forgotten Australians and Former Child Migrants, Parliament of Australia, Canberra, 16 November, 2009.

There are very sound reasons to reinforce the need for the immediate implementation of Recommendation 25 of the *Forgotten Australians* Report:

That the Commonwealth and State Governments in providing funding for health care and in the development of health prevention programs, especially mental health, depression, suicide prevention and drug and alcohol prevention programs, recognise and cater for the health needs and requirements of care leavers. (para. 10.133)

The Senate Committee's review of progress on the *Forgotten Australians* and *Lost Innocents* Reports¹⁶ once again highlighted how slow governments, churches and charities have been in their uptake of the recommendations of those earlier reports. It is abundantly clear that, apart from Recommendation 25 (above), a suite of measures is needed to help these people to strengthen their sense of self-worth and identity and to reconnect with families and communities and to diminish the likelihood of continued self-harming behaviours including suicide.

These measures must include:

- inquiries in those jurisdictions where there has been no opportunity for victims of child abuse and neglect to tell their stories, to have their experiences acknowledged and to identify and deal with those responsible;
- consistent and coherent redress schemes for the wrongs committed against children while in 'care' wherever they were located, with contributions by governments, churches and charities;
- the systematic prosecution of perpetrators of historical and contemporary crimes against children in 'care';
- facilitated access to childhood and family records and help with family reunions; and
- fast-track access to tailor-made and mainstream services, particularly in the health area.

Without these measures, we can expect suicides among Forgotten Australians to persist at a higher rate than in the general community.

¹⁶ *Lost Innocents and Forgotten Australians Revisited: progress on the implementation of the recommendations of the Lost Innocents and Forgotten Australians Reports*, June, 2009.