

Inquiry into past forced adoptive policies and practices - Response to Questions

You mention in your submission the problems faced by clients in obtaining birth, adoption, and medical records. How do you offer assistance in this?

We assist FASS clients who want to know more about their parents, their family, their birth, who they are and where they come from. Clients come to our service with a varying understanding of their own history, some have no information or may not be completely sure and want to confirm they are actually adopted.

FASS provides information about services, facilitates referrals where appropriate, provides information about record searching including what to expect, timeframes and information about how certain records may be written, stored, and accessed. FASS can also assist with applications for adoption records, including providing the adoption form and explaining the process. Ideally, an option for Birth certificate and birth delivery records would be added to the State Government's Department of Communities Records Request Form.

What is your experience of the services provided in obtaining records from different organisations?

Support during a record searching process can be a very important part of a client's journey. People affected can independently apply and seek to access records. For instance, a mother can access her own medical records through freedom of information or direct release, whilst an adoptee has to wait until they have the Letter from Post Adoptions to access their birth certificate and then they can apply for their medical records. Knowing what to ask for can affect what documents you receive. Having access to knowledge and support during an often-challenging time in accessing records is an important aspect of FASS in WA.

FASS has assisted clients to access medical records due to challenges they may have experienced outside of the service. Many of the private hospitals are no longer in existence and we can locate where these medical records may be held - in a private archive/organisation, existing state run hospital records held by the Department of Health or, in some cases, a private organisation's hospital admission records now held by the Department of Communities. Considerable time may be spent locating where these records are kept and who to apply to for the records, if sought out independently. Our experience has allowed us to support the process of identifying where and how to access records of this nature.

We currently assist FASS clients who also became wards of state to access their ward records. This process has to be completed separately to adoption records. Being placed in out of home care/children's home/becoming a ward of state as a result of the adoption, adds another layer of trauma and possibly sense of abandonment for many people.

Other records we assist people with include, records of family members from Overseas eg: England, Ireland, Scotland, newspaper articles, court records, military service, death/funeral notices, burial sites etc, as this assists the client to develop an understanding of who they are by

learning about relatives they did not have a chance to meet. Depending upon how late in life the client becomes aware that they were adopted, their ability to connect with living relatives may be compromised or not an option available to them.

Managing Expectations when accessing records

We support clients and outline what records may be received after a records search request. Depending on the time frame of the birth/adoption, clients may only receive an entry in a register book or, they may receive general hospital records.

In some cases, records could constitute a microfiche copy, a transcription or digital copy of records. People are often emotionally impacted by the length of time it takes to receive documents.

FASS checks in with people and offers support whilst they are waiting for records. If another life event occurs during this wait time, such as the death of a relative, it can be particularly difficult to process.

Experienced Records Officer

At FASS an experienced records officer Genealogist, liaises with many organisations requesting the medical records on behalf of clients. The emotional impact is not present to the organisation when we send a written request through on their behalf. Organisation records staff however, are often more obliging, more helpful, or provide additional information upon them understanding the experiences/impact of forced adoption, and/or them knowing a little about the person seeking the records.

FASS often requests further information, or information in another format (ie copies/extracts) if we believe there is more information to be provided. Some records staff are extremely busy (hence the long wait times) and they may prefer to provide written detail rather than spending time redacting a lengthy document.

It is the benefit of our experience that we know what is possible to ask for, or where to apply for certain records.

[In your submission, you list some measures that could be taken to improve access to records. Could you take us through those please?](#)

Clients should be able to have access to their full records not just a summary. For example, in other jurisdictions, clients can get copies of the original forms that were completed by their parents at the time of adoption.

- We have assisted clients from other states, and they have received copies of documents that were signed and completed at the time of the baby being admitted to the Baby home. It was very meaningful that our client could see the signatures of the matron and witnesses and particular additional comments that were handwritten on that day.
- Many people have commented negatively in receiving summaries. Often with high levels of distrust stemming from their experience of forced adoption, it is important to see the actual document for credibility/validity.

Mothers whose children were forcibly adopted, as well as children who were forcibly adopted, should be able to access their full medical records, including records relating to their pregnancy and/or birth.

- Mothers who may have been affected by drugs administered at the time of the birth of their child, want to see the actual medical records.
- Adoptees often want to know all details of the birth including any medical interventions. On occasion when nursery records have been obtained they have been highly valued.

People who were born in Western Australia and then adopted, are required to pay to receive a copy of their original birth certificate. We recommend this fee is waived.

- The birth certificate could arrive with the adoption records as they have already waited a lengthy amount of time and a birth certificate is assumed to be part of the court records.
- Waive the fee for those impacted by Forced Adoption. It seems harsh to have someone impacted by the trauma of adoption to have to pay for something they need.

Supported release of records should be available for people who have been impacted by historical forced adoption practices. This would involve the Department of Communities sending records directly to FASS or another support agency and/or notifying a support agency who act as a nominee, that records are being released (if this is requested and consented to by the client).

- The FASS supported release process involves a trained case worker and/or Records Research Officer providing emotional support and understanding, and interpretation of documents received. This supported process helps the client to understand, ask questions, process feelings and provides an opportunity to discuss what they may wish to do next. Simply having documents arrive in the post without notice or understanding of what is in them can be particularly impacting on the individual; particularly if they are isolated, don't have good natural supports or dealing with other life issues at the time.

The process to apply for records needs to be simplified. This could mean that one agency provides a single form or package of forms, and one central point to apply and access all relevant information (birth certificates, medical records, etc). This would reduce the time and stress experienced by people who are impacted by forced adoption, avoiding having to navigate different forms across multiple departments and systems.

- Some people have come to FASS as they have been unable to obtain records for themselves. On many occasions FASS has been more successful because of the knowledge and experience of the Records Research Officer. This is not a fair process for those (some) without record searching knowledge and many people may not receive the records they are looking for.
- It is not possible for people to place a request for all of their records. When applying for records you must describe what document you are looking for eg. Admissions & Discharge, Nursing/ Medical care etc. People inexperienced with records requests may therefore not obtain the information they require. They may not know that there are other records that they could possibly obtain if they ask in a different way.
- Creating and sharing a register where all current and closed, public and private maternity, birthing hospitals etc records are held. Advising where records are currently kept and

providing relevant contact and application details would be very helpful for people seeking records.

- Reduce the wait time for records. It is unacceptable for people to wait so long. It can be very difficult for a person to wait several months to receive records. It can be even more traumatizing if in the time it takes to receive records, key family members pass away or are no longer able to communicate in a meaningful way. The ability for someone to connect with a living relative, mother, father, siblings or people living who knew a relative closely, is an example of this.

[We understand that RAWA is not a licensed mediator for the purposes of reuniting adoptees with family. Is that correct?](#)

Yes that is correct. When we were initially funded, another service in WA was already a licensed mediator and providing these services.

[Do people come to RAWA hoping you will facilitate a reunion?](#)

Some clients do come to FASS seeking assistance with reunions. Previously we referred them to the licensed mediator service.

We also spend time helping clients to understand/explore the path to reunions (according to their individual situation), including talking through the types of experiences, issues, and barriers that may be experienced. This provides support to explore their expectations and unpack what it may be like for each of the parties during, at the point of, and post the reunion. FASS is able to deliver this work without facilitating any contact and therefore are not required to be a mediator.

Many people choose to, and most have already started searching online and through social media and online ancestry services before coming to us. Often they have experienced some level of distress, and/or lack of success.

[Do you have any intentions of expanding your services?](#)

The FASS team has developed extensive experience and knowledge of working with people affected by past forced adoptive practices, including navigating the record searching and reunification pathways and developing strong sector relationships. The dedication of all team members to supporting all people affected is to be noted. Unfortunately, as a not for profit, independent community organisation, our ability to expand our reach and service offering within Western Australia is limited by funding available from both the Federal and State Governments. We remain open to funding and service expansion conversations as they become available.

[You raise the need for specialist support services. Can you describe the problem and how that might be addressed?](#)

There is limited availability to adoption trauma-informed therapeutic counsellors/psychologists in the WA community for clients needing longer term therapeutic counselling. When we have referred out, some of our clients have reported to us being offended by inappropriate/insensitive language used, or a lack of understanding of the impact of Forced Adoption.

Clients, in some cases, have limited financial means to attend private services with fees. The ideal solution would be funding to hire, train, and supervise staff to provide ongoing therapeutic counselling within a specialised service. This could include a wrap-around service where people can access a variety of support and where they know the service specialises in understanding their unique needs.

The other need is to provide increased case management support. Many clients seek support with our service as they know we understand the impact of their trauma. There is often a power imbalance with people in authority, medical, and aged care services, along with anxiety with signing documents etc. These experiences are all related to the trauma of the Forced Adoption experience, involving people in positions of power/trust.

We often have requests to support clients to access medical/dental/Centrelink appointments, as well as to attend court. Due to our limited service activities, we are not able to support clients in this way.

[You also mention difficulties in assisting remote and regional clients. How should that be addressed in your view?](#)

The provision of specialised outreach face-to-face services, including individual counselling, support and social/peer group activities. Depending upon the numbers of participants and demand, a regional center may host a monthly, bimonthly, quarterly or biannually visiting service.

A visiting service is a preferred option as the work is very specific and the networking, information and professional skills required are unique. It may be difficult to staff and maintain the quality of a non-visiting service if smaller funding amounts are allocated to several regional service providers. However, they could possibly be supported with capacity building funding and activities. Our experience with clients and queries in smaller town communities also suggests a preference for visiting services to maintain a sense of confidentiality and not seeing a support worker socially in the community. Phone and video/online services could be offered in between outreach visits.

[Overall, in what ways do you feel RAWA could provide better services for people affected by forced adoption, if more funding was available?](#)

- Outreach services across Western Australia
- Increased number of hours-of-service provision, assisting more people individually with records searching, counselling and case management
- Regular peer social supports, and group activities
- Specific adoption trauma informed clinical/therapeutic counselling
- Specific support for men
- Specific support for Aboriginal and Torres Strait Islander men and women.

[There has been mention of a “one-stop-shop” for accessing paperwork, counselling, reunions and general support. Do you have any ideas how this may be facilitated?](#)

FASS currently provides services that support, provide and build on those indicated. The only exception is reunions due to not being a licensed mediator. Funding to scale up the FASS service

delivery model could be achievable. The knowledge, skills and experience of the current management and staff makes the service well placed to extend its reach. For almost 10 years RAWA has worked within this space, providing support to clients and contributing to the WA and National sector in understanding the needs of our clients. RAWA has quality governance and practice supervision structures in place to ensure an evidenced-based, quality client experience.

A designated location or clearly defined allocation of space for the delivery of support services would be recommended. This ensures confidentiality, where people can be comfortable, they are among others with a similar experience or common understanding. We believe it is essential to have a dedicated specialist service such as FASS that the community can identify as being specifically for supporting those impacted by Forced Adoption.

The 2018 FASS Post Implementation Review stated:

Competitive trauma was evident among the FASS target group that contributed to the absence of joint mother and adoptee groups in most cases. Has that been your experience?

At FASS we have provided both Mothers only, and all FASS member (anyone impacted by Forced Adoption mostly adoptees, and mothers) functions/activities. These have been social or information-based groups (not therapy), with some minor tensions on rare occasions when the groups have been combined. We have noticed specific mothers or adoptee only groups do work well and would recommend offering opportunities for both separate and combined functions/events.

What do you hope this inquiry will achieve?

- Mechanisms for organisations who were involved in practices of forced adoption to acknowledge and apologise in a manner acceptable to those impacted by the trauma of forced adoption practices.
- Redress for those impacted by the trauma of forced adoption. A program was recently announced by the Victorian Government.
- Funding for services to adequately support those impacted by forced adoption.
- Making accessing records easier.

Is there any other matter you would like the Committee to take into account?

No further comment.