

16 June 2000

Jubilee Room, Parliament House, Sydney

CRAIG MURRAY WILSON, Director, Children and Youth Services, Centacare Adoption Services, 9 Alexandra Avenue, Croydon,
ANGHARAD ELISABETH CANDLIN, Principal Officer, Centacare Adoption Services, 9 Alexandra Avenue, Croydon, and
EVELYN COSTELLO, Director, Employment Services, Centacare Catholic Community Services, 33-35 Ware Street, Fairfield,
sworn and examined:

CHAIR: Mr Wilson, In what capacity are you appearing before the Committee?

Mr WILSON: As the Director of Children and Youth Services.

CHAIR: Did you receive a summons issued under my hand in accordance with the Parliamentary Evidence Act 1901?

Mr WILSON: Yes.

CHAIR: Are you conversant with the terms of reference of this inquiry?

Mr WILSON: Yes.

CHAIR: Do you wish your submission to be included as part of your sworn evidence?

Mr WILSON: Yes.

CHAIR: Do you wish to briefly elaborate upon your submission or make a short statement?

Mr WILSON: Because of the shortness of time, I would like to answer the last question first; I would hate that to be missed.
Is that acceptable?

CHAIR: The last of the questions sent to you by the Committee?

Mr WILSON: Yes.

CHAIR: Yes, that is acceptable. Ms Candlin, in what capacity do you appear before the Committee?

Ms CANDLIN: As the principal officer of Centacare Adoption Services.

CHAIR: Did you receive a summons issued under my hand in accordance with the Parliamentary Evidence Act 1901?

Ms CANDLIN: I did.

CHAIR: Are you conversant with the terms of reference of this inquiry?

Ms CANDLIN: I am.

CHAIR: Do you wish your submission to be included as part of your sworn evidence?

Ms CANDLIN: Yes.

CHAIR: Mr Wilson will elaborate upon that submission?

Ms CANDLIN: Yes.

CHAIR: Ms Costello, in what capacity do you appear before the Committee?

Ms COSTELLO: As a former principal officer of Centacare Adoption Services.

CHAIR: Did you receive a summons issued under my hand in accordance with the Parliamentary Evidence Act 1901?

Ms COSTELLO: Yes.

CHAIR: Are you conversant with the terms of reference of this inquiry?

Ms COSTELLO: Yes.

CHAIR: And do you wish the submission to be included as part of your sworn evidence?

Ms COSTELLO: Yes.

CHAIR: Mr Wilson, do you wish to elaborate on your submission now or would you prefer to go straight to that final question?

Mr WILSON: Straight to the final question.

CHAIR: Do you think an apology made by the relevant agencies would assist the women who have been distressed as a result of past adoption practices?

Mr WILSON: We take the position that whenever a person, or persons, has been aggrieved or hurt by another person, it is most appropriate and often a healing experience if the offending party apologises. In this context we would like to take this as an opportunity to say sorry for any practices that this agency, whether it be the Catholic Adoption Agency or Centacare Adoption Services, has engaged in which has been detrimental to the people we are supposed to be helping. Practices that hurt or leave people feeling torn apart are wrong regardless of intentions or supposed knowledge bases.

We believe we need to say sorry because we see the immense amount of ongoing grief and loss that past adoption practices have created. In saying sorry, it is our responsibility to include an apology for practices that may have been considered acceptable at the time but are since seen to be detrimental to peoples' well-being. We apologise also for any individual cases where we were either illegal or unethical in our practices as defined by the law and accepted procedures at that time.

CHAIR: In your submission you explain that the Catholic Adoption Agency began in 1967 as an adoption service under the auspices of the Society of St Vincent de Paul. Could you briefly elaborate on the adoption services the agency offered, and in particular the different ways in which a woman could be referred to the agency?

Mr WILSON: As you have indicated, the Catholic Adoption Agency operated under the auspices of the Society of St Vincent de Paul. Up until 1990 when Centacare Catholic Community Services took over the administration of that agency there was a change in agency policy, procedures and eventually staff. So they are quite different organisations in many ways today, but our understanding is that the Catholic Adoption Agency offered a service to Catholic parents considering adoption of their child, and it assessed Catholic couples wanting to adopt.

In the 1970s the agency changed its practice so that prospective adoptive parents did not both have to be Catholic. The agency would accept a couple where only one parent was Catholic. The agency organised the adoption placements and from 1970 took adoption consents. The mode of referral of parents considering adoption was not generally recorded on the files. However, anecdotal evidence suggests that parents, usually women, were referred by their parents, local priests, the hospital or doctor.

CHAIR: Will you explain the role of social workers at the Catholic Adoption Agency? In particular, will you comment on the advice that social workers were giving mothers considering adoption in the 1970s and 1980s?

Ms CANDLIN: Given the links with question 3, I would like to answer questions 2 and 3 together.

CHAIR: Yes. I will explain to the gallery that question 3 deals with the comments that many women who approached the agency presented their situation as one in which they saw few options. The Committee asked: Were professionals at the agency obliged to explore non-adoption alternatives with the mother? Would failure to do that constitute a breach of ethics or of the law?

Ms CANDLIN: Social workers at the Catholic Adoption Agency were employed to assess adoptive parents and counsel parents who were considering the placement of their child for adoption. The assessment of adoptive parents was certainly not as in-depth as current practice and usually involved one or two interviews, a report from a doctor and a reference from the parish priest. In 1972 education and preparation groups for couples considering adoption were introduced as well as more thorough assessments exploring relationship, family and infertility issues and also providing information about adoption and parenting an adopted child. In 1978 post-adoption support for adoptive families was introduced. The agency started to run workshops for adoptive parents and offered itself as support to families. This is different from current practice in relation to post-adoption support in that now it refers to mediating contact between birth and adoptive families, and supporting both the adoptive and birth families more closely, as well as running workshops, seminars and groups, and publishing newsletters for adoptive and birth families.

With counselling birth parents the agency's role was, and still is, to explore different options for the parents. In the 1960s and 1970s it would appear that clients commonly held the perception that they had few legitimate or acceptable options available to them. Reviewing both client files and literature of the day, it would seem that there was a significant stigma attached to being a single parent. Many families of single pregnant women who came to the agency offered little or no family support, which added to the parents' distress. In the 1980s it would seem that for women in general, and for our purposes it would seem particularly for Catholic women, the use of contraception and terminations significantly increased. Both were available and began to be seen as legitimate alternatives to unplanned pregnancies. This is reflected in the lower numbers of infants placed for adoption. It is significant also that the Catholic Adoption Agency had a major shift in its practice and began the process of openness in adoption.

It is the present practice of this agency, and has been so at least since I began work in the adoption program in 1993, that social workers and all welfare or counselling professionals are obliged to explore all options with their clients to assist them in coming to a decision, whatever that decision might be. Whether this practice happened in the 1980s or earlier, and if so, to what degree, I

am unable to ascertain. The primary evidence available to us is from file notes, which were often poorly documented and basic. It would appear that for many women at that time few options were available, particularly if families were not prepared to support their daughters. It is not insignificant that today some parents, again mostly women, make an adoption plan with the knowledge that while supporting agencies and financial assistance are available, without support of their family or, in certain circumstances, with clear opposition from their family, they feel that they are still not able to parent a child at this point in their lives.

It is this agency's position that failure to explore non-adoption options is an unacceptable breach of agency practice and professional ethics. This agency is not in a position to comment whether it is a breach of any law. If any of our staff, be they social workers or adoption workers, were to actively and/or deliberately keep information regarding non-adoption options, this agency would consider it a breach of acceptable practice and would mandate itself to treat this behaviour as a breach of acceptable agency practice and ethics. In the past, we do not believe that social workers habitually kept information from their clients. However, given the significant volume of cases that have moved through the agency, it would be impossible to not expect particular instances of such a breach of behaviour.

The Hon. Dr A. CHESTERFIELD-EVANS: Your submission states that processes relating to assessment and preparation of adoptive parents were initially limited. However, a more satisfactory process was introduced after 1972. At this time was the CAA focused more on the need to prepare and counsel birth mothers or adoptive parents?

Mr WILSON: From 1972 it appears that there was an evolving perception that adoption practices needed to take into account all significant people in the process. Significant nodal points after 1972 are the introduction of broader group practices, more thorough assessments, early steps towards openness and groups of birth parents talking to parents considering adoption about their experiences. By 1990 it would seem that the focus was tripartite, that is there was equal consideration given to the needs of adopted children, parents considering adoption and adoptive applicants. Between 1972 and 1990 this practice was developing. It has been our experience that the knowledge and practices improving in one area have improved in another. More germane to your direct question are the practices before 1972. While it would be difficult to prove such a point, it would seem that there was a bias towards the adopting parents.

The Hon. Dr A. CHESTERFIELD-EVANS: Ms Candlin said that the principal source of records was the written files, which were fairly incomplete. Do you have the information, such as you could get from those who would have returned those files, and were you able to speak to them at length?

Ms CANDLIN: We have spoken to them. We have spoken to past workers of the agency, past principal officers and others who were involved in the agency. We also have anecdotal evidence from clients at the time. But the main written form of evidence is in terms of the files.

The Hon. Dr A. CHESTERFIELD-EVANS: You cannot give details of policy change as it was done informally by word of mouth, is that the bottom line?

Ms CANDLIN: Yes.

Mr WILSON: Looking back we can see that there were certain practice changes, which are available to be found. We can see that certain practices have shifted.

The Hon. Dr A. CHESTERFIELD-EVANS: You deduced that there were practice changes, but they were not formal policies, because that is a recent phenomenon?

Mr WILSON: Yes.

The Hon. Dr A. CHESTERFIELD-EVANS: Can you document roughly when the non-adoptive options were introduced, when they became mandatory, when they were always referred to, when they were referred to only sometimes, and when they were referred to only if the women asked for them? Do you know when the change took place?

Mr WILSON: We know that certainly from 1990 on that was the case.

The Hon. Dr A. CHESTERFIELD-EVANS: Is that when a new policy was introduced?

Mr WILSON: That is when the agency's involvement in adoptions changed over to Centacare. That is one reason for Evelyn being here. Evelyn was the first principal officer in 1990, and she introduced the significant changes. It would appear that there were those practices before, but we have had trouble finding out how and when they were ensconced.

The Hon. Dr A. CHESTERFIELD-EVANS: They may have reflected the individual values of the people?

Mr WILSON: That is quite possible, yes.

CHAIR: Would Ms Costello like to elaborate further?

Ms COSTELLO: Certainly from 1990, when I took on the role as principal officer, there was, as has already been said, a shift in practice. That shift in practice was formalised by way of management procedures and procedures that the social workers undertook. Prior to that time I believe that non-adoption options were explored, but the extent to which that was the case I cannot actually say, and I am not aware that there were any formal procedures at that time.

The Hon. Dr A. CHESTERFIELD-EVANS: In your submission you explain that it was common practice in the 1960s to medicate mothers, including married women, during the birth process. A number of women have told the Committee that they received greater doses of medication than married women. Are you aware of any instances in which this took place?

Mr WILSON: We are given anecdotal evidence from the birth parents. However, we do not believe that would be substantial enough to give an unequivocal answer. Therefore, we need to say that perhaps the medical professions can give a far better answer. Certainly from our point of view, comprehensive research into this area would be most helpful.

The Hon. Dr A. CHESTERFIELD-EVANS: Could you elaborate on the comment in your submission that pressure to adopt came from both the mother's family and the hospital? How was this pressure applied? Do you believe that adoption professionals also applied pressure on women to adopt a child?

Mr WILSON: It has been the agency's experience that in the 1960s and 1970s, and even in some instances today, some families do place pressure on their single pregnant daughters by favouring adoption because families might consider it to be the so-called best solution. The degree of family support is a critical factor in parents' decision-making process, which in our opinion should not be underestimated. Clients have reported to us that they felt they would be stigmatised by broader society if they were to parent their child. It would seem that the fear was that both the mother and the family of that mother would become pariahs in their own communities. If a child was born illegitimate it was evidence that the mother had been involved in a full adult sexual relationship outside marriage. Historically, it appears that adoption was seen by many people as a solution to the so-called problem of having a child born exnuptially.

The mother's family and hospital staff lived and worked within a social milieu which would have appeared to have held the attitude that an exnuptial birth was a problem to be solved. Pressure may have been incorrectly or directly applied by individuals so that mothers and their families could avoid this alleged terrible stigma. Unfortunately, however, we are unable to say specifically how this pressure was applied. We have no documented information that indicates that adoption professionals applied direct pressure for parents to make an adoption plan, but, as previously stated, indirect pressure would seem to have existed within the system as a whole. Speaking to birth parents today, they indicate that in hindsight they believe they were pressured. Based on this anecdotal information, we would have to conclude that specific instances of overt pressure were applied to parents.

The Hon. Dr A. CHESTERFIELD-EVANS: Surely those people who were routinely involved in the consents for a period of years could tell about the practices that they were following?

Mr WILSON: I have spoken to past workers, and they are confident that they did not apply that pressure. We made a point of asking the people whom we could find who were previously involved in adoptions.

The Hon. Dr A. CHESTERFIELD-EVANS: Could you explain the agency's procedure in the undertaking of consents? Are you aware of any instances involving agency staff in which the taking of consents could be considered unethical or unlawful?

Ms CANDLIN: Since 1995, when the amended regulations of the Adoption of Children Act were introduced, Centacare Adoption Services has used the following practices in the taking of consents. During the counselling process parents will have gone through the consent documents in detail with the worker, who will have explained the meaning of the documents and the implications related to the giving of consent. Parents also receive numerous articles to read, including the pamphlet for parents considering adoption, of which I will give you a copy. The pamphlet outlines the procedures of the agency. When a parent decides that he or she is ready to sign a consent, a worker will read through the consent and other legal documents with the parent, who then signs a form indicating that he or she has read the documents and has received copies. Not less than 72 hours later, a further appointment is made for the parent to sign consents.

If the parent wishes to have a support person with him or her, that is usually agreed upon. However, the agency tries to ensure that this support person is in fact just that, and not someone who may have undue influence upon the parent. The documents are then read through aloud and signed by the parent, with the worker witnessing the consent. The procedures for revoking a consent will already have been explained to the parent. However, these are explained again and a letter of revocation is given. The agency offers to accompany parents to the Supreme Court if they wish to revoke their consent in person, to ensure that the revocation has been received by the court. A week prior to the end of the revocation period a further letter, plus a letter of revocation, is sent by registered mail to the parents to remind them of the nearing date. The agency continues to counsel parents during this period.

The agency always makes it clear to parents that should they wish to revoke their consent and re-sign another in order to give them more time, this option is available to them. It should be noted that while the law states that consents can be given on the fifth day after birth, this almost never happens now. Parents are offered a period of temporary foster care, and this is negotiated on a case-by-case basis. It may be several weeks or months, depending on the situation, before a consent is signed. With regard to the second part of the question, concerning the witnessing of consents, we are not aware of any agency staff, employed by either the Catholic Adoption Agency or Centacare Adoption Services, who were involved in unlawful or unethical practices.

The Hon. Dr A. CHESTERFIELD-EVANS: You have detailed very clearly the procedure since 1995. Are you able to give details of the procedure before that time?

Ms CANDLIN: I can talk from my experience. In 1995 some very specific recommendations came through in the regulations, and that is why I have detailed that. It is more difficult to say what was the standard procedure before 1990, because it is not written down. The file notes would not necessarily note down the exact steps that would have been taken by a worker to take that consent. It would have noted that a consent had been taken, and it may have noted the emotional impact on the parent signing a consent, but it would not necessarily have noted the actual way the consent was taken.

The Hon. Dr A. CHESTERFIELD-EVANS: Surely over number of years quite a number of people have taken those consents. If you were to ask them how they took the consents they could say, "Well, we used to make them in the hall. We had the forms under one arm, we had 10 minutes per case, and we would whip them through", or, "We had half an hour in the anteroom." Did you not have consents from those people?

Ms CANDLIN: I do not think it was given as specifically as that. I would assume that the parents were seen in workers' offices, in the office of the agency, and that the consent documents were read through. There were only two documents to sign at that time. They were read through, signed by the parent, and witnessed by the worker.

The Hon. Dr A. CHESTERFIELD-EVANS: Have you not asked any of the workers how the consents were done?

Ms COSTELLO: I think it should be noted that when there was a shift in practice, when the Catholic Adoption Agency was taken over by Centacare, there was also a change in staff. The staff that were part of the Catholic Adoption Agency - some for 20 years and some for 15 years - in fact retired at that time. So the information that we have is information that can be ascertained from our files. I do not for one minute think that consents were taken in corridors. I believe that there was always a professional approach to the taking of consents and that the consents were taken with due respect and privacy. However, the procedures and steps that were followed are difficult to be definite about because they were not recorded as such. There were certainly notes in the file that recorded when the consent was taken, who was present, perhaps the emotional state of the birth mother giving the consent, and the level of contact with that birth mother. But in terms of formalised procedures, they were not available to us.

The Hon. Dr A. CHESTERFIELD-EVANS: During the massive change in 1990 were there some ructions within the replacement agency which resulted in many people leaving because of a change in values? Is that why contact was lost with those who had previously taken consents?

Ms COSTELLO: I would say that would be partly the case: the ideology of the new agency was somewhat different and certainly placed a lot more emphasis on openness in adoption. But, in reality, I think the situation was that it coincided with people making personal decisions to retire because they were of retirement age. So it was certainly a time of great change for the organisation and for adoption practices.

The Hon. D. F. MOPPETT: Was it the usual practice of the agency to place the baby with the adoptive parents during the 30-day revocation period? Do you think this practice would have any impact on the mother's decision to revoke consent?

Ms CANDLIN: During the 1960s and 1970s infants were placed with adoptive parents prior to the expiration of the revocation period. While this certainly occurred it did not appear to be the usual practice. This situation occurred usually when a social worker thought a parent appeared to be firm in his or her resolve to place the child for adoption and was unlikely to revoke consent. In the early 1960s and early 1970s infants were kept in hospital rather than in a foster care placement, as is the current practice. It was considered to be a child-focused practice, in order to remove the infant from a clinical setting and to assist in its bonding with the adoptive parents. Although the agency appreciates the rationale behind this practice it does not concur with it and considers it a misguided practice for two main reasons. First, while adoption workers were clear that the child be returned to the parent, it would have placed even greater pressure upon the birth parents not to change their mind. Second, contrary to the opinion that it would assist the bonding if the infant was placed as early as possible, it is likely that it would have had an impact on the adoptive parents' ability to bond with the child knowing that the child could be removed from their care. It is significant to note that some parents requested - and still do - that social workers place their child with adoptive parents as soon as possible prior to expiration of the revocation period. Despite requests, this practice is not engaged in by the agency.

The Hon. H. S. TSANG: Do you have any statistical information on the number of revocations that occurred at the agency during the period under review?

Mr WILSON: Our records indicate that 578 revocations occurred during the period under review. It should be noted, however, that in recent years revocations are few and far between. The agency attributes the minimal number of revocations over the past five or six years to our active practice of encouraging parents to have a period of temporary foster care before signing an adoption consent. This, in effect, means that parents change their minds before signing a consent, whereas previously the consent would have been revoked.

CHAIR: That is 578 out of what total?

Mr WILSON: There have been 3,580 adoptions; so that is 578 of 3,580.

CHAIR: That seems quite high. That is one in seven.

Mr WILSON: I thought it was high, too. That is one in seven or one in eight potential adoptions; but obviously it is different for the past five or six years.

CHAIR: That is over what period?

Ms CANDLIN: That is 1967 to 1998, the period under review. But, again, in the past five or six years there have been very few revocations.

Mr WILSON: So, effectively, it is until about 1992.

The Hon. H. S. TSANG: What feedback do you receive from mothers and other persons affected by adoption about past adoption practices?

Ms CANDLIN: The agency receives much feedback from birth parents affected by past practices, some positive but many negative. The themes that come through in talking with birth parents are the social climate of the time, lack of support, adoption workers who were less than sympathetic to their situations, poor treatment that they received in hospitals, being told to go away and get on with their lives after they had signed a consent, and a general lack of understanding by everyone of the ongoing grief involved in adoption. Some birth parents have expressed grief and regret about their situation and the adoption of the child, and others have expressed regret about their situation but still maintain that adoption was the right decision for them at the time. Feedback from some adoptive parents has been that they were ill-prepared for the task of adoptive parenting, had little ongoing support by the adoption agency, and were ill-equipped for the retrospective changes to the law and the practices.

Feedback from some adoptees is that they do not have a voice; they had no say whatsoever in their adoption; past adoption practices did not recognise the essential issue of identity; they felt confusion and bewilderment, especially in the area to which parents they should be loyal; the lack of a biological heritage; minimal medical records and history; and frustration compounded by the lack of information available to them and the bureaucracy that they must go through so that they can better build their identity and trace their origins. We are conscious that this agency can only speak about the clients we are in contact with. There are a myriad of experiences and it is more appropriate that the individuals concerned give a voice to their experiences. The agency takes a strong position on acquiring feedback to ensure its continual re-evaluation and development of practices.

At present our formalised review and feedback mechanisms are: newsletters for birth parents and adoptive parents, the contents of which largely comprise materials supplied by clients; evaluation of all workshops and seminars that are run by the agency; discussion with workers; and a complaints procedure, and we are currently developing a consultative committee to assist with this. The journey of adoption is a lifelong one and Centacare Adoption Services is committed to walking the journey with all affected adoptees, birth parents and adoptive parents. We also recognise that for some people it is too difficult to return to the agency that arranged the adoption, and we thank agencies such as the Post Adoption Resource Centre who play an invaluable role in supporting the people that we cannot support.

The Hon. Dr A. CHESTERFIELD-EVANS: Your submissions on past adoption practices were based on professional and social standards different from those in place today. Can you outline present adoption practices and how those practices differ from those of the 1970s and 1980s? Can you also explain the ethical beliefs that underpin current adoption practices and how, or whether, these policies have changed over time?

Mr WILSON: I will break down that compound question. Adoption practices today differ from those of the 1960s, 1970s and 1980s in many ways. The most clear difference is the introduction of openness in adoption. As already indicated, this began during the early to mid-1980s. The practice of openness in adoption has evolved considerably in the 1990s and continues to evolve as the understanding of the impact of adoption grows. The agency takes the position that openness not only refers to the actual practice of contact between birth and adoptive parents but of the practice of being open about the adoption, in communication and in relationships. That has developed more in the last decade than it did in the 1980s. Practically speaking, openness involves letter exchanges and meetings between birth and adoptive parents. It usually starts as non-identifying and can move to being identifying if all parties agree. I would like to submit two videos to support my statement. The first is *Making the Link*, which the agency produced in 1994, and the second is called *Tara's Choice*, made by the ABC in 1998 with assistance from the agency, and it focuses on the clients of the agency.

Another significant factor in adoption practices is the development of the understanding of grief and loss. Academics Kubler-Ross in 1975 and Bowlby in 1973 contributed significantly to all helping professionals, in their understanding of grief. Today, several decades later, agency staff spend regular time working with all our clients including adoptees, birth parents and adoptive parents, on the impact of adoption and the ongoing nature of loss and grief. The agency takes the position that it is essential that all clients are able to make an informed decision; that is parents considering an adoption plan for their child, couples considering adopting a child, or clients who are searching for the adult child or birth parent.

When counselling parents, the workers and client spend time looking at other available options and ensure that clients make an informed choice, whatever it may be. The agency actively supports visits between parent and child both before consent is given and afterwards. A significant proportion of the agency's work is in supporting clients post-adoption and in mediating contact between birth and adoptive families. Apart from the knowledge of grief and loss that has changed, the understanding of the importance of knowing one's identity in developing a sense of self has changed. In my opinion that has been a dramatic shift in the last decade. The agency considers it essential that adoptees have as full a picture of their heritage as possible. Some of the mechanisms for assisting with this have already been forwarded to the Committee.

Regarding ethical beliefs, the agency's ethical stance has changed by moving away from a paternalistic notion of professionalism

to a far more collaborative understanding. That is, it is no longer acceptable for professionals to assume that they know what is best for any particular client. Rather, staff work with clients to assist them to be fully informed of alternatives so that they may make the best choices for themselves. It is the agency's current position that all individuals have a right to know their heritage. All parents have a right to make a decision about the future care of the child, whatever that may be. The adoptive parents have a right to be fully supported and prepared to parent an adopted child. The agency takes the ethical position that all parties to adoption have a right to be respected and supported throughout their life, not just at the point of adoption.

The Hon. Dr A. CHESTERFIELD-EVANS: In your submission you state that there is a need for adequate funding to allow for the provision of information and counselling to parents seeking origins information. Could you elaborate on that?

Ms CANDLIN: One of the main issues associated with current adoption practice is the ongoing difficulties agencies face with regard to the funding of the adoption programs. It appears to be a generally held belief that once an adoption occurs the adoptive parents are parenting autonomously and without agency support. There is a hidden cost to the agency in the provision of post-adoption support both to the adoptive families and the birth families, especially with regard to openness in adoption and supporting relationships between birth and adoptive families. The workload of post-adoption support is compounded by a significant amount of work with families where the adoptees are now in middle to late childhood and adolescence. These adoptions were not arranged with the current practice of openness in mind.

Many birth parents and adopted people find it insulting to be faced with substantial fees when searching for information. As this Committee is probably aware, there is a charge for a supply authority and associated services provided by the Department of Community Services. This includes the provision of prescribed information even when that information is provided by a non-government agency. There is also a charge for medical records from the hospital and again for birth, marriage and death certificates provided by the Registry of Births, Deaths and Marriages. There is a strong case to be argued that this information should be provided free of charge. There is also a strong case to be argued that all pertinent information that is held by an information source should be released to the individual concerned. Centacare Adoption Services does not charge a fee for origins work. It does, however, find it necessary to request a donation, if at all possible, in order to attempt to cover costs.

It would be helpful if support groups were funded for the work that they do in assisting people affected by adoption. Their work is particularly important, because many clients do not feel comfortable about returning to the agency involved in the adoption. This agency considers it important that a variety of services should be available, of which support groups are an essential part.

Presently this agency has all its files recorded on paper only. There is a strong concern that if these files were damaged by fire or water the material that is valuable in helping people understand their past would be irretrievably lost. The best solution available appears to be the electronic storage of the data. Unfortunately, the cost is prohibitive to Centacare Adoption Services.

CHAIR: Do you wish the videos to which you referred to be taken as part of your sworn evidence?

Mr WILSON: Yes.

CHAIR: At the beginning of this hearing you were asked whether an apology by the agencies would assist. On behalf of the Committee I thank you for making that apology so clear. What other measures might assist people experiencing distress as a result of past adoption practices?

Ms CANDLIN: With regard to records, the agency believes it is essential that there is an Australiawide integrated system for accessing records. For example, if an adoptee who was placed for adoption in New South Wales is searching for his birth parent who, for example, did not marry in New South Wales but in Victoria, the searcher may have to request records from registries throughout the country before finding the record in Victoria. Each search involves a fee, quite apart from the time, frustration and distress it causes. Furthermore, the agency believes it should have access to records from births, deaths and marriages and the electoral roll in order to assist clients who are searching for records. This is particularly important in circumstances where adoptees are not able to access this information themselves, especially adoptees under the age of 18 years.

There is little research into the effect and impact of adoption on those involved, and the agency believes that it would be invaluable for research to be conducted, such as a longitudinal study of birth and adoptive families involved in openness in adoption; a comparative study of adoptees involved and not involved in contact with their birth families; assessment of the psychological impact of adoption on adoptees, birth parents and adoptive parents; the impact of infertility on adoption; a comparative study of parents who initially considered adoption and chose to parent and those who placed their child for adoption; and research into what makes a reunion successful and the long-term results of relationships between birth and adoptive families.

The Hon. Dr A. CHESTERFIELD-EVANS: Did you wish to show the video?

Mr WILSON: That was not our intention, but we have no objection to that.

CHAIR: We will save that for the Committee members.

(The witnesses withdrew)

At the request of the witness, the name of the witness has been withheld. This witness will be known as WITNESS C.

WITNESS C, affirmed and examined:

CHAIR: The witness would prefer not to give his name. However, the Committee has his full name, occupation and address. In what capacity do you appear before the Committee?

WITNESS C: I am the father of an adopted son.

CHAIR: Did you receive a summons issued under my hand in accordance with the Parliamentary Evidence Act 1901?

WITNESS C: Yes, I did.

CHAIR: Are you conversant with the terms of reference of this inquiry?

WITNESS C: Yes.

CHAIR: Do you wish your submission to be included as part of your evidence?

WITNESS C: Yes.

CHAIR: Would you like to briefly elaborate upon your written submission or make a statement, or do you wish to just answer questions?

WITNESS C: I think a lot of how it all occurred will come out as we go through the questions.

CHAIR: Will you tell Committee how you felt when you learned in 1965 that your girlfriend was pregnant, and were you are able to discuss the situation with your family and/or with medical professionals?

WITNESS C: Being only about 19 years old at the time I was pretty nervous, as you would probably expect, never having been through the sort of thing before. I immediately went and saw my mother and father and explained the situation to them. The girl came with me and we both saw mum and dad because they are the sort people you go to in a situation which you do not know how to handle, and in those days we did not have the wherewithal to know what to do next. We went and saw them and mum and dad said that we would have to see her father, which we all agreed to do. At the time that we were discussing it mum and dad asked what were we going to do with the baby. At that time my girlfriend was about three months pregnant, if my memory serves me right. At no time was an abortion discussed because we did not really believe in that sort of thing. Anyway, as far as the girl, myself and my parents were concerned, she was going to have the baby. We thought we would still be together after that event and that we would somehow work things out.

So I went up with the young lady and saw her father. I am not discriminating but her father was English and very straightlaced in his views, and the fact that his daughter was pregnant with my baby did not endear me to him at all. In fact, he got pretty angry. He ordered me from the house, and as it was his house I had to go; I could not do much about that. The next day two detectives arrived on our doorstep and wanted to talk to me and my father, which they did. They informed me that they were arresting me, which they did. They charged me with carnal knowledge. But something one of the detectives said sticks in my mind. He said, "We have not charged anyone with this sort of thing for a long, long time. We really do not want to do that to you now but because the father is so adamant, so cranky and so upset about the whole issue, we are put in a position where we are forced to actually take this action." As a result I appeared in court charged with the offence. There was no denial; it was definitely me, and I subsequently received a 12-month good behaviour bond for this act.

I will give a little more background. This young lady and I had been together for a fair length of time, or what I considered to be a fair length time - it was probably nine or 10 months, around that sort of time frame - before we became sexually active. At the time we became sexually active both of us had never entered into anything like this before, so to both of us it was the real thing. We felt pretty strongly about each other and to wait that length the time before we actually became involved sexually shows the respect I had for her and the respect she had for me, and we only entered into that sort of activity once we were sure of each other.

Anyway, after all that evolved I was no longer able to see her. As far as her father was concerned; that was basically the end of it because he had banned her from seeing me and told her that if she saw me she would be kicked out of the house. She would be disgraced because she had a baby, and in those days she did not work, though she was looking for a job at the time. But she was probably pretty scared at the thought of being kicked out of the family's house with a baby to look after, and I can understand why she went with her father's views. I can understand why she submitted to his request not to see me ever again, to stay home and keep away from me. I do not know whether that answers the first question.

CHAIR: It probably answers the first, second and third questions, which all related to what happened with you and your girlfriend and how you came to be charged. You said that you were not able to see her during the pregnancy. Did she remain at home?

WITNESS C: During the pregnancy we actually cheated a little bit because she would ring me, unbeknown to her father, because there were no ifs or buts about it, I loved that girl and she loved me at the time. We would meet secretly, not very often, just to see each other and for me to see how she was going. Wherever I could I supported her emotionally, but it was very hard to do that when I was only seeing her on the odd occasion. She would ring me and say she was taking a walk up to the shops and I would go and see my boss, because I was working at the time, and ask if I could have half an hour off. I worked close to where she lived. We would sit there, have a talk and discuss what was happening. Again I come back to the fact that we were young and I do not think we knew how to handle the situation at that time. I used to ask questions, such as, "What about after you have had the baby; do you think we could see each other?" and she said, "No, my father will kill me if I see you again."

CHAIR: How old was she?

WITNESS C: I think she was about 17 ½ when she was having the baby.

CHAIR: Did you discuss adoption or any other alternatives with her?

WITNESS C: Yes. I actually told her that I had spoken to mum and dad. After that initial meeting that we had with mum and dad I told her that we had discussed adoption and that mum and dad were going to adopt the baby if possible and I would bring it up. Further down the track, if it worked out between her and me, and if her father relented a little bit, that would have been good. Mum and dad, especially dad, did not push me into it because I believe family is the most precious thing you have got, but to him that was his grandchild disappearing. He was of English origin too and he was pretty straightlaced, and his words to me were, "We can't let this happen." I said, "I agree totally because it is part of me. It is not just part of you, it is part of me too." So we discussed him and mum adopting the child and with their help I was going to bring the child up. But that leads into other areas. My father did try to see what could be done but I think it will be covered by other questions that you ask me.

CHAIR: In your submission you explain that you and your father actually approached different agencies to try to gain approval for you to keep your son. Do you want to tell us about those steps and what the agencies said?

WITNESS C: My father really took the lead here. As I said, I was only a young fellow at the time. He approached different agencies. He contacted adoption agencies and he contacted his local member to try to find out what my rights were and what his rights were as a parent and a grandparent. Basically what it came down to was that it was all too hard for everybody and we got fobbed off. One thing that sticks in my mind is that he sat me down one day and he said, "It appears, son, that you have got no rights whatsoever. I do not know where we go from here."

The response that I think he got from his member of Parliament at the time was, "It is the mother's prerogative what she does with the child because your name is not on the birth certificate." At no time did she want my name put on the birth certificate, because her father had instructed her not to put my name on the birth certificate. My father has since died; her father has since died. I feel very sad for my father. He just loved his children. I still class that boy, if he is still alive, as one of his children. He is out there somewhere and my father never knew him. I never knew him either, but I do not think that I can answer any more on that.

The Hon. Dr A. CHESTERFIELD-EVANS: You have probably already answered questions 4 and 5. What, if any, advice and counselling did you receive? Were you made aware of non-adoption alternatives?

WITNESS C: I was given some counselling at the hospital when the baby was being born by one of the nursing sisters there: "Piss off and leave the hospital. It's none of your business."

The Hon. Dr A. CHESTERFIELD-EVANS: Would you agree with the statement that abortion is the woman's right to choose?

WITNESS C: No, I do not believe in abortion.

The Hon. Dr A. CHESTERFIELD-EVANS: So you would say that adoption is not necessarily a woman's right to choose either?

WITNESS C: I believe so. I believe it is a right for a woman to be able to choose adoption if she does not have a partner in life, if she does not have someone who is concerned with the welfare of that child. I totally agree. If that woman has gone out and become pregnant through some misadventure of herself, using some man to get into that situation, I would totally agree that if she wanted to have the baby adopted - if I was that woman I would probably feel like that - but this was not the case. She was not in a situation where she was left alone. There were other avenues that I did not tell you about. She was in an unmarried mothers home at Turramurra for a period of time. I used to go over there on weekends and she would go for walks. She would tell the people that were running the mothers home that she was going for a walk and I would be over there at Turramurra hanging around like some vagrant outside the place waiting to meet her and see her and walk with her and just talk to her.

If she had not had a situation like she had with me and my parents, I could understand her adopting the baby out. But I know why she adopted the baby out. It was very clear cut: "You will adopt the baby out." That is what her father told her. You have to put yourself in that period of time. You are probably old enough to realise that the standards at that time were a lot different from the standards we have today. If her father told her to do it she did it. And that was the sole reason that baby was adopted out - because if it was left to her and myself and my parents I would not be sitting here today.

The Hon. Dr A. CHESTERFIELD-EVANS: You have more or less answered questions 6 and 7. Could you tell the Committee your experience of the birth process? Were you able to visit your girlfriend inside the hospital during and after the birth? Do you consider any aspect of the treatment you or your girlfriend received to be unethical or unlawful?

WITNESS C: Again, I did visit her without people's permission, secretly. She would ring me up and say, "I am going to go for a walk." That is how we did it for all that period of time. Until the baby was born I was able to see her on various occasions but just after the baby was born she left hospital and that was the end. I was not able to see her again because her parents kept her at home from that day on. As far as the treatment she received, she was virtually told she had to adopt the baby. This is only what I got from her. She told me that the baby had to be adopted out and the reasons why: Her father had said so and also the people in the hospital had said so. Whether it is unlawful, I do not know. Probably at that time it was not unlawful for them to act in that way but it was definitely unethical and morally wrong to ban me, especially as I was the father. I just think that was completely wrong.

CHAIR: Presumably, she was at Turramurra because her parents were determined to keep the whole birth secret.

WITNESS C: That is right.

CHAIR: I assume she was there for some months. Did you ever attempt to talk to the people there about whether you could visit her or talk to her, or were they simply doing what the father had told them to do?

WITNESS C: I approached one of the people there when I went over on one of the visits. I actually went into the administration centre and asked if I could see her. They asked my name and they asked her name and I was told that I could not see her. So then I went outside and waited.

CHAIR: So they were following the orders of her father in effect?

WITNESS C: I do not know who gave them those orders but I would assume that was possibly the case. There was definitely a concerted effort for her not to see me, for us not to meet, for us not to talk. Whether that was generated by her father or other people - I would assume that it was mainly her father in that instance.

CHAIR: Did you ever come across other fathers visiting the young women there?

WITNESS C: No.

CHAIR: But you assumed that this was something that was in order for you as an individual?

WITNESS C: It was a clandestine thing that we were doing. It was a secretive thing. Her father could not know. My parents knew where I was going: They dropped me over there, because I did not have a licence at the time. They would drop me there, go for a drive and then pick me up. So they knew exactly what was going on but her parents did not.

The Hon. Dr A. CHESTERFIELD-EVANS: In your submission you state that it was difficult for you to have your name placed on your son's birth certificate. Can you describe your experience to the Committee?

WITNESS C: Yes. After this had all happened and it sort of died down I used to think about him and I used to think about what was happening. Then the adoption law changed in the 1980s or 1990s - I cannot remember - and I was able to get a copy of his birth certificate. But the first hurdle I had to cross was my ex-girlfriend. She actually refused. I contacted her. She was still living in the same house. I quietly informed her that I wanted to trace the baby and she told me point blank that she was not interested and she did not want to go any further with it and she would not put my name on the birth certificate. I requested her to put my name on the birth certificate so that I could gain access to it. She refused. I then went through the normal process with Births, Deaths and Marriages.

I put a submission to her to have my name registered as the father. I believe what happened was that if she did not make an objection to it within so many days, weeks or months - whatever - my name would automatically be put on it. But I did ring her again because I was very strong in my feelings about wanting to be registered as the boy's father. I told her that it would not end there. If she did not acknowledge that I was his father, I would seek legal assistance and take the matter further. I did tell her that I was not giving up this time. By that time I had matured a little bit and I knew that I now had some rights and I knew that I was the father. I knew there was no-one else. I knew that I could get my name on the birth certificate. She relented and said, "Yeah, okay" and she did that. I promised her at the time that I would not bring her into it in any way, shape or form if I were to approach my son once I found out where he was and I would not inform him of anything such as her name or address.

I did not know what the process was at this time but I knew that I could become registered as the father. I knew that once I was registered as the father I could then apply for the other certificate which gave his new name and I knew I could contact some agency which would contact the young boy on my behalf and let him know of my existence. I applied for the birth certificate and I have got that. I was then faced with the situation of whether I should go to the next step. Unless you are faced with it I do not think you really know what it is like. It is okay for you people to be sitting there listening to what I am saying but you have got the birth certificate in your hand, you know his name is Craig and then you want to go a bit further and you want to find out if he is alive, if he is married, if he has kids of his own. Then you start to think about it and you wonder what he was told as a baby. What did they tell him? Did they tell him that his father was a bastard and did not want him? Did they tell him his mother was some whore off the street who did not care about him? What was he told? You do not know.

You have to put yourself in the position of the new parents, his real parents now. You have got to say to yourself: would I want somebody coming along and taking over as the father of the child that I have reared from when he was this big? You would not. You probably told the child things that maybe are not true, that do not really reflect the true situation. Because those are his parents the child has come up with that perception all his life. I thought to myself: If I go back now and introduce myself via a letter and say, "Hi, I am your real father and if you want to contact me you can. I would be very happy to talk to you and this is what really happened," he may have a completely different perception. He may then say, "Stuff this bloke. I don't want to know him." How do you think the father would feel then?

It is very hard for me to explain. You are faced with a whole range of emotions. It is very hard to come to terms with. I have one situation now staring me right in the face. I know that somewhere out there is a boy that was part of me, and I am going to have to live with that for the rest of my life because if I contact him now - this was the decision that I came to - I could stuff his life up completely. I may not. He may be looking for me. I do not know. But I am not prepared to take the risk. I have already stuffed it once by not following through in the first instance but I am not prepared to take the risk in following through any further now and make any more emotional upset, anguish or whatever feelings he may have about it.

I have decided to just leave it the way it is and not contact him, which is sad because I now have to go through the rest of my life wondering whether he really does want to contact me. I wonder whether he wants me to contact him. I have got to live with the misery of having my son, my flesh and blood, not knowing that his father did love him and did care about him. I have to live with wondering whether he is alive or dead. Who knows? I do not. And I cannot bring myself now to go that extra step. Because of all the uncertainty, I just do not feel that I want to go that extra step. Even though I want him to know that I did not desert him and that within my power I made every effort to look after him. But I do not know what other people have told him. I just do not know.

The Hon. Dr A. CHESTERFIELD-EVANS: If he were a secure person it would not bother him and if he were an insecure person he would probably be glad to see you. Could you look at it like that?

WITNESS C: I could. If he was like his father he would probably accept it, but if he was like his mother - you have to understand that the baby is part of the two of you. His mother is a very insecure person. I do not know whether it is as a result of this incident in her life. All I can say is she is very insecure. If he has those sorts of traits I do not want to visit on him any other emotional turmoil in his life. I think that I am doing him a favour now. As I said, earlier in the piece I tried to get access to him and I nearly went through with it. But then I thought I may not be doing the right thing. I think I am doing him a favour now by not pursuing it. He has gone through the emotional turmoil of knowing that he has not got a father and a mother. He knows that. He knew that probably from 10 years of age when his real parents told him he was adopted. He has now come to terms with that.

The Hon. Dr A. CHESTERFIELD-EVANS: You assume that.

WITNESS C: Yes, I assume that. Can you assure me that he would feel differently if I did contact him? Can you assure me of that?

The Hon. Dr A. CHESTERFIELD-EVANS: I am not in a position to make assurances.

WITNESS C: No. I have to do what I feel is right for him. It does not matter about my feelings or emotions. I have had to live with it since I was 19, and I will live with it because I am a strong person inside. But I do not know what he is like. Is he as strong as me? If he is he will live with it.

The Hon. Dr A. CHESTERFIELD-EVANS: Has the adoption of your son affected you in your relationships with your family?

WITNESS C: No. I have four sons and a wife, and they all know about this. I told my wife when I first married her that I had another baby out there somewhere because I did not want to hide anything from her. She accepted that. My oldest son, who is now 28, knows, and my youngest son, who is 20, knows. They all know, and they all know that I am here today as well. Even though I am involved, it is something they were not involved in, so they do not talk to me about it very often. I suppose that is right. One of them did say to me one day, "Where do you think he is now?" I cannot answer that question, I do not know.

The Hon. H. S. TSANG: What measures do you consider might assist people experiencing distress as a result of past adoption practices?

WITNESS C: We all talk about systems, procedures and policies, but in this instance a clearly defined policy or procedure needs to be set up. If this Committee does anything about what has happened to me and to other people, I hope that something good comes out of it. By that I mean a defined policy so that people know exactly where they can go for help, who they can see and how they can get that assistance. That is all I can say on that. I hope that is what happens. I had second thoughts about coming here. When I first heard about this I inquired to find out what it was about. I thought about it and decided that I did not want to get involved, it was just another government bullshit exercise - excuse me.

Then I thought about it and decided if people like me who have been affected by these things do not get involved nothing changes. There will be other young ladies and other young men, probably hundreds of thousands, who will go through the same experience that I have been through. The only way that things can be changed is for us to get up and say something. I do not know

whether what I have said today makes any difference in the overall scheme of things. I just hope that a positive result comes out of it. That is all I can hope for.

CHAIR: We have received a great deal of submissions from mothers, but very few submissions from fathers. You are unusual in that respect.

WITNESS C: My wife reckons that too.

CHAIR: It is a pity that you did not hear the early evidence from Centacare Catholic Community Services representatives who spoke about the way in which procedures and attitudes have changed over the years.

WITNESS C: I hope that is the case. I know that the questions have finished, but, in the early days, it was really a situation of - and I hate to be crude - "Piss off Steve, we do not want to know about you. Your name is not on there." Originally the birth certificate, which you would have access to, stated "father unknown", or something like that. That is the furthest thing from the truth. It is wrong that the father had no rights. In actual fact, I believe - and I have thought about it for years and years - that the father had fewer rights than the mother. I really do. The mother had some rights because she was there and had the baby inside her. But the father was a nonentity as far as most people were concerned in those days. With the attitudes that prevailed then, if a young lady got pregnant she was virtually classed as a slut. That was the furthest thing from the truth in our case. People fobbed it off because they thought it is only another brat in the world, only another young lady who has not got the right morals. I feel that is what it was like in those days.

CHAIR: Thank you very much for coming and telling us about it.

(The witness withdrew)

GEORGINA KATHLEEN TAYLOR, Manager of Registration Services, New South Wales Registry of Births, Deaths and Marriages, 191 Thomas Street, Haymarket, sworn and examined:

CHAIR: Ms Taylor, In what capacity are you appearing before the Committee?

Ms TAYLOR: I am appearing in my official capacity.

CHAIR: Did you receive a summons issued under my hand in accordance with the Parliamentary Evidence Act 1901?

Ms TAYLOR: I did.

CHAIR: Are you conversant with the terms of reference of this inquiry?

Ms TAYLOR: Yes.

CHAIR: Do you wish your submission to be included as part of your sworn evidence?

Ms TAYLOR: We did not actually make a submission formally to the Committee, but we have been asked some questions arising from other witnesses, so we are replying to those.

CHAIR: Do you wish to make a statement or would you prefer to proceed straight to questions?

Ms TAYLOR: I think straight into questions is fine. The first question is a fairly introductory one anyway.

CHAIR: Could you explain to the Committee the role of the Registry of Births, Deaths and Marriages in the provision of adoption information and documents?

Ms TAYLOR: The role of the Registry of Births, Deaths and Marriages in adoption arises because of its function of recording all legal adoptions in New South Wales. That is how we come to have a record in the first place. When an adoption under, these days, the Adoption of Children Act is approved or ordered by the Supreme Court of New South Wales, it sends to the Registry a memorandum of adoption, which is, in effect, the order, which gives both the pre-adoptive information plus the names of the adopting parents. At that point if the Registry is holding the original birth record for the child - so that is a child born in New South Wales - the original record needs to be noted and is then closed as part of the adoption register and a replacement birth entry is made reflecting the details of the adopting parents. That is done under the Births, Deaths and Marriages Registration Act as a consequence of the adoption order.

That then means we have a record of both information sides of the adoption. Once the Adoption Information Act commenced operating in 1991 we were then able to provide applicants, either the adopted children or the parents of the original birth entry, with the other side information, provided the child would have been at least 18 years of age at that time. That is how we first became involved in it. When the Act first commenced we in fact were the first point of contact under the Act. So, we took the initial application for adoption information. Since July last year that first point of contact transferred to the Department of Community Services, but we still provide the original or amended birth certificate, depending on which applicant, for any applications under the Act at that point.

The other role we then have as a prescribed information source under the Adoption Information Regulation is that in addition to providing the original or adoption details, we can also undertake further searches of marriage and death registers. Because in New South Wales we cover births, deaths, marriages, adoptions, stillbirths and, these days, change of name as well, we have other useful information about individuals' lives. As such, marriage and death search information is prescribed under the adoption information regulations as information which can be searched. This will often happen particularly if the person being sought is either the mother of the child who was adopted or is a female adopted person. Because the convention in Australia and in many other countries is that women often change their surnames on marriage, tracing a female is often more difficult.

Often one of the common searches we do is a marriage search of either the mother from the original registration or of the female child. Likewise, we will also undertake death searches. We can also do a marriage search for male children or birth fathers, but it is less likely that they have changed their name. Often the applicant has the name they are after and they are using their other avenues rather than coming back to us. That is where we actually fit into that path. We are one of the prescribed information sources.

The Hon. H. S. TSANG: You may have answered part of this next question, but could you briefly comment on the introduction of the Adoption Information Act 1990 on the availability of documents to people affected by adoption? Are you able to comment on the impact this Act has had on mothers and fathers of adopted children?

Ms TAYLOR: Prior to the Adoption Information Act 1990, which commenced operation in 1991, the parents of a child who had been formally adopted were unable to obtain identifying information of that child's new identity. The Adoption Information Act enabled that to happen. The other side of the equation is that children who were adopted had previously been able to access their original birth certificate, but only with approval, which was then delegated to the Director-General of the Department of Community Services or its predecessors. In fact, that generally only occurred when the birth mother was deceased. Really, the Adoption Information Act removed the need for separate consents. It simply came in on the basis that once the adopted person

had reached, or would be presumed to have reached, the age of 18 either party could seek information.

New South Wales legislation is slightly different from that in other States. In some of the States only the adopted child has a direct right to the information and to contact. The parents can search, but the consent of the child must be found first before information is given. The New South Wales Act, having learnt from the experience of many States, tried to give equivalent rights across both sides of the adoption. Certainly, it had an enormous impact generally. It changed the way in which people then dealing with new adoptions regarded adoption, because it was no longer going to be closed, and certainly there had been the early start of open adoption-type relationships prior to 1991. Also, it meant that the results flowing from that certainly were reflected in the Registry's workload in regard to the Act early on.

We were dealing with an enormous number of applications in the first couple of years because this State had adoptions since around 1924 and is heading for 103,000 adoptions probably by the end of this year. By the time the legislation came in we were probably already up to 100,000 adoptions in the State and parents and adopted children, as long as they were at the point of 18 years since the birth of the child, could apply for information. There were waiting lists almost formed and people expecting to operate under that legislation. That has been a major change.

The Hon. H. S. TSANG: The Committee has heard from a number of women that adoption consent forms had been signed either under duress or by a person other than themselves. Is the Registry aware of any unethical or unlawful practices involving the signing of consents for adoption?

Ms TAYLOR: The Registry actually never sees or partake in the consent process. The Registry first hears of an adoption when the memorandum comes from the Supreme Court confirming that the adoption has occurred or we would otherwise have originally registered the birth, but we would not necessarily know it was of a child for which there was or was not an intention to adopt. So in that sense I am afraid we cannot provide any useful comment in either way because we have never been part of the consent process. Probably people from the court and other areas are more expert in that matter.

The Hon. H. S. TSANG: Do you have any statistical information about the number of applications for access to information made under the Adoption Information Act 1990? What proportion of applicants successfully gained access to adoption information?

Ms TAYLOR: Certainly from the time the Adoption Information Act commenced in early 1991 until we transferred the first point of contact to the Department of Community Services effective from 1 July 1998 the Registry had received 17, 573 applications for either the original or amended certificate. Since that time the Department of Community Services issues now a supply authority and we have had 307 applications for original or ordinary certificates. One thing to bear in mind is that that 307 may not reflect the full number of adoption information applications in that last year because the Department of Community Services now issues a copy of the memorandum with the supply authority. Many people still decide they would like to have the original birth certificate - say, an adopted person - and come to us and so are included in that count, but others have got the information they were seeking from the memorandum. So, unless they particularly want it as a birth certificate, they do not necessarily come to us.

All up, we are probably heading for the 18,000 mark. What proportion of applicants gained access successfully to adoption information I guess would depend on what you define as "successfully". We have information on all official adoptions which had gone through the Supreme Court or equivalent, so we have been able to provide some information for all those applicants. Whether it is otherwise a success measured on contact between people or other information sought, we cannot comment on that. But we have had a record for all official adoptions for which a memorandum was issued.

The Committee is probably aware of the Adoption of Children Act formalising the arrangements involving the department, government and courts more formally from 1965. Certainly we have had inquiries from applicants who have believed they were adopted, say in the 1930s, 1940s and potentially the early 1950s. At that stage, many adoptions were organised by private legal practitioners and still were meant to go to the court. It appears that in some cases the papers had not gone to the court, so people discovered later that they had not been officially adopted. Likewise, a mother could come forward to seek post-adoption information and we have had no record of that because it was not a formal adoption at that stage. That is what I categorise as unsuccessful. It is not adoptions that have gone through the court, but people have a belief that there was an adoption.

The Hon. H. S. TSANG: The Committee is aware that some people need to obtain information from the Registry of Births, Deaths and Marriages in more than one State, resulting in additional costs and delay. Are any measures currently in place to assist people seeking adoption information from other States? If not, would it be feasible to establish linkage with other State Registry agencies?

Ms TAYLOR: There are a couple of hurdles we run into. Certainly the registries of births, deaths and marriages around Australia work co-operatively on a wide range of issues. As happens commonly in our federation, it is State by State by Territory agencies all performing the same function but all under slightly different legislation in matters such as that. The registries have come a long way in terms of their ordinary functions by promulgating model legislation. New South Wales was, in fact, the first State to adopt it, closely followed by South Australia, and that has been going around the country.

We are terribly conscious that Australians are a very mobile population and we try to provide as seamless a service as possible. The difficulty with adoptions can be because the services provided by the registries is governed by adoption information legislation, not by our own Act. There are differences between the adoption information regimes of the different States and Territories. In the

example mentioned before, with Victoria, adopted children have rights to more extensive information and documentation than those in New South Wales but parents do not have such rights immediately. The registries have to fit with their own State regime and meet those requirements. We have contacts with other registries and we facilitate people getting in touch with them. Amendment to legislation in other States to make them more equivalent regimes make it easier for adoption searches per se to take place. Clients have entitlements to search a New South Wales adoption in New South Wales but if they are dealing with another State's adoption laws they do not necessarily have the equivalent level of search rights.

CHAIR: This morning Centacare mentioned extra difficulty and cost if a marriage occurred in another State and a search in New South Wales came to a dead end, and clients have to go elsewhere to obtain information about change of name. Can you comment on that?

Ms TAYLOR: It certainly is an issue, and it is an issue for the Australian population generally in a whole heap of family matters because it is a State-by-State system. It is where the event occurs rather than one record for one person in Australia which could track that a person was born in Tasmania, married in Queensland, had two children in Adelaide, maybe got divorced in Canberra, then remarried in Canberra and maybe had another child in Western Australia. That is probably a fairly extreme example of moves, but we have found that up to 20 per cent of people with whom we are dealing may have moved from their State of birth by the time they married in their mid-20s or so, and that is fairly extensive. For that reason the model legislation looks at forming reciprocal arrangements. There is power for those arrangements to be entered into by the respective Ministers. Every State is trying to computerise its registers and indexes as fast as possible.

The difficulty is that in this computer age we all think that everything should be on computer and we should be able to tap down the line and find information but, as yet, not everything is computerised. New South Wales and Victoria have fairly extensive computerised records but many of the other States do not; they are still relying on book indexes and microfiche indexes and things like that. Certainly there are moves to improve it generally and to assist people searching for family following adoption or fostering and a wide range of separations. If there is a dead end to a search in New South Wales, we try to encourage and assist people to search nearby States or relevant States or tell clients to look for other information they might have. For example, if an adopted child had obtained information about his mother from the Centacare file and it indicated that she had been born either in Geelong or in Albury and had been schooled in Victoria, or something like that, if it was a dead end for a marriage search in New South Wales, the next place to look would be Victoria. We would place them in contact with the adoption section in the Victorian Registry. I am sure things can be streamlined, but it is a matter of individual legislation.

The Hon. H. S. TSANG: Do you have any information about the number of people who have a veto on contact and the provision of information about themselves? In your experience what is the effect of a veto on an application?

Ms TAYLOR: On our current data as at 10 June 3,994 vetoes have been recorded. A veto under the Adoption Information Act 1990 is against contact, not against information. If the applicant is made aware that there is a veto, and signs the undertaking not to contact, they will still be provided with the information on their origins or the new identity of their child. The person placing the veto is also made aware that it is only about contact, it is not about information. Obviously it is distressing for an applicant to discover that there is a veto in place. People seek information either about children who have been adopted or about their birth parents at various stages in their lives. We have some applicants who, on their eighteenth birthday - some with their adoptive parents, others who have waited for the adoptive parents to die - come in and make an application and want to track everything down very quickly. Other people search when they themselves are having a child. There is a whole range of reasons. Sometimes it has taken them many years to decide to search, and to then face a veto can be very distressing.

The Department of Community Services, on receiving an application, makes one approach, I understand, to the person who has lodged the veto to see if that person wants it to remain current. One of the difficulties with the veto system is that it fixes technically a permanent veto. It is not a sunset, renewable type of veto as I understand operates in some countries. In effect, the chance for people to reconsider is when an application comes in, because they are contacted to see if they wish to confirm it. I understand that in those circumstances a large number of vetoes are then removed and the contact occurs. It may be that the person who lodged the veto, for example, lodged it around the time of the commencement of the Adoption Information Act, which is now eight years ago, and their life circumstances may well have changed. The mother may have told her new spouse or children. A child may have got through university exams, or had a child and feel keen to know about his or her heritage, so the reason for placing the veto may not be as important at that time.

Certainly people are encouraged, at the time of lodging a veto, to give an explanation - a letter or a message - and the reaction from clients seems to be easier. Explanations are not always given, but applicants faced with a veto try to understand why, and their level of distress can be affected by someone presenting a reason. It may or may not appear to be sufficient but at least it gives them a clue. They have not got the opportunity to sit down and discuss it with that person, which they could otherwise do. In 1996 the Adoption Information Act was amended in an attempt to have a less permanent veto by providing for an advance notice system. That system provides for a delay period, a notice period from when the application came in to when the information goes out, during which time the person being sought would be contacted at the address provided. There have only been 21 of those registered since 1996, but that may be because they were more appropriate at the earlier stage when people were considering a veto or nothing. It is at least an option that gives people breathing space to know when an application has been made and time, if need be, to tell people in their lives who are likely to be affected, rather than an all-or-nothing response. That is certainly in the minority of nearly 4,000 vetoes out of 102,000 adoptions.

The Hon. D. F. MOPPETT: You said that there were 17,500 applications for information since the Adoption Information Act and there were 102,000 adoptions. Given that there are at least three principal people, and probably two other very important people, involved in the 102,000 adoptions, there could be 300,000, 400,000 or 500,000 people involved, so 17,500 is not such a significant figure.

Ms TAYLOR: I certainly agree with you on that wider number of people significantly affected. But under the Adoption Information Act the people able to actually apply for the information out of that collection of people are the child and the registered parent - usually the mother more than the father. Up until the amendments to the Adoption Information Act in 1996 it was really very difficult for fathers who were not recorded on the certificate or acknowledged as the father at the time to make an application. To that degree, in terms of the people who could actually apply, it is probably a bit under 200,000 because some of those who were later adoptions will not yet have reached the age of 18.

The Hon. D. F. MOPPETT: You referred to the Law Reform Commission's review of the operation of the Adoption Act. One of the reasons for that review was that the veto operated differently in other States - if a veto was registered, no information was available, whereas in New South Wales the information was given, although it was not a veto as such but a registration of no contact.

Ms TAYLOR: That is right.

The Hon. D. F. MOPPETT: In fact many people felt that there was no point in registering a no-contact, because once information was obtained about a person's name it was not very difficult to find out the person's whereabouts and to make contact, whether the person wanted it or not.

Ms TAYLOR: Certainly I agree that at the time the legislation first came in that was a concern of many people, and it may have led to more vetoes not being lodged. However, as was borne out in the Law Reform Commission's review, it is important to note the minimal number of breaches that have occurred - I think it is fewer than one could count on one hand - given the time it has been operating and the number of applications made subject to a contact veto. The respect for it has been quite amazing compared to what people originally thought when the legislation came in. There is also the issue of people not knowing that they are adopted. Again this is probably more the case in older adoptions than those in, say, the last 20 or 30 years. So, as well as people perhaps thinking it is ineffective, a certain proportion of those 100,000 or so people do not know that they are affected by adoption. We still hear of a reasonable number of people who have just found out that they are adopted. They find out either because they are approached or their adoptive parents or their surviving adoptive parent might die and in the paperwork they find a reference to the fact of their adoption. They often tend to be much harder cases, because in that age group if their adoptive parents have died their birth mother, who might have been 10 years or so younger, is also likely to have died, and they may be only starting their search in their fifties or sixties.

The Hon. D. F. MOPPETT: The Committee has been informed that prior to the commencement of the Adoption Information Act in 1990 it was possible for mothers to obtain a copy of the original birth certificate, with the approval of the Director-General of the Department of Community Services. Do you have any information about how many mothers obtained information in this way?

Ms TAYLOR: It certainly was possible. The vast majority of those applications seem to have come from around 1981 onwards. We have not done a count of the exact number because there are many pages of them. However, as an estimate based on the number of entries per page and the number of pages, I would say that more than 1,000 of those certificates were issued. The other thing to note about that period prior to the Adoption Information Act is that the adopted person could also obtain his or her original birth certificate, again with the director-general's consent, but only where the natural mother was deceased. So that was the adopted person actually discovering information that was otherwise closed to him or her, but again in the circumstance where he or she could not talk to the mother to find out other information. In the case of the parents obtaining the original birth certificate, really they were only obtaining information that related to themselves and the birth; the information did not identify the child later on, which is a significant difference. So until the Adoption Information Act came along, they were not able to get identifying information in any form.

The Hon. D. F. MOPPETT: Apart from the Registry's obvious vast resources, what avenues are there for people to obtain information and documents about adoption?

Ms TAYLOR: I presume that you mean about their own adoption, for their individual case?

The Hon. D. F. MOPPETT: Yes.

Ms TAYLOR: As I mentioned before, the Registry falls into the adoption picture as a prescribed information source under the Adoption Information Act. Certainly if an adopted person was born in New South Wales, we should have that person's original birth registration for him or her to receive information from, and can then undertake searches for that person based on that information. But in terms of details about the adoption itself, the Registry is more useful in tracking down details of the origin or possibly tracing people now. It would firstly refer applicants to a person's adoption file, whether it be a Department of Community Services file or one of the agencies' files. Obviously, it is more difficult in the period before the Adoption of Children Act, because one is often then dealing with private papers with solicitors and things of that nature, which people will not necessarily be able to find or have access to.

What can assist in those cases is one of the other sources, which involves access to documents from the Supreme Court file about the adoption. That may include information relating to the consent and information relating to the mother of the child. There may be some information relating to the father, although unfortunately in earlier adoptions reference to a male party occurred only if the mother of the child was married but to a person who was not the father of the child. He in fact had to indicate that he was aware of the birth of the child and the adoption. So in those earlier times a husband had more rights than a father. This was before the concept of illegitimacy was removed and before married women could keep separate property.

In effect, it was the married woman making a legal decision, so the consent of her husband was required. Other sources include the hospital record about the birth, which is also prescribed information, and obviously any of the agencies that were involved in the adoption, for example, the church and so on. The Department of Community Services will usually link those together and get the information for people. However, one of the other important sources to bear in mind is if a person was adopted after having been made a ward of the State, so the person may have been a little older when adopted, although some children are made wards as babies. Their ward file is also available, with information on it. In terms of the actual adoption and the history of the birth, those are the main sources.

The Hon. D. F. MOPPETT: Could you explain to the Committee the process by which reunions between birth parents and their children are organised? Does the Registry have a role in organising the reunions, or is that basically the responsibility of other agencies?

Ms TAYLOR: When the Adoption Information Act came into force in New South Wales there was a fair degree of self-help and self-responsibility provided in it. Part of that was providing equal information rights to the parents and the children at that point, rather than more to one group than the other as happened in other States. With regard to reunions the Registry has a role as an information provider, and as such we can facilitate that information. It is generally the other agencies, which include bodies such as the Post Adoption Resource Centre, which I understand you heard from last year, which receives funding from the Department of Community Services and specifically undertakes mediation services and acts as an intermediary to assist us with reunions.

In some cases, and certainly outreach cases - which may be unusual because it involves siblings or medical matters or other things - false information may have been provided or a birth mother may have used an assumed name at the time. The Family Information Service also makes outreaches and arranges contact. A large number of very good support groups, including Jigsaw, Vanish, in Victoria, Adoption Triangle and Origins, also provide information. At the time that people apply for adoption information in New South Wales they are provided with a search guide, which, as well as explaining how a person can apply to our organisation for searches, and describing how to go about obtaining hospital records etc, also sets out contact lists for the various support groups, information about information evenings run by the Department of Community Services and those sorts of resources.

The Registry does not have specialist social workers or counsellors. We are very good searchers and very good information managers in that sense; that is our expertise. The adoption staff demonstrate, I believe, a great deal of compassion in dealing with our clients. As is often the case in these sorts of areas, the first contact a person might have is with a clerk working for a department or organisation of some kind, perhaps just making an inquiry to work out if he or she wants to proceed further. We often deal with people in those initial stages. We frequently give advice or prompts to information in the search guide and other places, which the person might have overlooked or forgotten about or had not had emphasised to them, so it is more as a supportive role. We also provide search assistance to agencies such as the special search service that the Salvation Army operates. We provide similar services in relation to missing persons. Those organisations then go about being the mediators for contact with people.

The Hon. D. F. MOPPETT: Would it be fair to say that you are policy-neutral; you are simply the information provider?

Ms TAYLOR: Yes. Obviously, we are very pleased when they happen. Often clients ring up and thank us for helping them obtain a marriage result. We remind people that the electoral rolls and the phone books are there, not to forget about them. One of the things that can happen is that the Registry, and other resources that people can go to, have good information, but they cut out at a certain point. We only know about people when they are born, when they are having their children, and then ultimately when they die. So there is a period from their late thirties or forties through until the end of a hopefully long and healthy life where we know nothing about them necessarily. That does not mean that they are not in existence; it means that their names can be checked in the phone book or the electoral roll, or people can talk to the Post Adoption Resource Centre and other places where they find matching information and can make approaches on their behalf.

The Hon. Dr A. CHESTERFIELD-EVANS: The Committee is aware that during the period 1950 to 1998 there were significant changes to society's attitude to adoption and single mothers. Are you aware of any background issues affecting the pattern of adoption during the period under review?

Ms TAYLOR: Certainly the period under review, being from 1950 to 1998, is a very big period and does see a lot of social and legislative change. The key changes from the 's point of view include the Children (Equality of Status) Act, which has now changed to the Status of Children Act, which did several important things. It abolished the concept of illegitimacy in New South Wales and made it easier to record a father on a birth registration. If he had a maintenance order against him for maternity costs or other costs, that could be used as evidence to have him recorded as the father. In the past, he had to actually come forward and

acknowledge himself. So it opened and broadened that range of avenues. That level of recognition of court and other documents has expanded further with our 1996 Births, Deaths and Marriages Registration Act, by which we can either make a legal presumption, which is like the old one arising from marriage, or have other things like court findings. We can use that as corroboration.

The other big changes are practical, legal changes - for example, the marriageable age under the Commonwealth Marriage Act. Up until 1973 a person had to be 21 or have his or her parents' consent, and that applied to both the bride and the groom. So if either side could not get the consent of his or her parents, they could not marry. Certainly people had the option to go off to court, but frequently they felt that they did not want to take it to the local magistrate, who would then know their business. For example, the girl may have been pregnant and wanted to marry, and that could cause a lot of difficulty. We have drawn some statistics. In 1976 that age dropped to 18. The median age of marriage for a bride was 22.2 years, half were younger. In 1996 that age rose to 27.5 years; that is a very major shift.

Likewise, the average age of women having their first baby has shifted dramatically from the former 24 years. The group having children at age 19 and younger has been overtaken by the group having children at ages 35 to 40. The availability of terminations or contraception has had an impact, and the birth rate has been falling consistently Australia-wide. The pill came into existence in the 1960s, but at first it was prescribed only to married women. It later became available for women who were engaged to be married, but given to them only the month before they were married. Basically that was the same as giving it to a married woman. The family planning clinics were not established until 1972 or 1973. It has taken longer than we thought for the impact of these provisions to be evidenced. These days there are less than 400 adoptions a year and the vast majority are of overseas-born children.

CHAIR: How many children born in New South Wales are adopted?

Ms TAYLOR: In the last year it was probably about 60. There are a number of step-parent adoptions, but they are a lot less than they used to be. A significant chunk of adoptions was by a step-parent in an attempt to give a child legitimacy, before the legislation was changed. Obviously unmarried fathers did not have the right to say yea or nay to an adoption at that point. Also there were children with disabilities who formed part of the group of older adoptees. With new babies, the vast majority were overseas born.

The Hon. Dr A. CHESTERFIELD-EVANS: Could you explain the standard practice of recording the father's name on a birth certificate? How has this changed over time? Was there a reluctance in the past to record the father's name if the mother was unmarried?

Ms TAYLOR: I would not class it as a reluctance; it was actually legally impossible, legislatively impossible. That may have been a reluctance by Parliament or the Legislature, it was not a reluctance by our organisation. The most common presumption used in paternity is the presumption arising out of marriage, which would basically allow the father's name to be included on a birth certificate if the mother advised it and they were married. The marriage can be traced and he is presumed at law to be the father, unless other evidence is raised. Legally, unless the father had acknowledged that he was the father, either on the birth registration form or subsequently, he could not be included on the birth certificate. It has become somewhat easier these days but, in general, we still require the father to sign. They do not have to do that by way of statutory declaration. As long as both mother and father sign that is okay.

Likewise, with the change in society attitudes - the father may not have known that he needed to do that or the mother may not have been sure of it - they needed to find a justice of the peace. The father may have been embarrassed if the justice of the peace was the local chemist or doctor; that could have made a significant difference. A justice of the peace was not so easy to find in earlier days. Last year 26 per cent of births were to parents who were not married to each other. That is the highest it has ever been and is up from the period of peak adoptions in 1972-73. However, the percentage of fathers being named on certificates now is as good as, if not better than, in those days, because even when the parents are not married many fathers acknowledge paternity. In cases of adoption, probably 2 per cent or less include the birth father's name. That is generally when the mother or father has died and the child is adopted by a family member. Another factor that has assisted in having fathers placed on birth records, in cases where they do not come forward, is the encouragement for child support. More likely this occurs in evidence heard by courts or equivalent in findings made to determine the father. We can act on the those findings. DNA is now available. Orders can be made under various Acts to have a DNA test performed. If a father is determined under that Act we can include him on the certificate.

CHAIR: When you say "can" do you mean "must"?

Ms TAYLOR: If he is proven to be the father, and that test is 99.97 per cent accurate, and a party to that information brings it to us we will record him. But we need to know that the test has occurred.

CHAIR: With court decisions, does the information automatically flow through to you and you automatically add it?

Ms TAYLOR: No, it does not. It comes down to a legislative issue. Most matters relating to children are handled under the Family Law Act, including whether the children are born to a married couple or otherwise. The courts are experienced in dealing with those matters. The difficulty is with a State Act of Parliament we cannot compel orders made under a Federal Act to come to us. We state openly that we will recognise them and provide, for example, for the District Court to make orders, but no-one goes to the District Court for a paternity finding. I think there has been only one. It is far more logical to use the other court, which we recognise. That does mean we cannot require that orders come to us. The Family Court and the magistrates court work under the

Family Court and try to make sure that orders are referred to us and encourage parents to send matters to us. But we cannot guarantee that they always come in. These days, the social security system, et cetera, generally wanting to know the father, tends to mean that we will know about it more often than not. The mother will come to us with the evidence so that the father can be included and is then liable for maintenance.

The Hon. Dr A. CHESTERFIELD-EVANS: What proportion of original birth certificates include the name of the birth father of an adopted child?

Ms TAYLOR: Probably 2 per cent or less.

The Hon. Dr A. CHESTERFIELD-EVANS: Of the older ones?

Ms TAYLOR: Yes. With recent adoptions more often the father is known, but that does not apply with overseas-born children because it depends on what happened in that country. The majority of adoptions of Australian-born or New South Wales-born children in the past five, 10 or 15 years, has been by a step-parent. In those cases the original father's name would have been on the certificate. In some situations the mother has formed a new relationship, and wishes her partner or husband's name to go on the certificate. We advise her that there are provisions to add the father if he is the biological father. If the mother says that he is not the father but she wants his name included, we tell her that the only way his name can be added is by way of adoption. Those adoptions have to be approved by the Family Court, so they are unlikely to happen. People tend to go for a change of name rather than a formal adoption.

The Hon. Dr A. CHESTERFIELD-EVANS: If the father has signed a birth registration is it a requirement to gain his signature for consent to adoption?

Ms TAYLOR: If he had signed the birth registration form and was able to be added to the certificate; we do not determine the legalities of adoption or otherwise. It is probably best for the Supreme Court to do that. As far as I know a birth certificate is always provided as part of the material that goes to the court with an adoption application, because it has to be established that there is a child to be the subject of the order. If his name is on there I imagine that the court is aware of the consent. As far as I know with the extended view of the rights of unacknowledged fathers, at certain times declarations and affidavits state who the father is, or what the circumstances were. In that way the court is aware that he has been appraised or otherwise. The court would be the expert on that.

CHAIR: The Committee was told that in some cases the name given to the child by the birth mother was initially recorded on the original birth certificate but at a later stage it was ruled through and replaced with the word "unnamed". Are you aware of cases where this occurred? Can you describe the circumstances in which that would happen?

Ms TAYLOR: It is important for me to make a distinction. The birth certificate is issued after registration. If a name has been on a birth certificate that will not be changed to "unnamed", because the name would have been registered. I presume you are referring to the mother naming the child whilst at the hospital, or in the mothers home, or whatever the circumstances were, and that name appearing on the birth registration form. That form is lodged with us to effect the birth certificate, and that name is recorded by us. I have not come across a case of a form being received with a name on it and then being changed to "unnamed". If we receive the form with a name we register the birth with that name. However, I could understand that at the time of adoption if there was a variety of paperwork to be signed, it may have been that the child's name was placed on one and the mother could have presumed it was on all of the paperwork. If the name had not been placed on the birth registration form by whoever was assisting her, it would not get to us and we would not know about the name.

At the Registry, in order to facilitate the adoption information later on, several things may occur. Firstly, if the child is unnamed and the mother can complete a declaration as to her intention of the name of the child, we will add that to the certificate for her. Secondly, if a father comes forward we do all we can to facilitate his name being included on the original record. He may have wanted to do that 25 years ago. If we can corroborate his claim we will add it. For example, the mother may have written his name, but he was not available to sign; he may have been named by her in a report by a social worker; he may have had a maintenance order against him; or he may have had a carnal knowledge order against him. Years ago there were many prosecutions for carnal knowledge involving a girl of 15 and a boy of 17- the boy was charged with carnal knowledge. If he can turn up with proof we presume he is the father and we can fix the record. That means that adopted children have the chance to find information about both parents, which they otherwise often do not have.

CHAIR: Can you explain the process by which parents and children affected by adoption gain access to original birth certificates and other documents? What costs are involved? Can you suggest any ways to simplify the processes involved? Do you have any other comments to make about access and costs?

Ms TAYLOR: As of July last year the application for adoption information goes to the Family Information Service of the Department Community Services. They issue the supply authority, which in effect is proof that someone has been a party to a valid adoption and has made a valid application under the Act and can source traditionally closed records from organisations. At that point they can come to us if they wish to have the original birth certificate or, in the case of the original mother, the post-adoption certificate. They present that to us and pay the ordinary birth certificate fee of \$26 and it is then issued to them. In the past the certificate from us acted as that passport. Before July 1998 they came to the Registry, applied for their records under the Act after providing sufficient identification details and the Registry collected the \$26 for its own certificate, which is the same fee that applies

to certificates generally, as well as the fee on behalf of the Department of Community Services. This fee covers the search guide, attendance at seminars, the reunion register and the like.

Clients can now select either a combination of those services or just obtain the certificate on a sliding scale of fees. The Registry has never retained any moneys other than for the individual certificate. People may also come to us for a marriage or death search or potentially for information about their mother's original birth. Again, we are very conscious that these involve long searches. If someone is searching for their mother the minimum search period will be at least 18 years, the likelihood being that she married some time around the time of birth up to the present time. Therefore, the Registry subsidises the cost of those searches; it cross-subsidises from other revenue internally to reduce the cost of the search.

The usual search fee of \$26 includes 10 years and increases in multiples. We will do all the marriage searches and look for de facto names for a \$40 fee. We would not want to bill people for longer searches because of the nature of their search and it means that it is an easy form for them to complete. There certainly can be an issue for people with families that are spread across interstate borders. When the original birth certificate was obtained and people went on searching, they forgot there were other information sources such as their file from the agency or the birth record at the hospital, and this may give clues as to where to search. Details of where mum was born, went to school or other things might give clues as to where she might have gone.

Another difficulty is that more people are in de facto relationships and there is no documentary proof of that event having happened. It can be picked up if they have had a child and we can confirm that there has been a de facto name change, as we would with a marriage, but if there have been no children from the relationship one would not know whether they are calling themselves Mrs Jones because there is no marriage to Mr Jones. However, we are now required to prove our identity more often these days so it is now more likely that she will change her name by deed poll: to prove that, but there have been cases in the past where people have lived for many decades under an assumed name and were never made to prove it. It is then hard to find them because there is no official record of that assumed name. That will be less of a problem in the future, but it was certainly a significant problem in earlier years.

Many matters in terms of fees or what people are entitled to are affected by State legislation in other States and we are certainly happy to facilitate or streamline where possible. We try to point applicants to the most likely States to go looking based on other information they have, but it is a difficulty with our Federal system. We have not got one nice, big, linked database with all of us at this stage. If the Committee needs follow-up information, we would be happy to do some research on applications.

(The witness withdrew)

PATRICIA DOREEN FARRAR, Senior Lecturer, University of Technology, Sydney, affirmed and examined:

CHAIR: In what capacity are you appearing before the Committee?

Ms FARRAR: In an independent capacity as a mother who lost two children to adoption.

CHAIR: Did you receive a summons issued under my hand in accordance with the provisions of the Parliamentary Evidence Act?

Ms FARRAR: I did.

CHAIR: Are you conversant with the terms of reference of this inquiry?

Ms FARRAR: Yes.

CHAIR: You have made a submission. Would you like that to be included as part of your evidence?

Ms FARRAR: Yes.

CHAIR: Do you wish to make a statement or do you want to go straight to questions?

Ms FARRAR: In the interests of expediency I will go straight to questions.

CHAIR: Could you please tell the Committee about the circumstances surrounding the confirmation of your pregnancies in 1965 and 1971, for instance, how old you were, how you felt about the pregnancies and whom you discussed your situation with?

Ms FARRAR: In order to remain focussed I will read from my submission as well. On 14 August 1965 I gave birth to my first child, a boy, at the Women's Hospital, Crown Street. I was unmarried, at school and aged 17. My son was taken for adoption. On 25 June 1971 I gave birth to my second child, a girl, again at Crown Street. She too was taken for adoption. At this time I was a registered nurse aged 23 and in a permanent relationship with the father of my children, whom I later married in 1977. I first attended the Women's Hospital, Crown Street in January 1965, having had my pregnancy confirmed by an unknown doctor whom

I had told that I was engaged to be married. I had been in a relationship for 12 months with my baby's father who, unbeknown to me, was already married.

We had sexual intercourse on 14 October 1964, a date I remember clearly because I had not seen him since the previous school holidays in September. I was on student vacation prior to sitting for my leaving certificate examinations, during which I had morning sickness and fainted. I was ignorant about sex education and the signs and symptoms of pregnancy and attributed my missed periods to excuses such as swimming. I recall my first and subsequent visits to the outpatients department vividly: an interview with a nursing sister, giving a specimen of urine and a physical examination by a midwife, followed by an examination by several medical students. At the latter examination I was always afraid that I would see someone I knew, either an ex-pupil from my former school or the associated boys school, because medicine was always a popular choice for such students.

From the first visit I was never in any doubt that my baby was marked for adoption. Each visit would include an interview with the social worker, who organised social security benefits for me, and this was a sickness benefit followed by a special benefit. When I first visited the social worker I was living in a rooming house at Cammeray and had meagre employment selling art union tickets by telephone. There was no assistance offered about how I would support myself or where I would live for the remainder of my pregnancy. The emphasis was always on this unfortunate experience which would soon be over when my baby was taken for adoption and I returned to normal. I had just turned 17, had recently left school, had led a comparatively sheltered life and had been banished from my home. I was fortunate that in March 1965 my mother realised that I was on my own and took an apartment at North Sydney with me for the next six months. I attended antenatal classes for married women and had to pretend that I was one of them.

However, the date of conception of my baby was never believed and I was always described as being big for dates. Because there was a suspicion that I was lying or expecting twins, I underwent the potentially dangerous procedure of an abdominal X-ray. In May 1965 my very first experience of being in hospital, I was admitted for five days to Waiting Patients in Crown Street. I am unclear why this admission occurred and my hospital records provide no explanation. However, I remember some discussion about weight control and I was prescribed the amphetamine dexedrine. This experience left me in no doubt that the adoption of my baby was a foregone conclusion and there was no way out of the process of which I had become a part. However, there are no records, as I said, of this admission to waiting patients. I felt that I was on a conveyor belt of baby producers from which there was no getting off.

Although I had private health cover I was treated as a public patient until the time came to recoup health fund contributions which the hospital claimed to have paid and my mother subsequently paid after I was discharged from hospital. On 23 July 1965 I was readmitted to Crown Street with what I thought were labour pains because by my calculations birth was imminent. I spent the night in the labour ward and was transferred again to Waiting Patients in the morning. On 30 July I began to have labour pains again and was transferred in early labour back to the labour ward. I spent the next two days in a prenatal ward for single mothers before being transferred to the Lady Wakehurst Home at Waverley on 1 August 1965. On 9 August, again in early labour, I was readmitted to the labour ward at Crown Street but again was returned to the prenatal ward. On 13 August I was given injections of the hormone syntocinon in order to induce labour and at 11.00 p.m. was taken to the delivery suite.

My memory of the labour ward is of a battlefield, the beds containing screaming women separated only by curtains. Despite having been to prenatal classes I was frightened and alone. I was most afraid of being naughty and doing the wrong thing. I wanted to be seen as compliant and as a good girl. I was given a mask through which I could breathe a pain-relieving gas. Finally when the time came for me to push my baby into the world a pillow was placed on my chest so that I could not see my baby. I heard him cry and knew his gender by the deep resonance of that cry. He was quickly removed from the labour ward and I was offered a cup of tea. It was 3.30 a.m. on 14 August 1965. I was transferred to another ward where I awoke later in the morning. I had been given an aperient and passed a very large bowel motion. I was purged. At 11.00 a.m. I was taken back to Lady Wakehurst where I remained for another six days. I will address the next part in the taking of the consent.

In 1971, pregnant with my second child and in a difficult de facto relationship with my children's father, I again approached the social work department of Crown Street for assistance. Despite my protestations that this was a much-wanted baby for whom I could provide, I was advised that I should be sensible. The social work record at the time states that "This unfortunate incident is obviously the result of unresolved conflict from six years previously and that it would be best if an adoption history were taken as quickly as possible." My baby was due in two weeks time after that visit and she was taken for adoption at four days old. I must say that on my admission in 1971 I was a private patient.

I did not go through the antenatal clinic but saw the obstetrician in his rooms in Macquarie Street, and when I asked to have a private room I was told that "These are reserved for our ladies with Caesareans." So my circumstances were very different on both occasions. Certainly, when I had my daughter in 1971 my partner was with me up until the point of my daughter's head crowning. I certainly did not have a pillow put on my chest. In fact, I had what I could describe as a Le Boyer birth. However, my daughter was removed from the delivery suite and taken to the adoption nursery straight away.

CHAIR: You have commented on a number of our questions. In answer to our question about how you came to a decision to adopt you pretty much said that you felt you had no choice. Do you want to enlarge on any of the other questions?

Ms FARRAR: Yes, indeed. I take issue with the wording "came to a decision to adopt" because I do not consider that I had a decision. In the case of my son in 1965 I felt that there was absolutely no other choice. No alternatives were offered to me. There

was no other option. Adoption was discussed at every visit with the social worker. In 1971 when I had my daughter I felt that in the intervening six years anyone could have done anything to me after the loss of my son. I was very vulnerable, perhaps even more so than in 1965. Being reprimanded by the social worker then and being told finally to get on with my life, that I had doors opened to me, it seemed to be an easy choice.

CHAIR: So you do not feel that you realistically received any information about alternatives given the atmosphere you described?

Ms FARRAR: I can say unequivocally that I never received any information about alternatives.

CHAIR: I will hand over to Dr Chesterfield-Evans to talk in a bit more detail about the medication procedure but I want to ask about the signing of the consent form in both cases and what recollection you have, and again how you saw it as part of that process.

Ms FARRAR: The signing of the consent form for my son in 1965 took place in a sort of sunroom at Lady Wakehurst at Waverley. A woman whom I had never seen before arrived and presented me with, as far as I can recollect, only one piece of paper that required my signature. I do not recall her having informed me of what the consent form was about. As far as I was concerned it was a case of "sign here". I remember that there was another mother waiting to sign as well and she and I had been talking beforehand. So it was very much a case of whip in, sign on the dotted line and whip out. As I said, I had never seen this person before and it was not until I received a copy of the consent form that I signed that I was amazed that it actually is called "Preliminary Application for the Adoption of a Child by a Parent", because when I looked at that I thought that if this was the preliminary application surely there must be some sort of final consent form that says "I Patricia Farrar do hereby consent to the adoption of my child." I have never seen that.

The only form I have here has been witnessed by this person, [a consent-taker] whom I had never seen before and have never seen since on the third day after I had given birth to my son. So it was in that very vulnerable postnatal period when I had been given lots of medications, which I will address. With my daughter, I went to a building in William Street in the city. My memories of that are very hazy. I do not know who she was. I know that I had an address and I went there. I got off the bus and walked in and walked out. I remember very little. Again, it was just a matter of "Here's the paper, sign it".

CHAIR: Do you know how long after the birth that was?

Ms FARRAR: I have a copy of that as well. It was some considerable time. My daughter was born on the Saturday night and I signed myself out on the Monday morning after I had her. It was in the vicinity of three weeks following her birth that I did that.

The Hon. Dr A. CHESTERFIELD-EVANS: In your submission you say that during your confinement you were prescribed medications and procedures which were deleterious to your health and to that of your baby. Could you describe these procedures and medications, and do you feel that your medical treatment was different because of your marital status?

Ms FARRAR: Yes. I have already alluded to the abdominal X-ray which I had to confirm the size of my baby or whether I was expecting twins. I am mindful that this period was pre-ultrasound, which almost every woman has these days. However, I was given routinely 200 milligrams of pentobarb every night. I was routinely given 30 milligrams of amylobarbitone three times a day. This occurred from the time when I was admitted to Crown Street throughout the whole of the time I was there and also in Waiting Patients and at Lady Wakehurst. I was also given dexedrine. However, dexedrine does not appear on my medication charts. In fact, there are no medication charts for Waiting Patients or Lady Wakehurst. However, I knew what I was prescribed because I asked a pharmacist friend what the tablets were. It was printed on the label but at 17 I was not privy to the information about them that I am now. But I was told that they were for appetite control, a weight suppressant.

I consider the prescription of amphetamines to a pregnant woman at that stage was certainly deleterious. I was also prescribed stilbestrol to suppress lactation. I have the dosages here. I think I was given something like 60 milligrams per day of stilbestrol. This continued - I do not know; I can only go on my hospital records - for the two weeks post-partum. I was also described as having mild pre-eclamptic toxæmia. This was on the basis of a blood pressure on admission of 120 on 80 and slight protein in my urine. The reason I mention that is because sedatives were often prescribed during those days as a means of reducing women's blood pressure antenatally. This has been an explanation that has been given to me by midwives during my research. I was also prescribed a chlorothiazide diuretic.

However, when my blood pressure dropped to 80 on 60 and 70 on 50 the medications continued unrelentingly. I have that from my hospital records and subsequent information. So I think that, all things considered, certainly in Crown Street I was prescribed medication which I consider would have been unnecessary. I do think that I received different treatment in 1965 because I was unmarried and I consider that I received different treatment from married women in 1971. But it was qualitatively different from the treatment I had received in 1965 when I was also unmarried.

The Hon. Dr A. CHESTERFIELD-EVANS: Do you think you got the barbiturates and the dexamphetamine because you were unmarried? Do you think you would not have got those medications had you been married?

Ms FARRAR: No, I do not. As I said, I was told or have been led to believe subsequently that amytal and pentobarbitone were described as antihypertensive agents for women with PET. On prima facie evidence here I did not have PET and yet I was prescribed these doses. I cannot conclude for what other reason I would have been prescribed those medications. I do not believe

that I was overly anxious. I certainly was not any more anxious than any other woman in my position. Administration of those medications occurred right up until delivery, even to the point where I was given another 400 milligrams of intramuscular pentobarb straight after my son had been delivered, in addition to the oral doses at that time. This seems to be an enormous amount of sedation to be given to a healthy, normal woman who is delivering a healthy, viable baby. I have spoken to other woman who have subsequently delivered children and who were married and who were not given these doses. In 1971 I was not given that degree of medication.

The Hon. Dr A. CHESTERFIELD-EVANS: In the early seventies the amount of sedatives given to women with the most minimum of symptoms, flabbergasted me in obstetrics because they would not have been used in any other discipline. As a medical practitioner at the time I was amazed. I thought the obstetricians were backward. That was an opinion of a student who saw inconsistencies between departments. This Committee has heard evidence that there are differences between married and unmarried pharmacotherapies, if you like, but there has not been any quantitative evidence on the situation. It would not have surprised me personally in the sense that it was a matter of easing the pain, and the sedative was regarded as a good thing, so it was not necessarily given with malice. You may well be right that there was a difference. I am inclined to think that there probably was, but I cannot be any more sure than that.

Ms FARRAR: We need to investigate that further.

The Hon. Dr A. CHESTERFIELD-EVANS: I believe it needs further investigation.

The Hon. H. S. TSANG: Would you please tell the Committee about the reunions with your first two children and the impact this has had on you and your family?

Ms FARRAR: My son knew my name from the order of adoption. He was taken for adoption in 1965 so my name actually appeared on the order of adoption, and his adoptive parents were privy to that information. He was not told that he was adopted until fairly late in his life, whereupon he told his adoptive mother he would like to find me. She was able to give him my name. She knew where I worked. There was a rather strange sequence of events and coincidences. In 1990 he got in touch with the social worker at the Royal Hospital for Women, who was then able to trace my records, get in touch with me and ask me whether I wanted to effect a reunion, which I did. My reunion with my son and his four brothers and sisters was, I suppose, fairytale stuff until October last year, when I received a letter from him, an outpouring of anger, grief, resentment and telling me that no further communication would be appreciated or returned.

When the Adoption Information Act came into effect in 1991, I felt that it was very important for my first two children to know each other because up until that point they may not have known another relative. It was important for me that whatever happened between me and my children, my son and daughter were able to find each other. On the very first day I made an application for my daughter's birth certificate. It was very easy through the telephone book to find out where she was and I crosschecked her name on the electoral roll to verify it. My first-born son made the overtures to her and had the first meeting with her. Subsequently - I was still married to my children's father at that time - I had another son and daughter during the marriage. On the Queen's Birthday weekend in 1991 my four children and their two parents were together for the first time. That was a very important time for me. The reunions with my children allowed me to get out of a marriage which I had been maintaining until the time that I met my children again, which I believed somehow I would.

It was also important that my two children in the marriage met their full brother and sister. The supreme irony is that everyone has different names, despite the fact that we are all so intimately connected. My first son and first daughter have remained in contact. My daughter has found my activism and my attempts at change very difficult to contend with. So when she was married in January this year neither I nor her younger brother and sister were invited to her wedding. However, her older brother was, which I guess is something. The reunion has been both wonderful and heartbreaking. For me it has been a reopening of old wounds. However, it has also been very difficult for my two younger children because they are displaced. My daughter from my marriage is no longer a first born. My daughter whom I lost to adoption is no longer a first born, as she presumed, in her adoptive family. My first son, whose adoptive parents later had a son of their own, never thought that he had any brothers or sisters. So this whole issue has thrown relationships up in the air and they have come down in a very higgledy-piggledy fashion.

The Hon. H. S. TSANG: What measures do you consider might assist people experiencing distress as a result of past adoption practices?

Ms FARRAR: First and foremost, there has to be an acknowledgment from Parliament that, regardless of which political party was in government at the time, the practices of various government departments - such as the Child Welfare Department, Health Department, Department of Youth and Community Services, Health Commission and Department of Community Services - caused subsequent pain and devastation to many people. There should be a fund from which people affected by adoption practices can claim reimbursement for medical and legal expenses. There must be training of specialist counsellors and mental health workers in the specific area of people experiencing distress as a result of adoption practices. There must be free and unlimited counselling for mothers by expert practitioners in adoption grief work. I am not suggesting that these are necessarily social workers, and certainly not social workers who participated in practices in the past.

There must be free access to the records from the Births, Deaths and Marriages and free search and assistance. There should be unlimited funding for support groups run by those affected by adoption for those affected by adoption. There should be a centre for research into adoption and its effects with a flow-on to other areas of family separation and dislocation. There must be a

commitment that the unprofessional, illegal and unethical adoption practices of the past will not be permitted to recur. I do not believe that financial compensation for those people affected by unprofessional, illegal or unethical adoption practices can ever be enough. Too much would not compensate and too little would be an insult. So no amount of money would compensate a mother for the loss of her child. Finally, I would like to see the abolition of adoption as it stands. Other measures that are in place, such as guardianship, can provide for the security of children. With the abolition of adoption, this inquiry and certainly the activism of mothers would not have been in vain.

The Hon. D. F. MOPPETT: Would you briefly describe your doctoral research on adoption? Are you able to describe any of the preliminary findings from that research that may be relevant to the terms of reference of this inquiry? In particular, have you done any empirical research into the differential treatment of married and unmarried mothers and the different regimes of medicine that may have been prescribed to them?

Ms FARRAR: At the outset, I have to say that my study is a qualitative study, not a quantitative piece of research. I have not conducted surveys or interviews with hundreds of mothers. I was given stories, unembellished and unsolicited, from 31 mothers. I chose this particular route because from my study of secondary sources of mothers' stories - I studied more than 300 mothers' stories in various formats - certain themes kept recurring. These were the themes of maltreatment, I suppose, and uncaring practices. They may have been unethical or illegal as well. I had read about these practices occurring in the United Kingdom, the United States of America, New Zealand and here.

I wanted mothers to write their stories about their experiences. What did I find? Of course, I found the same themes resonating, such as refusal to allow them to see their babies. In fact, many nurses have been implicated in actively preventing mothers from seeing their babies. There was other evidence from mothers, who shared their hospital records with me, who had been given large doses of sedative drugs. There are other instances where consent was achieved under coercion and duress - absolute coercion, not just coercion through the withholding of information, which was the case for me. Along with the mothers, I also interviewed midwives about the other side of hospital practice. My conclusion is that while I do not know how married women were treated, certainly I believe that unmarried women were treated in a most inhumane way. Because of the nature of my research I have not done a comparative study between married and unmarried women, so it is a qualitative study.

The Hon. D. F. MOPPETT: One of your key recommendations was the abolition of adoption and perhaps a more active seeking of guardians, for example. From the way you speak to us I gather that you are well read and that you would be aware of the common practice of families becoming the guardian of an orphan child or a child in necessitous circumstances. In that reading, not all of those guardianships worked out particularly well.

Ms FARRAR: Not all adoptions worked out particularly well either.

The Hon. D. F. MOPPETT: You seem to think that is a solution, perhaps in a different social setting to what we learned of it from the nineteenth century, for example.

Ms FARRAR: I have a great problem with adoption in that an amended birth certificate is issued which totally wipes out a child's genealogy. Of course, with guardianship that does not happen. A parent applies to a court for a guardianship order until the child turns 18 and other arrangements can be worked out in terms of access visits, et cetera. That has been compared with open adoption where there are access visits. However, one mother with whom I am familiar sees her daughter once every six months. That is just a mockery, just a sop. The mother is still alienated. She gets to see where the daughter is living, but it is still an absolute mockery. First of all and paramount, a concerted effort should be put into sex education and contraception for young women. Secondly, there should be greater provision for termination of pregnancy without the difficulties that are still involved, which I will not go into because that is another story.

Thirdly, mothers who find themselves with a child and are able to continue their education could perhaps have living arrangements provided for them. Every arrangement should be made so that the child can be retained with his or her mother. In fact, in 1890, an American, Henry W. Thurston said, "There is no reason to separate a child permanently from its mother in order to provide what it needs temporarily." That is a very wise maxim that we would do well to heed. Could I add something? There is an important matter I mentioned in my submission. One of the mothers in my research who shared her hospital records with me found that her baby had been transferred to the Children's Medical Research Foundation Unit, which was adjacent or fairly close to the adoption nursery at Crown Street. She consulted me because she did not know what the hospital records meant in terms of her son.

Her son had been given doses of phenergan which were inappropriate for a three-day-old baby. She was still the legal guardian of her child at that time because she was too ill to sign a preliminary consent to adoption, one of these typed-up documents. It appears that because her son had been earmarked for adoption that somehow or other as a normal newborn he was taken to the Children's Medical Research Foundation nursery. The paediatrician at the time [...] produced a wealth of papers on cardio-respiratory function in neonates. There is no suggestion about where he got his control groups from or his specimens. I am concluding perhaps that for a child who was taken there for no other reason and given these doses of Phenergan, it seems that it certainly merits quite a deal of inquiry. This particular woman made further inquiries with the Children's Medical Research Foundation and they not knowing her story or why she was calling were almost flippant about the practice.

The Hon. Dr A. CHESTERFIELD-EVANS: What year was that?

Ms FARRAR: Hers was 1966. Interestingly, my son's nursery records had been on microfiche. However, when I finally got the hard copy my son's nursery records from 1965, which is when this practice apparently was continuing as well, were missing. You get very suspicious and cynical after a while.

(The witness withdrew)