6 September 2023

Hon Peter Foster MLC
Chair, Legislative Council Standing Committee
on Environment and Public Affairs

By email: env@parliament.wa.gov.au

Dear Mr Foster

Re: Inquiry into past forced adoptive policies and practices

The WA Branch of the Royal Australian and New Zealand College of Psychiatrists (RANZCP) welcomes the opportunity to provide a submission to the Inquiry into past forced adoptive policies and practices in Western Australia.

The RANZCP is a membership organisation that prepares doctors to be medical specialists in the field of psychiatry, supports and enhances clinical practice, advocates for people affected by mental illness and advises governments on mental health care. The RANZCP WA Branch represents almost 620 members, including over 460 qualified psychiatrists and 155 members who are training to qualify as psychiatrists. The RANZCP also partners with people with lived experience, including through a community member on the RANZCP WA Branch Committee, to ensure that the RANZCP considers the needs, values and views of the community throughout its work.

The RANZCP WA Branch acknowledges the profound impact adoption can have on all individuals involved, and supports the apology for forced adoption practices which was given by the WA Parliament in October 2010, and by the Australian Government in March 2013. We also support the formal apology provided by King Edward Memorial Hospital on 20 March 2023. Forced adopted practices have widespread impacts on a range of individuals and we acknowledge the pain and trauma that was and continues to be experienced by adopted people, their mothers, fathers, siblings, extended families, and the broader community as a result of the past adoption practices in Western Australia. Forced adoption practices can cause significant and complex psychological and emotional trauma with a myriad of painful enduring consequences. Research demonstrates that children and family members involved in forced adoptions can exhibit a range of responses associated with complex trauma, such as depression, anxiety and post-traumatic stress disorder (1-3).

Beyond the health and wellbeing impacts outlined above, forced adoption of Aboriginal and Torres Strait Island children can have severe social and cultural impacts which extend across generations (4). Evidence from the Bringing them Home report, discussed further in RANZCP Position Statement 42: Apology for the role played by psychiatrists in the Stolen Generations, shows how the removal of children from their families and communities can
lead to higher instances of ill health, incarceration, substance misuse, mental health issues, self-harm, suicide and mortality (5). The psychological trauma caused by forced removal of children has lifelong, community and intergenerational mental health consequences.

**Psychiatry and forced adoption**

The RANZCP WA Branch has consulted with members about the role that psychiatrists played in forced adoptions, and heard from two retired psychiatrists who held senior leadership positions in Western Australia in the 1960s and 1970s. Neither had any recollection of psychiatrists having any direct involvement in forced adoption practices. The Librarian at the Psychiatry Services Library at Graylands Hospital also conducted a search for the RANZCP WA Branch and found no information about the role of psychiatry in past forced adoptions.

Neither of the retired psychiatrists had direct experience of treating women for issues arising from forced adoption, however one spoke of the impact of unwanted pregnancies: 'I've seen the things the young women did to get an abortion, and watched as they died in hospital after backyard abortions.'

**Services for people impacted by forced adoption**

Appropriate and targeted information, counselling and support is needed for people impacted by past adoption practices (3). Participants in the National Research Study on the Service Response to Past Adoption Practices identified psychological assistance as a key priority for their ongoing wellbeing, alongside validation and acknowledgement of their audience (3). Targeted specialist mental health services, which are appropriately staffed by a multidisciplinary mental health workforce, are required to support those who have experienced force adoption and to address the ongoing impacts of these experiences.'

The RANZCP WA Branch would like to emphasise the importance of providing mental health treatment and support for individuals affected by forced adoption, in line with the principles of trauma-informed care. This includes the following principles, drawn from a range of sources:

- Recognising trauma and its impacts, including effects on affect regulation and brain physiology
- Promoting services that are physically and psychologically safe
- Using respectful approaches to eliciting traumatic histories and responding appropriately to suicidality and disclosures of trauma
- Being culturally competent, aware of transgenerational transmission of traumas and sensitive to gender, sexual orientation, ethnicity and age dimensions in trauma
- Supporting individual control, choice and autonomy through the provision of flexible, collaborative, individualised and respectful care that acknowledges developmental needs
- Acknowledging the impacts of trauma as adaptive, and working from a strengths-based framework to facilitate empowerment and recovery
- Facilitating holistic care characterised by integration and continuity of services (7-9)

It is important to note also that individuals who have experienced trauma may experience re-traumatisation through coercive interventions or sexual and/or physical abuse in institutional settings, including psychiatric and justice environments (10). This should be a key consideration in the development and implementation of services for individuals impacted by forced adoption.
Furthermore, the RANZCP WA Branch considers it essential that services for Aboriginal and Torres Strait Islander peoples who have been impacted by forced adoption are culturally appropriate and responsive. As part of this, mental health services and practitioners must be able to understand the differing impacts of trauma for individuals from different cultural backgrounds and be able to provide culturally appropriate and responsive interventions.

Further research is required to provide a strong evidence-base for interventions for people who have experienced or have been impacted by forced adoption. Such research will help to ensure that efficient and appropriate support can be provided to those who may be at greater risk of mental illness and should be made a priority for WA Government funding.

Please do not hesitate to contact me if you would like to discuss the above. I can be contacted via the RANZCP WA Branch Senior Advisor, Policy, Advocacy and Educational Development, Gillie Anderson at gillie.anderson@ranzcp.org or on 6458 7802.

Yours sincerely

Dr Michael Verheggen
Chair, RANZCP Western Australia Branch